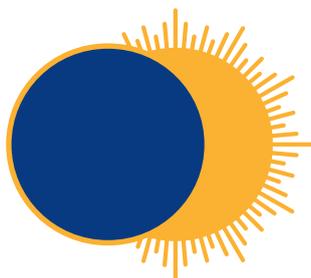




# Our plan for the future

2018 – 2022

moving towards growth



Royal Hospital for  
Neuro-disability



# Introduction

**The RHN has a proud and successful history of caring for adults with complex brain injuries since 1854.**

Our services today are more important than ever. We provide expert clinical care, and as a charity can provide a range of additional services to enhance quality of life for our patients and residents.

Following the publication of our Plan for the Future in 2016, which we summarised as 'Fix it then Grow it', we're ready for the next phase of planning. This document covers plans from 2018 until 2022.

## **Our mission**

Founded in 1854, our mission is to meet the complex needs of people with profound disabilities arising from brain injury. We are a well-respected charitable hospital and research centre, providing services for adults.

Our Putney based community provides specialist care, therapies and innovative technologies. We pride ourselves on caring for our patients as individuals, offering hope, as well as practical and emotional support to them and their families.

## Our values

We have four values that are central to everything we do and help guide all aspects of our work.

**Seeing the whole person** – taking an interest in every aspect of our patients, residents and each other.

**Willingness to learn** – learning through education, experience and being open to new ideas.

**Delivery on promises** – do what we say we will do, in the time and to the standard we promised.

**Honesty and integrity** – to be open, truthful and professional at all times.

Our primary beneficiaries are patients and residents, but caring for their families is also an important part of what we do, and makes the RHN stand out from other providers.

## The RHN's current position

At the moment, the RHN is a major player in the neuro-disability field, providing 20% of Level 1/2a rehab beds in London, and 33% of Specialist Nursing Home (SNH) beds in London and the south east.

Our residents come from a number of areas across the UK. Most are from London, some are from nearby counties, and others are from further afield such as, Dorset, Leicester, Brighton and Norfolk.

## Our key areas of focus in this strategy are:

- Growth of around 10% in patient numbers (which is an additional 20 beds)
- Following a clinical action plan to ensure the highest standards of care for our patients and residents
- An extensive ward refurbishment programme
- Continued investment in staff, focusing on leadership development, the Putney Nurse and HCA programmes and developing new initiatives, such as the 'Putney Way'
- Significant investment in our IT systems
- Maintaining sustainable finances so we can meet our investment goals
- Effective fundraising
- Following a research and education programme that improves our patients' experience and outcomes whilst building on our external reputation.



## Current services

NHS England commissions bed days within our Brain Injury Service (BIS) to provide specialised rehabilitation for patients with highly complex needs. It also purchases outreach sessions provided by our AAC Service. Continuing Care (CC) is commissioned by Clinical Commissioning Groups (CCGs), although a small number of residents are funded by social services.

We currently have 220 patients and residents:



### Brain Injury Service

– Service for patients

Three wards

Approximately two thirds of patients have a prolonged disorder of consciousness (PDoC)



### Continuing Care

– Service for residents

### Specialist Nursing Home

Six wards

Approximately half of residents have a prolonged disorder of consciousness (PDoC)

### Huntington's Disease service

Two wards

### Ventilation service

One ward

### Behavioural

One ward

## The current market

We operate in a very competitive marketplace, but also work in collaboration with many of our partners. The principal competitor to our Brain Injury Service is the NHS, whereas most of the competitors to Continuing Care are in the private sector.

### Brain Injury Service (BIS)

Service for patients who come to the RHN for rehabilitation.

