



**NHS**

**Birmingham and Solihull  
Mental Health**  
NHS Foundation Trust

# *Our Trust Five Year Strategy*



**compassionate**



**inclusive**



**committed**

January 2021

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# Welcome to our new Trust strategy

## One vision

Improving mental  
health wellbeing

## Three values

Compassionate  
Inclusive  
Committed

## Four strategic priorities

Clinical services  
People  
Quality  
Sustainability

Welcome to our new Trust strategy which sets out our direction of travel, ambitions and priorities for the next five years.

This strategy has been co-produced with our staff, our service users, families and carers and our partners to make sure we truly have a common vision and shared values for the future.

Like others across the NHS we are facing increasing challenges every day – such as increasing demand for our services, demographic change through a growing and ageing population, a shortage in workforce supply and financial constraints. We know that there is more we need to do to make our Trust a compassionate and inclusive place to work, a place where we can all be the best version of ourselves irrespective of our identity and background and where we feel safe to speak up and learn from things that go wrong. This year has been one of the most difficult years ever for the NHS as we have had to respond to the COVID-19 pandemic, which fundamentally changed the way we had to work.

Yet, this is also an exciting time for us as we respond to these challenges.

We are breaking down barriers by collaborating and working in partnership in ways we have never done before, across systems, across sectors and across organisations, to transform how we deliver care together, improve outcomes and meet the needs of our population in a truly integrated way.

As a Trust we are on a real journey of improvement, as implementation of our quality

improvement approach gains momentum and starts to underpin more and more of what we do.

Our refreshed values as well as our new leadership framework will be a key enabler in embedding a 'just' culture of inclusion, compassion and safety and helping us tackle discrimination so that everyone has equal opportunities to thrive.

The technological opportunities now available to us are vast. Over the past six months through the pandemic we have shown that we can quickly implement new digital approaches which have enabled us to work in a more flexible, agile and productive way and for many enabled better work-life balance. We want to hold onto many of these changes we have made and go further, transforming how we work and becoming more sustainable for the future.

We believe our strategy will give us the direction and focus to make our Trust a better place to work, make sure our service users are at the heart of what we do, and improve the quality of care we provide. It will also enable us to provide increasingly integrated care with others and tackle the very evident health inequalities in many of the communities we serve.



**Roisín Fallon-Williams**  
Chief Executive



**Danielle Oum**  
Chair

## About us

We provide a wide range of mental healthcare services for the residents of Birmingham and Solihull, as well as some specialist regional and national services to communities in the West Midlands and beyond.

Our population is culturally diverse, characterised in places by high levels of deprivation, low earnings and unemployment. These factors create a higher requirement for access to health services and a greater need for innovative ways of engaging people from the most affected areas.

We pride ourselves on our wide range of local and regional partnerships across the NHS, voluntary

and charitable sector, local government, education and private sector to make sure we have integrated services and pathways to meet the needs of the people that we serve.

We are committed to being a learning organisation and have collaborative partnerships with our local universities and academic institutions to help us provide high quality evidence based care through education and research. We provide medical, nursing and psychology training and we have a regional, national and international reputation for both research and innovation.

### Our Trust

**We provide care for  
c71,000 service users  
(2019/20)**

**c4,000 staff**

**12,475 members  
(at 31 March 2020)**

**c700 inpatient beds**

**c£260m income  
(2020/21)**

**40+ sites**

**– inpatient and community**





# About us

## Our services

Acute and Urgent Care

Integrated Community  
Care and Recovery

Specialties

Secure Care and  
Offender Health

## Our population

1.3 million population in  
Birmingham and Solihull.

42% of Birmingham residents  
identify with a non-white  
ethnic group.

Homelessness rate in Birmingham  
more than three times the  
England average.

**We are both young and ageing:**  
Birmingham is the youngest core city in  
Europe, with almost half our population  
under 30.

46% of our population live in  
10% of most deprived areas  
in England.

100+ languages spoken in  
Birmingham.

Unemployment rate in  
Birmingham 2.5 times higher  
than the England average.

Solihull has an ageing population with  
21% over 65.

1 in 3 children live in poverty.

Nationally 1 in 4 will have  
mental health problems.



# How we have developed the strategy

## Co-production at the heart

It is important to us that our strategy is real and meaningful to our staff, reflects what is important for our service users, families and carers, and is aligned to the plans and aspirations of our partners.

We carried out one of the largest engagement exercises we have ever carried out, over a period of ten months and using a variety of mechanisms, to ask what values we wanted to live by, what our key areas

of focus should be, and what we needed to change by 2025.

Throughout this document we have represented some of what was said to us in speech bubbles so you can see how we have responded.

