



Welcome to our Annual General Meeting and Annual Members' Meeting



#BSMHFTAGM23



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Welcome and Address by Trust Chair

Phil Gayle



2022–2023 in review

- Emerging from under the cloud of COVID-19
- Improving organisational culture
- Personnel changes
- Greater responsibility – BSMHFT Lead Provider in Service Integration
- Development of partnership working in the Integrated Care System (ICS)



Improving organisational culture

- Supporting colleagues and their wellbeing
- 'Value me' approach to values
- Organisational strategic priorities with clear outcomes
- Progress in addressing service user inequalities **as well as** inequalities experienced by colleagues
- Anti-racism agenda



Personnel changes

The following NEDs joined or left the Board in 2022/23:

- Gianjeet Hunjan, Non-Executive Director (left in Sept 2022)
- Danielle Oum, Chair (left in October 2022)
- Prof Russell Beale, Non-Executive Director (left in January 2023)
- Bal Claire, Non-Executive Director (joined in Jan 2023)
- Monica Shafaq, Non-Executive Director (joined in Jan 2023).



Personnel changes

The following Executive Directors, who also served as members of the Board, joined or left the Trust in 2022/23, as outlined below:

- Dr Hilary Grant, Executive Medical Director (left in June 2022)
- Dr Fabida Aria, Executive Medical Director (joined in August 2022)
- Steve Forsyth, Interim Chief Nurse (joined in October 2022).



Personnel changes

The following Governors joined or left the Trust in 2022/23, as outlined below:

Governors who joined are:

- Umar Ali
- Harpal Bath
- Dr Imran Waheed
- Leona Tasab

Governors who left:

- Diane King
- Stephanie Bloxham
- Maureen Johnson
- Hazel Kench

Currently out to election for open positions.



Greater responsibility – BSMHFT Lead Provider in Service Integration

From 1 April 2023 we were officially operating as the Birmingham and Solihull Mental Health Provider Collaborative, with delegated responsibilities. Our guiding principles are to:

- improve access
- reduce inequalities
- improve safety
- enhance value
- achieve better clinical outcomes
- reduce demand.



Development of partnership working in the Integrated Care System (ICS)

- The ICS brings together hospital, community and mental health trusts, GPs and other primary care services with local authorities and other care providers to work together
- By joining care up, the intention is to use collective strength to address the biggest health and care challenges
- ICS's aim to reduce health inequalities within our population, and we are committed to continue to address these inequalities through the successful implementation of our strategy in the next three years.



Thank you

To our Governors for their counsel and support



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Highlights and Look Ahead

Roísín Fallon-Williams
Chief Executive



Our strategic priorities





Examples of goals for 2022 – 2023

Clinical Services

Rooted in communities

- Community transformation programme
- Transformation of rehabilitation services
- Out of area placement reduction
- Partnerships with local communities to reduce inequalities

People

Transforming our culture and staff experience

- Anti racist and anti-discriminatory organisation
- LGBTQ staff aren't bullied or harassed
- BAME staff aren't bullied or harassed
- BAME staff have equality for their careers
- Improved staff survey
- Supporting staff to speak up

Quality

Improving service user experience

- Service user involvement in care planning
- Carer involvement

Sustainability

Balancing the books

- Delivery plans for efficiency schemes
- Medium term revenue and capital plans



Progress against goals 2022-2023 – some highlights

★ Green/ amber goals – some highlights:

Community transformation - young people, adult and older adult
On track ✓

Mental Health Support Teams in place in Solihull schools
On track ✓

Installation of door monitoring alarm systems
On track ✓

Anti-racist/ anti-discrimination framework and initiatives e.g., pledges, training
On track ✓

Launch of the Flourish programme
On track ✓

BSOL Mental Health Provider Collaborative ready to go live 1 April 2023
On track ✓

Work with local communities on Patient Carer Race Equality Framework
On track ✓

Working well collaboratively across the system to address our challenges
On track ✓