**Blackheath Thames Brain Injury Unit** south-east London – The Huntercombe Group

**Northwick Park Hospital** Harrow – London Northwest Healthcare NHS Trust

**Wolfson (St George's Hospital)** south-west London – St George's University Hospitals NHS Foundation Trust

**Lishman Unit (Maudsley Hospital)** south London – South London & The Maudsley NHS Trust

**Homerton Hospital** east London – Homerton University Hospital NHS Foundation Trust

**University College London Hospital** central London – University College London Hospitals NHS Foundation Trust

### Continuing Care (CC)

Service for residents who come to the RHN for long-term care.

**Jacobs Neuro Centre** Sawbridgeworth – Ramsey Healthcare UK Operation Ltd

**Garden's Centre** Sawbridgeworth – Ramsey Healthcare UK Operation Ltd

**Fairlie House** West Norwood – Fairlie Healthcare

**Highfield House** Croydon – Fairlie Healthcare

**Kings Lodge** Redhill, Surrey – The Buckinghamshire Group

**Raphael Medical Centre** Kent – Raphael Medical Centre Ltd

**Holy Cross Hospital** Haslemere, Surrey – Daughters of the Cross (registered charity)





## Future growth of the RHN

In order to develop our growth strategy, it is important to take into account the ever-changing healthcare market in which we operate. As such, the following considerations have been applied during our analysis of the market:

- Demand
- Income and financial viability
- Investment required (workforce/estate)
- Risks and benefits
- Cultural fit

There is a continuous need to ensure we keep abreast of changes in the NHS, and to be aware of emerging medical advances, ethical issues and how this impacts our patients, residents, staff and their families.

We will also continue to link in with the wider NHS community to influence and deliver effective care.



## Priority growth options

After a detailed analysis of our competitors and conversations with our commissioners, we have considered the future plans of NHS England (who commission the BIS) and the requirements of Clinical Commissioning Groups (CCGs), the main commissioners of Continuing Care.

### **Additional ventilated beds**

Our ward for patients requiring ventilation, The Jack Emerson Centre, is operating at full capacity, but there is a continuing demand, for services in this area where we have great expertise. It is therefore a priority area for further expansion.

### **Additional Specialist Nursing Home beds**

Our experience with commissioners shows that generally there is unmet demand for people requiring long term continuing care.

### **A young adults unit**

We are aware of the lack of dedicated facilities for children with brain injury once they reach the age of 18, and therefore regard providing a service for young adults (18-25yrs) as an area of priority.

### **Expanded education and training provision**

Dedicated research and education would present opportunities for us to share specialist skills in dental care, nursing and therapies with clinicians within neuro-disability care. We will also offer our Putney Nurse and Healthcare Assistant programmes to professionals outside of the RHN.

## **From our analysis, other areas under consideration are:**

### **Level 1 rehabilitation**

This is a core service for the RHN and we will look for opportunities to expand our market share and respond to demand when it arises.

### **Level 2 rehabilitation**

Expansion of services into Level 2 rehabilitation as part of the Brain Injury Service remains under consideration.

### **Level 1 behavioural service**

Some of the brain injury rehabilitation and behavioural cases referred to the RHN are increasing in complexity and there is a waiting list for neuro-behavioural rehabilitation at Level 1 in London. The RHN has the in-house expertise to support this level of care.

### **Outreach services**

Therapy services for patients receiving continuing care in their own homes or in nursing homes such as wheelchair or postural management.



## Clinical care

**Working to a clinical strategy will help us achieve high quality service and monitor our progress. The RHN clinical strategy includes input from Medicine, Allied Health Professionals (AHP) and Nursing. It also considers the critical relationships between patient care, research and education.**

### Guiding principles

Doing the basic things well is a key component of this strategy. Many of the patients at the RHN depend on clinical staff to fulfil activities of living, such as breathing, eating, washing, and moving.

Providing choice where possible, enabling best interest decision making, and supporting patients to live well whilst being dependent on others, are critical elements of a high quality service.