We had so much energy and enthusiasm throughout all of our engagement and we are hugely grateful to everyone who participated for their views and for helping shape our future direction.

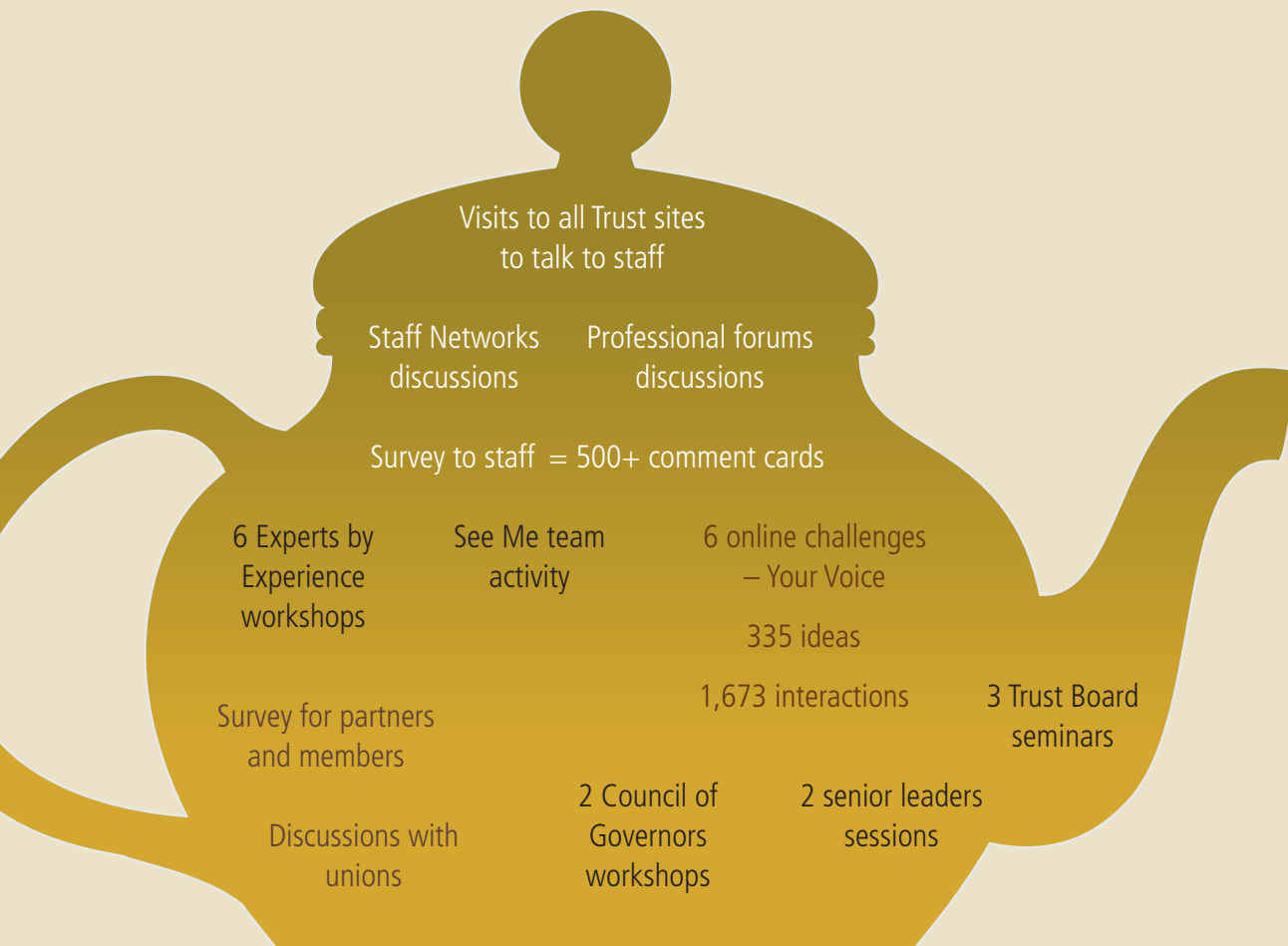
## Phase 1: Help us brew up our strategy

**November 2019 – February 2020**

Our engagement started with a widespread campaign to get people's views on what the 'ingredients' of our strategy should be, asking people to take a few moments out of their day and have a cup of tea to reflect on what was important to them. We asked about our four priorities of clinical services, people, quality and sustainability, as well as what our values and behaviours should be.



The strategy has been awarded the Trust's Recovery for All Quality Mark, for demonstrating the principles of recovery and co-production with service users and carers.