Implementation of PSIRF is going to plan
On track ✓

Implementation of Dialog+, including training and pilot roll-outs
On track ✓

Freedom to Speak Up champions in place
On track ✓

Widespread engagement in refreshing our ICT strategy
On track ✓



Looking ahead – key drivers and change in landscape



National

- Long Term Plan – trajectories and priorities for 2023/24 service delivery/ developments
- National People Plan
- National staffing shortages
- New national quality requirements e.g., PSIRF
- Political situation
- Cost of living



Regional / System

- ICS Strategy – published late 2022/23
- BSOL Mental Health Provider Collaborative live from 1 April
 - Increased collaboration across the system
 - New mental health and commissioning plan
 - System scrutiny over poor performing areas – out of area and talking therapies
- Health inequalities priorities for 2023/24
- WM Provider Collaboratives developments (Reach Out, CAMHS, Eating Disorders, Perinatal)



Local / Trust

- Latest staff survey results and known workforce issues (staffing, morale, wellbeing, inclusion)
- CQC action plan from recent inspection
- Financial position and need for efficiency savings
- Renewed focus on productivity and transformation
- Progress with 2022/23 goals and what we want to carry forwards
- Data and performance – hotspots and areas of focus



2023 – 2024

Engaged to determine our annual goals



- Senior leaders
- Senior management teams across divisions / corporate areas
- Experts by Experience (EbE)
- Executive team
- Relevant committees / groups



Example of a clinical services co-production workshop with more than 60 service and corporate leads, including 14 EbEs



Approval of goals



- Local areas
- Executive Team
- Board Committees
- Trust Board

Delivery of goals



- Milestone plans – owners, outputs, timescales, risks
- Routine monitoring
- Assurance reporting
- Developing an Impact Framework
- Communication and engagement



Examples of goals for 2023 – 2024

Clinical Services

Rooted in communities

- Community transformation programme year 3
- Out of area placement reduction
- Partnerships with local communities to reduce inequalities

Prevention and early intervention

- Transformation plans for children and young people in Solihull
- Urgent care transformation programme
- Birmingham Healthy Minds waiting times

Quality

Patient safety culture

- Review of organisation's safety culture

Quality assurance

- New learning from deaths processes
- Develop and embed Think Family principles
- Improvement against CQC action plans

People

Transforming our culture and staff experience

- Embed staff engagement programme
- Improve engagement scores to NHS staff survey
- Improvement in the four key areas identified within the NHS staff survey
- Providing a comprehensive Health and Wellbeing offer
- Equal opportunities offered via Flourish programme.

Modernising our people practice

- Developing digital solutions

Sustainability

Transforming with digital

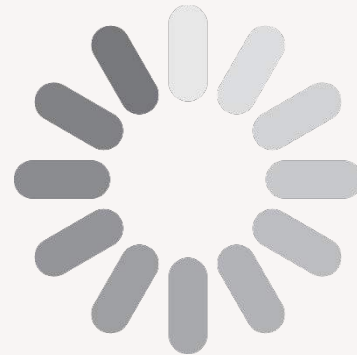
- Shared Care Record across BSOL
- Clinical engagement in ICT strategy and developments

Changing through partnerships

- Embed BSOL Mental Health Provider Collaborative
- Deliver West Midlands Provider Collaborative strategic priorities



New website



I need urgent help

Our charity

English

Search our website



NHS Birmingham and Solihull Mental Health NHS Foundation Trust

Welcome to Birmingham and Solihull Mental Health Foundation Trust

Improving mental health wellbeing





The Values Awards for 2022 – 2023





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Quality and Safety

Steve Forsyth

Chief Nursing Officer /
Executive Director of Quality and Safety (Interim)



What have we been doing in patient safety?

- Implementation of PSIRF (Patient Safety Incident Response Framework)
- Learning from Serious Incidents
- Implementation of the Quality Management System
- Listening to our service users' voice:
 - Service user experience
 - Service user engagement
- Safety summits
- Next steps
- World Patient Safety Day



Safeguarding and Infection Prevention and Control highlights

Safeguarding

- Multi Agency Safeguarding Hub (MASH)
- Statutory reviews
- Training
- Safeguarding supervision
- Think family

IPC

- COVID-19
- Legionella
- Celebration



What have we been doing in Quality Improvement?