We believe we will achieve clinical excellence with:

- an excellent CQC rating and consistently working on improvements
- ward based leadership structures, with ward managers coordinating a multidisciplinary team
- use of the latest technologies to care for patients and residents – such as:
  - a fully functional electronic patient record (EPR) system
  - clinical staff using approved hand-held devices to access patient data



## Other areas of focus

### Increased access to services

By providing access to the appropriate therapeutic and leisure activities seven days a week, we will increase opportunities for patients and families to choose how best to spend their time together.

### Clinical staff

We are committed to developing innovative and creative roles which support the recruitment and retention of a vibrant, talented, competitively rewarded multi-disciplinary team and which promote career progression.

### Enhanced care on site

We will provide an enhanced medical care service for patients who become unwell and would otherwise require transfer to acute hospitals, meaning that many patients will be able to be treated on site. Developing intravenous therapy capability is essential for this to occur.

### End of life care

We will grow our capabilities to provide choice and compassionate, sensitive and supportive end of life care.

### Ethics

We aim to become leaders in the field of ethics and ethical decision making in neuro-disability and neuro-palliation.



## Our estate

**We must use our land and buildings effectively and as efficiently as possible, so to do this we have plans to invest heavily in our estate, including:**

- refurbishing and renovating clinical and non-clinical areas
- upgrading staff spaces and facilities, including accommodation
- working with partners to expand teaching and research on site, thereby raising our profile and increasing fundraising
- creating capacity to enable growth
- bringing Haberdashers House back into commission
- rectifying longstanding backlog maintenance issues.

The RHN is in a prime location in a desirable part of Putney, with impressive buildings, grounds and gardens. Our main refurbishment programme started with our reception, kitchen and restaurant, and we are committed to a five-year ward refurbishment programme. Our first refurbished ward, Drapers, will be a warm, welcoming environment for patients and their visitors that promotes the health and wellbeing of patients and staff. There will be increased opportunity for patient self-practice and huge improvements in privacy and dignity.

The Therapy Hub will be a cutting-edge space that is uplifting, dynamic and flexible. Contained within it will be quiet spaces, a sensory room and clinic spaces.

## Capital works timeline

Project	Expected completion
Bring Haberdashers House back into clinical use	Spring 2019
Refurbish Drapers ward and create the Therapy Hub	2019
Cathcart and Evitt wards refurbishment	2019
Another two wards refurbished	2019 / 20
Completion of all ward refurbishments	2022 / 23





## Finance

**In order to invest in our services and grow, we need to generate more money that we spend. Over the past three years, we have gone from an annual loss of almost £3 million to a surplus of around £600,000**

The financial turnaround was achieved, not just by robust cost reduction, but also by renegotiating the value of contracts for BIS with NHS England and for Continuing Care (CC) with NHS Clinical Commissioning Groups. Whilst continuing to manage our cost base, we will also negotiate annually with funders to ensure income is uplifted appropriately and covers costs.

Over the last three years, we have turned our finances around from a hospital deficit of circa £3 million to a surplus of circa £600k, as well as making a positive net contribution from charitable activities. Improving the operational surplus is the main strand of the financial strategy.

### **Our financial targets will be met as we:**

- Become more efficient through benchmarking, to reduce outlier costs to sector norms and deliver value for money.
- Achieve sustainability and excellence delivering surpluses that can be reinvested in services.
- Ensure we are cost efficient.
- Generate returns from investments that can be reinvested in services.
- Increase fundraising income generated from wills, corporate donations, trusts and foundations supporting particular projects, regular individual donations and more substantial one off donations.
- Transform the nurses' home to provide high quality accommodation thereby aiding recruitment and retention; but also to guarantee commercial income.
- Maintain a "nil borrowing" approach to financing major projects unless the business case makes sense for alternative methods to be explored.

## Maintaining a surplus

Accumulated surpluses from previous years along with future surpluses will be used to deliver our capital programme that encompasses a programme of improvements to hospital infrastructure, IT and equipment.