# How we have developed the strategy

## Phase 2: Learning from COVID-19

May – July 2020

When the COVID-19 pandemic hit us in March, we had to very quickly adapt our ways of working so that we could continue to provide our services in a safe way. We decided to spend some time evaluating these changes and asking our staff, service users and carers what their experience of these changes had been and what we should stop, continue and improve. This helped inform how COVID-19 would impact our future strategy.

Online survey, focus groups and one-to-one interviews with service users and carers

Sharing learning with partners

45 workshops with staff

Triangulation with data

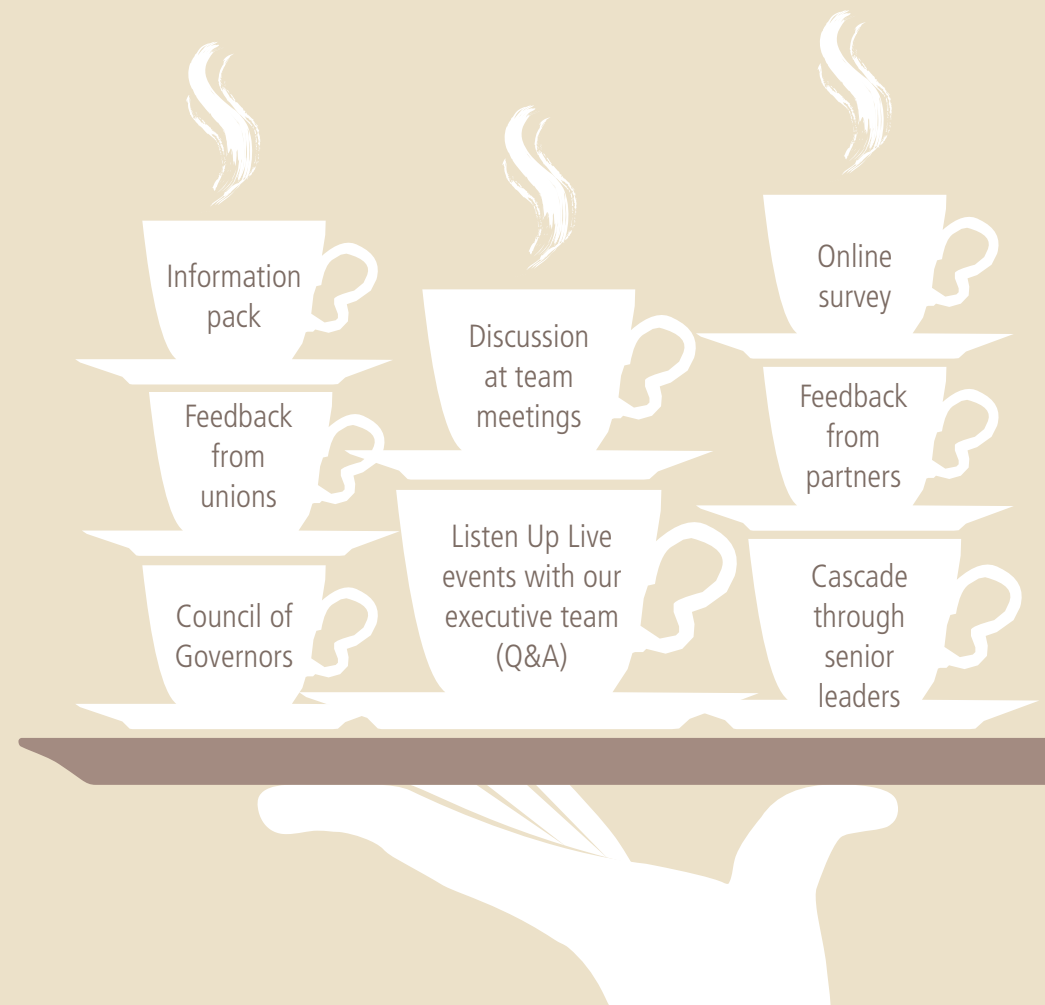
Online feedback

Staff reflection tools

## Phase 3: Taste our brew

August – September 2020

We wanted to finish our engagement with a campaign to test the contents of our strategy before taking it to Trust Board for approval. This asked people whether they felt we had heard what they had told us, whether we were focussing on the right areas and how they thought the strategy would make a difference to them.



# What we heard

We had so much brilliant feedback and it has all been really useful to help inform our strategy. The messages coming from our different stakeholders were broadly consistent and some clear themes emerged which we have summarised here. This, and all of the detailed feedback we received, has been taken into consideration in developing our strategy.

It's really clear that this strategy has been widely co-produced.

Our service users, carers and staff will have real ownership of the strategy because of how it's been developed.