- **Strategy:** Our Quality Improvement (QI) module is one element of our Quality Management System – all elements interlinked to drive improvement in quality of care and patient safety.
- **Engagement:** The team welcomes all new starters with an introduction to QI training supporting our drive to embed ownership of improvement in every role. Advanced QI training is offered to all staff.



What have we been doing in Quality Improvement?

- **Participation:** Experts by Experience (EBEs) engaged and trained in QI methodology, so they are equal and inclusive members of core QI project teams. Total of 14 new EBEs in cohort 2 of QI training in the last year including one that was of co-produced and co-delivered.

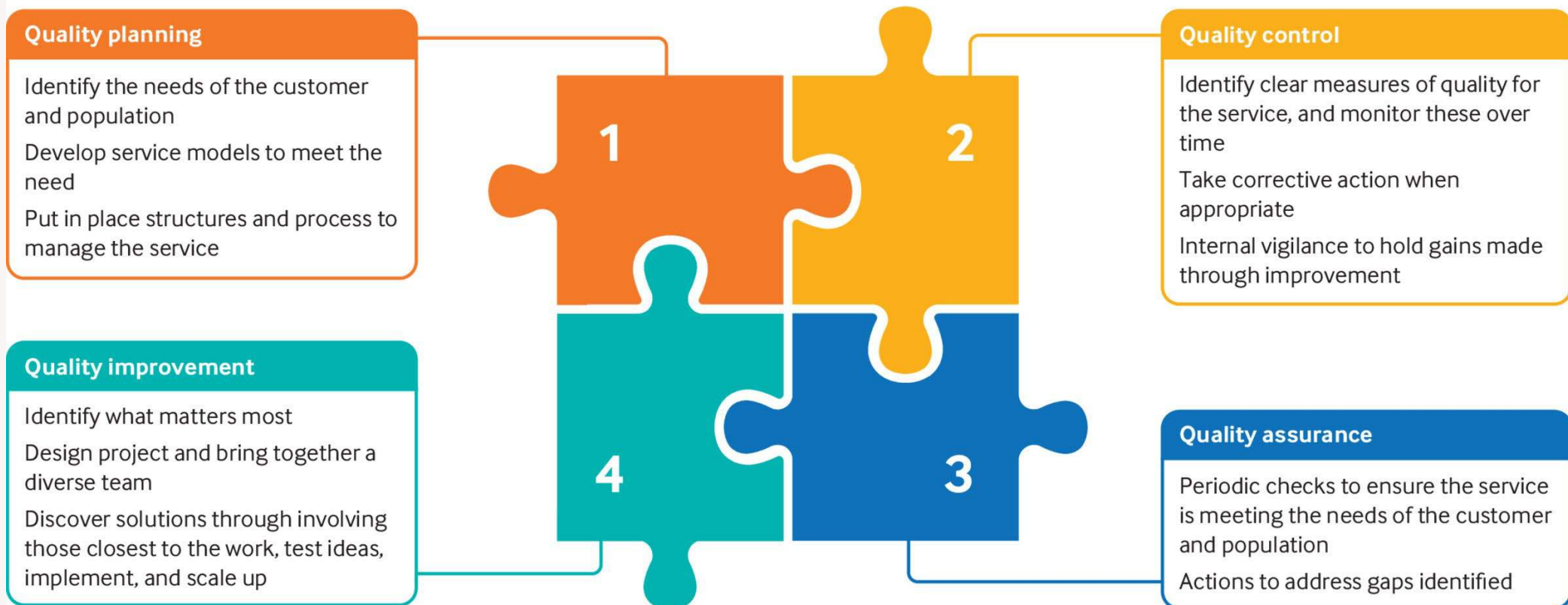
Over the last year, the QI-trained EBEs have been supporting on average 60% of all QI projects.

- **Projects:** Completed or closed 28 QI projects this year. Currently 31 projects underway, 40 projects at scoping/prospective stage. The majority are local grown project ideas but have links to the quadrants within the Trust Strategy.



Next steps...