In the financial year 2018/19, we set a target to reach a hospital income and expenditure surplus of £605k. We intended to contribute a surplus on charitable activities of £1.5 million.

We also hold £24 million of investments of which £4 million is in cash. These investments are available for use on capital programmes in addition to funds generated from operational surpluses.

We also increased activity in 2017/18, by delivering extra BIS waiting list work and expanding volume in both BIS and CC. Sustained increases in activity form the basis for patient related income and expenditure projections over the life of the current five-year financial plan.

In addition to patient related income, fundraising targets are increased annually by £150,000 providing the opportunity to fund additional research being conducted at the RHN and to contribute to the ambitious refurbishment programme being undertaken.

Over the five years there are certain cost pressures, including keeping staff pay competitive and the maintenance of our Victorian estate. There will continue to be a focus on managing agency costs through the recruitment of nurses and healthcare assistants.

The five-year financial plan also incorporates a £2,314,000 cost reduction programme covering both pay and non-pay budgets. The single largest saving being targeted is reducing agency nurse premiums by recruiting more permanent and bank staff. To aid the latter, we have introduced weekly pay for bank nursing staff.

A summary of our financial targets over the period of this strategy is given below.

	Budget	Forecast			
	2018/19	2019/20	2020/21	2021/22	2022/23
Hospital income	37,781	39,384	40,699	41,301	42,309
Hospital expenditure	(37,176)	(38,785)	(39,846)	(40,613)	(41,726)
<b>Hospital surplus</b>	<b>605</b>	<b>599</b>	<b>853</b>	<b>688</b>	<b>583</b>
Fundraised income	3,400	3,550	3,700	3,850	4,000
Cost of charitable services	(1,901)	(1,961)	(2,016)	(2,073)	(2,132)
<b>Net fundraised activity</b>	<b>1,499</b>	<b>1,589</b>	<b>1,684</b>	<b>1,777</b>	<b>1,868</b>
<b>Operating surplus</b>	<b>2,105</b>	<b>2,188</b>	<b>2,537</b>	<b>2,464</b>	<b>2,450</b>
EBITDA	1,806	2,047	2,519	2,624	2,767
Capital spending	4,845	4,258	5,414	4,956	5,354
Cash balance at year end	659	1,117	586	711	672



# Fundraising and Communications

## Voluntary sources of income

As a charity, approximately 10% of our overall income is generated through voluntary sources. This funds many of our services which are not covered by NHS England or commissioning. These include ambulances, art occupational therapy, chaplaincy services, music therapy, capital refurbishment programmes and trips out for our patients and residents.

Currently the fundraising team generates income from six areas:

Community and events	Corporate fundraising
Legacies	Major donors
Donor development	Trusts and Foundations

## The money that we raise goes to a range of services, including:

- Aquability pool sessions
- Computer therapy and specialist communication aids
- Leisure and Family Services (including disability sports)
- Music therapy
- Nurse escorts and transport for patient trips
- Occupational therapy art
- Onsite multi-faith chapel services
- Our programme of research
- Physiotherapy equipment and hoists
- Specially-adapted wheelchairs

The fundraising team's key objectives are to increase income every year to support activities and services across the hospital, raise significant funds for capital appeals and to introduce new income generation tools to attract new audiences.

As part of our overall target, we continue to raise money for large capital works, including the refurbishment of one of our Brain Injury Service wards and the creation of the Therapy Hub – a purpose built state of the art rehabilitation facility.

In 2017/18 the team's target was £3.25 million, this will rise to £3.85 million in 2021/22 – an increase of £150,000 each year.

## Communications

The vision for fundraising and communications five years from now is that the RHN has a strong and recognised brand with consistent investment. This stability will result in professional and public awareness and engagement. Staff within the RHN will have strong engagement with the team and be ambassadors for the hospital and the wider RHN community.