It's great that the strategy team listened and then came back again to check with us.

## Clinical services

- Demand for our services is high and our staffing levels don't meet this.
- Our care needs to be truly tailored to service users' needs, whether they are medical, social or emotional.
- We need more joined up working across our services – both in planning and delivery of care.
- We can't work on our own – we need effective pathways with GPs, third sector, social care etc.
- We should focus on clinical effectiveness and how we know our service users are getting better.
- A recovery approach should be taken throughout the service user journey.

## Quality

- We need to be better at giving feedback on things that we do well.
- Service user co-production needs to be through all processes and activities.
- We shouldn't make staff feel they have done something wrong if there is a serious incident.
- Let's encourage staff to share ideas and empower them to become involved in change.
- The Quality Improvement approach is good and needs to be embedded in everything we do.

## People

- An inclusive and compassionate work environment is essential.
- We need solutions to our workforce gaps and supply issues.
- Improve retention through a positive staff experience.

- We need to be able to tackle behaviours not in line with our values.
- More flexibility, career development and progression opportunities are needed.
- How can we work better as effective teams.

## Sustainability

- We need to take a more focussed approach to making savings.
- Our buildings should be fit for purpose.
- Can we have more IT solutions to enable different ways of doing things.
- Closer working with commissioners and partners to improve pathways.
- A greater emphasis on the environment.

## Learning from COVID-19

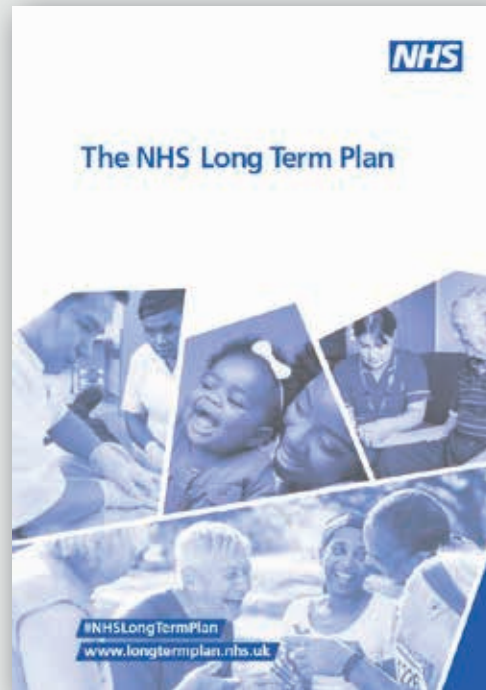
- New technology was embraced and really helped us work differently.
- It's important to consider service user choice and clinical need when embedding different modes of contact e.g. telephone, video, face to face.
- Staff feel trusted to work more flexibly with a more person-centred culture for both service users and staff.
- We have had a can-do culture shift, where local services feel empowered to make changes as bureaucracy barriers reduced.
- There are concerns of burnout due to impact on services and acuity, and divisions in teams from impact of shielding, redeployments. Staff wellbeing is key going forwards.





# External influences

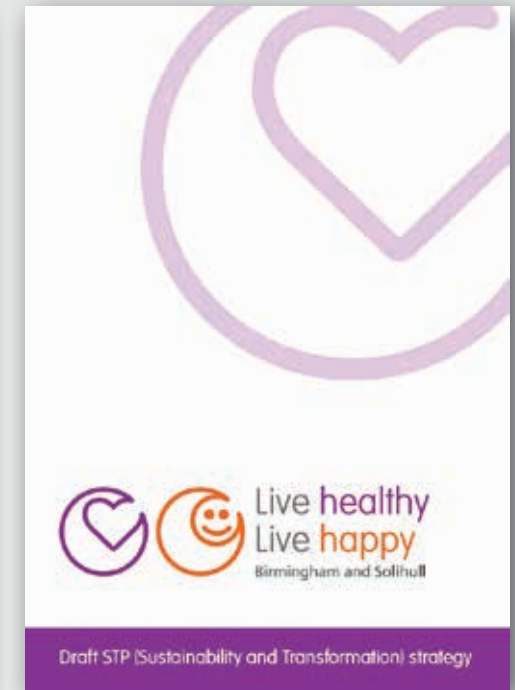
In developing our strategy, we have made sure that it aligns with the national direction of travel for the NHS as well as our local system plans and programmes of work.



The NHS Long Term Plan was published by NHS England in 2019 and sets out the priorities for healthcare over the next 10 years to improve quality of care and outcomes, based on the experiences of patients and staff.



The NHS People Plan was published by NHS England in 2020 and describes practical actions to look after our people, belonging in the NHS, delivering care through new ways of working, and growing for the future.