Quality management systems





Regulatory Compliance

- Section 31 Notice December 2020
- Core and Well-led CQC Inspection in October to December 2022
- CMHT Focused Inspection in August 2023



Nursing Strategy Mobilisation Workstream 2023

Engagement activities: Undertaken via the Chief Nurse and Deputy Chief Nurse's visitation and listening programme – collation of themes and feedback from staff and service users.

Structured interviews: Surveys and facilitated discussion groups across all the directorates are planned for the coming months to explore:

- Nursing career development pathways
- Nursing research, quality and innovations capacity and capability building
- Professional practice and compassionate leadership
- Service users' involvement and engagement.



Allied Health Professional Workforce and Services

Focus on ensuring all AHPs have a positive experience at work

- Investment in leadership skills and creating a strong AHP community
- In depth review of NHS staff Survey results to develop actions to improve

Promoting recruitment and retention of our staff

- Recruitment video launch
- Focus on supporting new staff with mentoring and early career support
- Trailblazing Trust for apprenticeships and increased pre-registration training

Strategies for success

- First BSMHFT AHP strategy comes to fruition and links to Trust Strategy
- Working with ICB AHP partners to create a shared vision



Safer Staffing

- Clinical Lead for Safer Staffing Appointed
- Safer Staffing Committee
- Embedding the Professional Nurse Advocate role – 11 in role and five completing masters module
- Regular recruitment events with focus on registered nurse recruitment
- Two cycles of MHOST completed
- Safecare
- Check and challenge
- Internationally Educated Nurses



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Annual Report and Annual Accounts

Dave Tomlinson
Director of Finance



Our finances – 2023/24

- Why is financial performance important?
- What does success look like?
- How did we do?
- What does this mean for us?



Why is financial performance important?

- It can never be an end in itself
- Good performance:
 - ✓ reassures regulators
 - ✓ gives you room to invest
 - ✓ keeps you in driving seat
- Allows you to concentrate on **quality**
- The performance of the BSol system is even more important
 - ✓ no point being island of success in sea of failure





What does success look like and how did we do?

- Sustainable financial position
- Cash in bank
- Regulators consider you low risk
- Investment in developments and improvements



What does success look like and how did we do?

- Sustainable financial position – **breakeven on turnover of £429m**
- Cash in bank
- Regulators consider you low risk
- Investment in developments and improvements



What does success look like and how did we do?

- Sustainable financial position – breakeven on turnover of £429m
- Cash in bank - £59m
- Regulators consider you low risk
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What does success look like and how did we do?

- Sustainable financial position – breakeven on turnover of £429m
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- Investment in developments and improvements