The team is working to improve recognition of the hospital, our brand and our work to inspire existing and potential supporters. This will be done by:

- Refreshing our branding
- Investing in online and digital advertising
- Promoting RHN heritage and history to engage new supporters with different interests
- Share more about our research team and their successes
- Engaging the local community with events and activities onsite

The communications team's key objectives are to raise awareness of the RHN brand locally, regionally and nationally through external relationships and PR and to market our services to key providers while supporting growth.

Additional aims are to have well engaged staff who will be ambassadors for the hospital, and an external profile that positions the RHN at the forefront of innovation, quality and research in neuro-disability.

## Strategic outcomes

Our connections with external stakeholders will be improved and sustained, yielding donations and harnessing the potential of our heritage. We are committed to developing an external profile that positions the RHN at the forefront of innovation, quality and research in the field of neuro-disability. As a specialist hospital, we aim to grow our reputation for excellence in the dynamic and evolving healthcare landscape.

The opportunities for growth in fundraising are intrinsically linked with communications and the development of our brand. The growth in income will also be determined by investment in growing our database.

Generating voluntary income has never been tougher, particularly with economic pressures and a competitive charity marketplace. Growth can be achieved through targeted donor acquisition and continued donor support, but much remains uncertain in an already challenging market.



# IT

(both to support our people  
and our clinical care)

## **We will use technology to transform how we care for our patients and residents; and to improve our overall operational efficiency.**

Technology will allow us to improve how we work by:

- Developing an Electronic Patient Record (EPR) to improve patient and resident care
- Delivering more systematic, high-quality care
- Engaging better with patients and residents
- Improving the management of resources
- Providing a means of achieving a cycle of continuous improvement
- Delivering regulatory compliance
- Reporting quality metrics accurately, completely and efficiently
- Providing real time data for up to the minute decision making
- Reducing the RHN's carbon footprint by reducing reliance on printed materials

We will keep abreast of advances in digital technology systems. These will support good governance and aid the delivery of high quality care ensuring that patients are empowered to live their lives as independently as possible with the freedom to make choices.



## Our people

**We will promote the personal development of all of our staff in the best ways we can, by creating an environment that supports staff empowerment and development.**

**Attracting and keeping the best people is a firm priority, so to achieve this, we aim to:**

**Our aim is to:**

- Continue to promote social activities such as the RHN Festival
- Be an Employer of Choice
- Empower all staff and encourage everyone to realise their full potential
- Develop our culture through the 'Putney way'
- continue to promote and celebrate our diverse culture
- Become an apprenticeship centre
- Focus on recruitment and retention

Our staff will benefit as we continue to develop our leadership programme and invest in organisational development. We will continue to recognise the achievements of, and celebrate the diversity in our staff to create and maintain a respectful, inclusive and motivated workforce.

Our integrated recruitment and retention strategy will be developed further and we will provide tailored training and learning opportunities.



## Research and education

**Building the RHN's reputation as a leader in neuro-disability is vital to us and key to our overall strategy. Underpinning what we do in research is very important to us and we are currently reviewing our research strategy which will be published later this year.**

We believe that care backed up by research is the way to offer our patients and residents the best possible care and outcomes.

Our objectives include:

- Establishing PhD studentships
- Ensuring we create the right environment to carry out cutting edge and ethical research
- Starting a national and international visitor programme
- Developing an authoritative approach to clinical management of people with complex disabilities
- Increasing research funding and employing new researchers



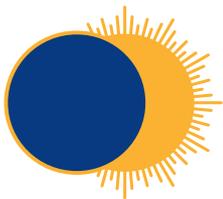
## In conclusion

Over the next five years, we have committed to investing in our people and our estate. Over this period we will see improvements to our technology and infrastructure, our clinical environment and our staff facilities, while also focusing on growth.

We are creating a better environment to live in, to work in, and increasingly, to socialise in.

As ever, the people who will benefit will be our patients, residents and their families – the people at the heart of our community.





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