The Birmingham and Solihull Sustainability Transformation Partnership brings together local health and social care organisations to manage the health of our population collectively, and deliver better health and care within the resources available to us through joint planning and programmes of work.

We also deliver services in West Birmingham who are part of the Black Country and West Birmingham STP.

# Our values

Our values are our guide to how we treat ourselves, one another, our service users, families and carers, and our partners.

Our values were developed by listening to feedback about what people wanted to see and experience when working for us, with us or accessing our services.

## Compassionate

- Supporting recovery for all and maintaining hope for the future.
- Being kind to ourselves and others.
- Showing empathy for others and appreciating vulnerability in each of us.

## Inclusive

- Treating people fairly, with dignity and respect.
- Challenging all forms of discrimination.
- Valuing all voices so we all feel we belong.

## Committed

- Striving to deliver the best work and keeping service users at the heart.
- Taking responsibility for our work and doing what we say we will.
- Courage to question to help us learn, improve and grow together.



Our values describe our core ethics and principles. They help guide our culture by inspiring people's best efforts and constraining unwanted actions that do not align with our values.

Our values will only make a difference when we each let them guide our own thoughts, feelings, decisions, attitudes and actions. The more we demonstrate our values through our work, the more likely others are to experience our values when working with us.

Our everyday and detailed behaviours describe what our values look like in practice. They give us a shared language to help bridge the wide range of specialties and roles in our Trust.



## Our vision

Our vision describes what we want to achieve – our aspiration for the future. Our vision is at the heart of everything we do and every decision that we make.

Our vision is simple:

## improving mental health wellbeing

We believe we will need to work in four key ways to achieve this vision, and so these are themes running through our strategy:

### Driving change

Leading the way and encouraging collaboration across systems to develop joined up, integrated mental health services for our population.

### Continuous improvement

Continually seeking to question, improve, learn and innovate through our practices, our research and our developments.

### Working together

Co-producing our strategies and plans with our people, our partners and our service users, families and carers.

### Reducing inequalities

Working in a way that tackles discrimination, addresses stigma, and encourages equality for all.

# Our priorities

Our priorities set out what we will do to deliver our vision and live our values. They support us to stay focussed on what is important to us and make sure we are using our resources to do the right things.



We have four strategic priorities:



Over the following pages we have set out what the areas of focus will be over the next five years to achieve each of these priorities and there will be a separate supporting strategy for each priority. These strategies have been developed alongside one another to make sure they are aligned

and joined up, and we have considered the impact on each other and the dependencies between them. For example, the quality, people and sustainability strategies will all have a focus on ensuring that we are able to achieve the transformation we want to see in our clinical services.



# Clinical services

Transforming how we work to provide the best care in the right way in the right place at the right time, with joined up care across health and social care.

Better interfaces between Trust services – too many barriers

We can't work on our own – we need effective pathways with others

Care tailored more to individual needs

Stop repeating assessments and re-triaging

I want to feel listened to and my views taken seriously

A recovery focus from the beginning



## Leader in mental health

- Smooth interfaces and transitions between our own services.
- Transforming integrated pathways and services with primary care, acute trusts, police, social care, housing, and community, voluntary and independent sectors to manage demand across the system and improve outcomes.
- Developing an Integrated Care System for mental health across Birmingham and Solihull.
- Influencing decisions on the level of funding coming into mental health services to meet growing need.
- Challenging inequities between mental health and physical health.
- Being an advocate for mental health and influencing partners across the system to address health inequalities and causes of mental illness, such as poverty, debt, homelessness, gambling and unemployment.
- Provider Collaboratives across secure care (Reach Out), eating disorders, veterans, children and young people, and perinatal services.
- Refreshed model of healthcare in HMP Birmingham to meet changing needs.
- Recognising and celebrating our wide range of services.

## Recovery focussed

- Delivering personalised care:
  - Empowering service users to manage their own recovery, supporting them to have choice, control and self-management of their care
  - More effective, personalised care planning
  - Shared decision-making with service users
  - Considering the use of personal health budgets for all service users
  - Signposting to social prescribing where appropriate.
- A recovery approach from assessment and throughout the service user journey.
- Equipping our staff with the skills to deliver truly recovery focussed care.
- A family and carer pathway.
- More peer support workers and experts by experience roles.
- Supporting service users with employment through links with Individual Placement Schemes (IPS).
- A wide range of recovery opportunities, through our Recovery College for All and links with community and voluntary sector organisations.
- Using recovery outcomes measures.

## Clinical services

Transforming how we work to provide the best care in the right way in the right place at the right time, with joined up care across health and social care.

Links for housing and benefits advice

Services close to where people live

What community organisations are out there?