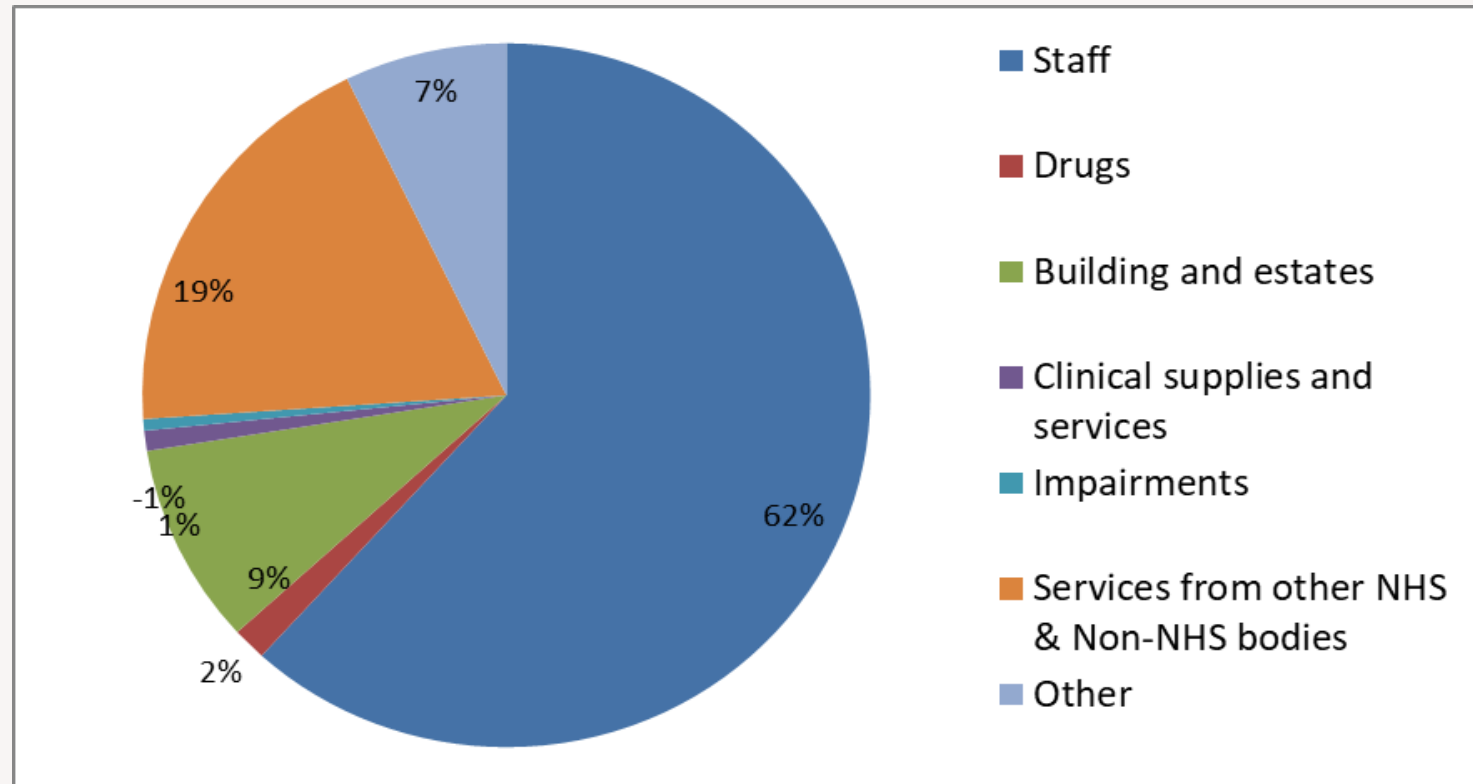
What does success look like and how did we do?

- Sustainable financial position – breakeven on turnover of £429m
- Cash in bank - £59m
- Regulators consider you low risk – no serious concerns from NHSE
- Investment in developments and improvements - £8.8m



How we spent our money

Annual Expenditure for 2022/23 - £420m





Why do we have to keep on making savings every year?

- Meet Tom...
Tom is a nurse who works at his local hospital





Why do we have to keep on making savings every year?

- Meet Tom...
Tom is a nurse who works at his local hospital



Monthly Pay (Income)	
Take home	£2,000
Monthly outgoings (Expenditure)	
Rent	£650
Council tax	£150
Utilities, TV, Internet	£400
Bank loan payments	£250
Travel costs	£150
Food	£300
Total Outgoings	£1,900
Spare each month (Surplus)	£100



How does Tom manage his money?

- Plans to put away his spare £100 each month [surplus]
- Has £1,000 in the bank for unforeseen expenses [reserves]
- Heard he's getting a £50 monthly pay rise 😊 [annual uplift]

However...

- Rent is increasing by £50, travel by £10 and utilities bill by £200 [cost pressures]
- Will be worse off by £210 each month [financial gap] 😞



How can Tom stay within his budget?

- Find a way to reduce his outgoings by £210 [savings target]
- Can do this by walking to work some days or finding cheaper Internet provider [CIP / efficiency]
- Can work some bank shifts [income generation]
 - Difficult to maintain for long, so it's temporary [non-recurrent]
- Forms a club with his colleagues to share travel costs and home [collaboration]
- If he manages any of this, bank manager is happy [NHSE]
- If he can't, bank manager might foreclose on his loan [intervention]

- **But it's Tom's problem**



Further information

- Our Annual Report and Accounts 2022/23 includes:
 - Annual Report
 - Consolidated financial statements
 - Auditors' opinion
- Available to download at www.bsmhft.nhs.uk
- Detailed accounts are available in full by request
- Contact me by email – david.tomlinson5@nhs.net