Clearer communication with GPs



## Rooted in communities

- Reducing inequalities through targeted work with over and under-represented groups.
- A culturally competent workforce with culturally sensitive services and interventions, removing barriers to access and experience.
- Tackling stigma across our communities.
- Transforming how we work in the community to be more place based, integrated in neighbourhoods with primary care, social care and the community and voluntary sector in an all age model that dissolves barriers between providers and manages demand and need effectively.
- Rolling out and integrating our models of Primary Care Liaison and multidisciplinary working.
- Reducing out of area placements and providing personalised care in the least restrictive setting:
  - By improving service user flow and length of stay in acute care
  - Through our Reach Out strategy for secure care services across the West Midlands
  - By transforming rehabilitation services.
- Expanding access to perinatal community services.

## Prevention and early intervention

- Working collaboratively with NHS, statutory, community and voluntary sector partners to deliver an integrated urgent care pathway across Birmingham and Solihull, including alternatives to admission for those in crisis.
- Enhancing mental health support to care homes.
- Integrated model of intermediate care/early intervention for older people, enabling people to be cared for at home and reducing time in hospital.
- Developing a 0–25 Children and Young People's model in Solihull.
- Widening our Birmingham Healthy Minds offer.
- Increasing awareness of veteran mental health and enhancing services for veterans through our Complex Treatment Service and new High Intensity Service.
- Developing services in partnership for rough sleepers.

Prevention matters just as much as treatment

More support early so people don't end up sectioned

# Clinical services

Transforming how we work to provide the best care in the right way in the right place at the right time, with joined up care across health and social care.



## Clinically effective

- A model that considers all of the needs of the service user: their mental, physical and social wellbeing; and wraps around the service user, working in partnership across professions and across other organisations to meet those needs.
- Trauma informed care.
- Increased psychological formulations and a range of interventions.
- Consistent model of multidisciplinary working with effective multidisciplinary leadership.
- Meeting national standards (e.g. early intervention and psychiatric liaison).
- Needs based pathways, for example personality disorder, neurodevelopmental.
- Clear models of care for our service users who have both mental health and substance misuse needs, including clear pathways with partner providers and collaborative care planning.
- Consistently using NICE guidance, evidence based interventions, and a range of outcome measures, informed by research.

## Changing how we work

- New roles and workforce models.
- Building on COVID-19 learning, enhancing use of technology to support transformation.
- Using Quality Improvement to ensure efficient and effective processes, for example to help manage demand, bed utilisation and service user flow effectively.
- Using data to drive decisions and transformation.
- Using our proposed new build developments for Reaside and Highcroft as opportunities to work in a different way.

More effective  
MDT working

More choice over  
therapies

Think about the  
service users' holistic  
needs

More direct time  
with service users

Using IT more to do  
things differently

More peer  
support workers

Can we use  
volunteers?

# People

Creating the best place to work and ensuring we have a workforce with the right values, skills, diversity and experience to meet the evolving needs of our service users.

## Shaping our future workforce

### Attract and retain diverse talent

- A strong employer brand which connects with our values and culture.
- A diverse workforce reflective of our population and service users.
- Values based approach to recruitment.
- Encouraging recruitment of those with lived experience.
- A positive new starter experience.
- Our people feel supported, valued, and engaged and are advocates of our Trust.
- A co-designed total reward and recognition offer.

### High performing workforce

- Upskilling and developing our people to meet the evolving needs of our service users and carers.
- Credible and convincing route inclusive maps for career development.
- Clear measurable objectives for all, linked to our strategy, values and behaviours.
- Positive approach to performance management to maximise potential for all our people.
- Having the right leaders with the right capabilities, developed through a supportive leadership framework.
- Multidisciplinary leadership approach.

### Flexible and transformative workforce models

- Flexible working that balances home and work life, building on COVID-19 learning.
- Thinking differently about our workforce models and what skills we need.
- Using our creativity and experiences to work collaboratively to enhance service user experience and recovery.
- Innovative new roles and ways of working.
- Working with our partners to improve workforce supply and address gaps.

We need to try new ways

How do I progress?

BAME, LGBT+ and disabled staff under-represented

More multidisciplinary working

Rotating staff around so they get new experiences

Destigmatise mental health

Get rid of the nine-to-five mentality





# People

Creating the best place to work and ensuring we have a workforce with the right values, skills, diversity and experience to meet the evolving needs of our service users.

Support staff with disabilities stay in work

Tech-savvy workforce

Systems as an enabler not a burden

Staff need to feel like they matter

Not a blame culture

Challenge poor behaviour

## Transforming our culture and staff experience

### Inclusion

- A step change in our approach to equality and inclusion, valuing the experience of our diverse workforce.
- A zero-tolerance approach to discriminatory and bullying behaviours.
- Championing and role modelling inclusion.
- Embedding inclusion in appraisals.

### Safety to speak up and share learning

- Making it safe to speak up and raise concerns or challenge behaviours.
- A culture of trust, empowering the sharing of ideas and learning.
- Shared accountability when things go wrong.

### Compassion and wellbeing

- Role modelling behaviours in line with our values.
- An enhanced wellbeing offer, incorporating learning from COVID-19, which includes recovery focussed support, enhanced mental health and psychological support, physical health, social and financial wellbeing.
- Everyone feeling involved and listened to in decision-making.

## Modernising our people practice

### Integrated people practice

- Working in an integrated way to support our leaders.
- Putting our people at the centre of our processes by considering their psychological and emotional impact.
- Getting the basics right with our data, processes and systems.

### Evidence based people practice

- Making sure systems hold accurate and credible workforce data.
- Using data and analytics to truly understand the needs of our people and improve staff experience.

### Digitally enabled workforce

- Using digital solutions to streamline or automate people processes.
- Supporting our workforce to use technology.



# Quality

Delivering the highest quality services in a safe inclusive environment where our service users, their families, carers and staff have positive experiences, working together to continually improve.



## Improving service user experience

- Co-production with experts by experience is business as usual.
- Increasing the number of experts by experience who work with us.
- A strong voice and shared decision-making with service users, families and carers about their treatment and care.
- Develop a Patient Safety Partner role for service users on our Patient Safety groups to give service users equality of voice and empowerment to speak up and contribute to changes that we make.
- Developing 'Always Events' to ensure a positive service user experience.
- Increasing the range of meaningful activities on our wards.
- Delivering our Family and Carer Involvement and Engagement Strategy.
- Delivering our Recovery for All Strategy.

## Preventing harm

- Working with Patient Safety Collaboratives to share learning.
- A new Suicide Prevention Strategy.
- Improving quality of clinical handover (both within teams and between services) and multidisciplinary approaches.
- Think Family, Safeguarding and Infection Control are part of everyday practice.
- Improving physical health alongside mental health.
- Reducing incidents of violence and aggression.
- Always using least restrictive practice approaches.
- Clinical Risk Assessment and Management training.

Peer support is so valuable

Service users' needs to be connected to their care plans

More service user activities – crafts, life skills, sports, music

Improve handovers when service users are transferred to another service

Take positive risks

Think Family throughout the service user journey

Restraint as a last resort

Doing better with physical health checks

# Quality

Delivering the highest quality services in a safe inclusive environment where our service users, their families, carers and staff have positive experiences, working together to continually improve.

More supervision and reflective practice

More peer review and audit

More clinical practice with compassion



## A Patient Safety culture

- High quality, meaningful clinical supervision in place routinely.
- Post incident and psychological support for staff.
- Improving how we learn from excellence and celebrate and recognise great practice.
- Embed a just and fair culture in our incident processes to identify system improvements rather than individual blame.
- We will have a strong and embedded approach to learning from incidents and serious incidents to improve practice, systems and care for service users that is wholly inclusive.
- Improving service user, family and carer experience of serious incidents and complaints.

Empower staff to share ideas and make changes

Sharing good practice – too much silo working

More support to staff following an incident

## Quality assurance

- A robust Quality Assurance Framework, assuring us of quality at all levels.
- Individuals are empowered to make changes to improve care and improve equity.
- Increasing numbers trained in and using quality improvement.
- Developing our own Care Quality Commission (CQC) Peer Review processes.
- The differing tiers of our quality improvement training equitably represent the diversity of our staff and experts by experience.
- Using data, including equality data, to understand and drive actions and decisions.

## Using our time more effectively

- Using digital technology to drive improvements in quality and safety.
- Using quality improvement to work more productively and efficiently.
- Increasing clinical time to care.
- Using evidence based practice supported by research as a routine way to inform transformation of care and services.

# Sustainability

Being recognised as an excellent, digitally enabled organisation which performs strongly and efficiently, working in partnership for the benefit of our population.

Using IT more to assist the work we do

Accuracy of data is important

What digital solutions are out there?

More video-conferencing

Short term investment for long term gain



## Balancing the books

- Spending less than we earn.
- Generating cash to invest in facilities, technology and services.
- A workforce that is financially aware with the right information and training to support them.
- Reducing non-pay spend, limiting the impact on our services.
- A framework for delivering recurrent savings over the lifetime of the strategy, recognising the opportunity that innovation, prevention and partnerships will make in delivering this.
- Financial improvement plans where needed.
- Managing financial risks and rewards with partners.
- Improving the way we price services to produce sustainable outcomes, especially incorporating new and innovative technological ways of delivering service.
- Clearly communicate our financial position, the implications and how resources are used.

Be open about how much resources are available

Honest conversations with CCGs

Staff at all levels to have awareness of our budgets

## Transforming with digital

- As a Global Digital Exemplar and highest scoring mental health trust on the Digital Maturity scale, continuing to implement innovative technologies to transform the care we provide, how we make decisions and enable new ways of working.
- Building on the opportunities from our rapid roll out of new ways of using digital solutions and technology during COVID-19, being brave to try new developments and remove barriers.
- Taking part in new digital research, adopting digital forms of service delivery underpinned by research and service evaluation.
- Shared care records and systems.
- Quality, safety and security of data and information flows.
- Business intelligence and data driving decisions and change.
- A workforce skilled in using new technologies.
- Making sure we consider the impact of technological developments on our service users and their recovery.
- Develop a technology roadmap following the publication of the Trust Strategy to determine how we implement the opportunities identified.



# Sustainability

Being recognised as an excellent, digitally enabled organisation which performs strongly and efficiently, working in partnership for the benefit of our population.



## Caring for the environment

- Greater focus on recycling and our wider environmental responsibilities, including our existing commitment to reduce the use of single-use plastics.
- A procurement strategy that ensures that minimising waste is a key element, releasing funds for investment in key priorities.
- Reducing emissions by building on the changes in how we have reduced travel during COVID-19, a green vehicle strategy, and responding to the impact of the Birmingham Clean Air Zone.
- Developing renewable energy solutions by investing in new technology during all developments of buildings and facilities, aiming to become a leader in providing mental health facilities utilising renewable energy.

## Good governance

- Well-developed corporate and clinical governance structures.
- Clear and robust governance processes to fulfil Reach Out and other Provider Collaborative Lead Provider functions.
- A clear Corporate Social Responsibility offer to benefit our communities, including stimulating social value through our supply chain and workforce.
- Internal and external communications that support good governance and promote our reputation, for example through our intranet, social media and external website.

Reduce waste and increase recycling

We spend too much time travelling and it's not green

We waste too much food

More flexibility to work from home

Need to be better at saving energy – heating, lights, computers left on

# Sustainability

Being recognised as an excellent, digitally enabled organisation which performs strongly and efficiently, working in partnership for the benefit of our population.

Partner with other local organisations so we don't duplicate initiatives

Tap into the local voluntary services better

It's hard to get partners on our systems and training

## Changing through partnerships

- Removing barriers to working in partnership, reviewing and refreshing our Partnership Strategy and providing a framework to provide clear guidance on how best to take advantage of all opportunities.
- Strategic alliances, formal partnerships and provider collaboratives to improve services, pathways and service user outcomes, share expertise and spread best practice, for example:
  - Birmingham Care Alliance with Birmingham Community Healthcare NHS Foundation Trust
  - Joint working with Birmingham Women's and Children's NHS Foundation Trust
  - MERIT partnership with the mental health trusts across the West Midlands
  - Reach Out provider collaborative, and lead provider, for adult secure care
  - A range of partnerships with the community and voluntary sector.
- Establishing an Integrated Care System for Mental Health in Birmingham and Solihull with a model that will help us to manage demand, improve safety and clinical outcomes, and ensure that we can provide sustainable services.
- Working with our partners in the Black Country and West Birmingham STP, ensuring that mental health services for West Birmingham are integral to Integrated Care System plans.
- Developing capabilities and capacity to fulfil our new commissioning responsibilities.



# How we will implement our strategy

Now that we have approved our new strategy, it is important that we have robust mechanisms in place to bring this to life and make sure that everyone is aware of the strategy and the part they and their teams have to play in its delivery.

## Our strategic framework

Accountability for plans, regularly reporting of progress and escalation of risks and issues.

Supporting strategies for key enablers and priorities within the strategy.

Clear business plans with annual goals and targets, that cascade through team and individual objectives.

Prioritisation of our work across the next five years.

Measures of success for each of our priorities, with a range of qualitative and quantitative metrics to assess our impact.

Regular touch points to check our direction and adjust if necessary.

Programmes of work across our business plans, programme management office, quality improvement and research and innovation all aligned to the strategy.

We will have a clear framework in place to describe how we will implement our strategy, routinely monitor our progress and assure our Trust Board and our Council of Governors that we are on the right track.



The strategy has been awarded the Trust's Recovery for All Quality Mark, for demonstrating the principles of recovery and co-production with service users and carers.

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