Disabilities and Neurodivergence Staff Network

- Relunched with dedicated Tuesday afternoon sessions/leads for:
 - Disabilities
 - Neurodivergence
 - Lived experience of mental illness
- Especially keen to attract more staff in third category
- Sharing of ideas to improve experiences for staff including recruitment, workplace adjustments, training, policies, wellbeing support
- Contact jazz.janagle@nhs.net or david.tomlinson5@nhs.net or bsmhft.edi.queries@nhs.net





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Presentation of changes to the Trust Constitution

David Tita

Associate Director of Corporate Governance



Key changes to the Trust Constitution

Three significant changes have been made to our Trust Constitution:

1. Provisions relating to the additional responsibilities (i.e. provider and commissioning functions) the Trust has embraced as it now operates as both a provider of a wide range of inpatient, community and specialist mental health services and is the lead provider for the Mental Health Provider Collaborative (Commissioner).



Role of our Council of Governors: Statutory Duties

2. Additional provisions for the Council of Governors comprising:

- A Code of Conduct for Governors
- Process for the appointment of a Lead Governor and Deputy Lead Governor including clarification on their roles and responsibilities
- Process for investigating alleged breaches of the Code of Conduct of Governors, termination of their mandate and the appeal procedure.



Role of our Council of Governors: Statutory Duties

3. Additional provisions for the Board of Directors which include:

- Code of Conduct of the Board of Directors
- Process for the receipt of complaints against the Chair or Non-Executive Directors including the investigation and appeal procedures.



Next step – voting on these changes

The FT Model Constitution sets out an expectation for an FT constitution to be presented at the AGM for approval if it has witnessed significant changes.

Great news – The changes outlined in this presentation have been approved by the Board and Council Governors, however, they will need to be approved through this AGM through voting as part of good governance.

Voting – please raise your right hand if you approve these changes.
– please raise your right hand if you do not approve these changes.

Results of the voting: Approve =

Disapprove =



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Freedom to Speak Up

Lucy Thomas

Freedom to Speak Up Guardian



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Mood on Track

Gareth O’Keeffe

Clinical Development Lead, Bipolar service





The Bipolar Service

- Our service came into being in 1998 and was co-developed by the psychologist Sandra George with Experts by Experience.
- Its purpose was to support those with a diagnosis of bipolar:
 - Understanding the condition
 - Strategies for mood management
 - Increased social contact with those who have similar experience.
- Through a group format made up of service users with the condition and experienced clinicians.





Bipolar?

- Bipolar Disorder – episodes of depression and/or extremely high mood
- One in 50 people in the UK have a diagnosis of bipolar
- There are significant potential costs to the person, their friends and family (whatever form this takes) and society
- Psychological intervention, and psychoeducation are recommended (NICE, 2020) but few receive these
- National drive to increase psychological therapies available to those with bipolar diagnosis (Long Term Plan, Community Transformation of Mental Health)



An evolving service...

- The Mood on Track intervention (MoT) involves:
 - The group intervention (11 weeks face to face/13 weeks digital)
 - Followed by individual sessions to help the person develop their own “staying well plan”
 - An offer to attend the bipolar service support group (an ongoing monthly meeting).
 - An offer to receive a monthly newsletter
 - The option for further psychological intervention (CBT and/or BFT).





How does this help?

- The MoT intervention has significant benefits.
- Service users who complete the programme:
 - More knowledgeable, better equipped to deal with problematic mood changes and more confidence
 - A greater sense of autonomy.
- From a service perspective:
 - Use of home treatment/crisis support is reduced
 - As is the need for hospital admission.



The future..

- We believe that those who would benefit from our intervention should be offered it. This belief is strengthened by the feedback we receive from our service users, the evidence base and our recent experience as Health Service Journal (HSJ) finalists.
- We are currently training other organisations and want to scale this up.
- We hope to spread this intervention across the country (and then wider!).

I would like to leave the last words to some of the people who have completed Mood on Track.





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Experts by Experience and the HOPE Strategy

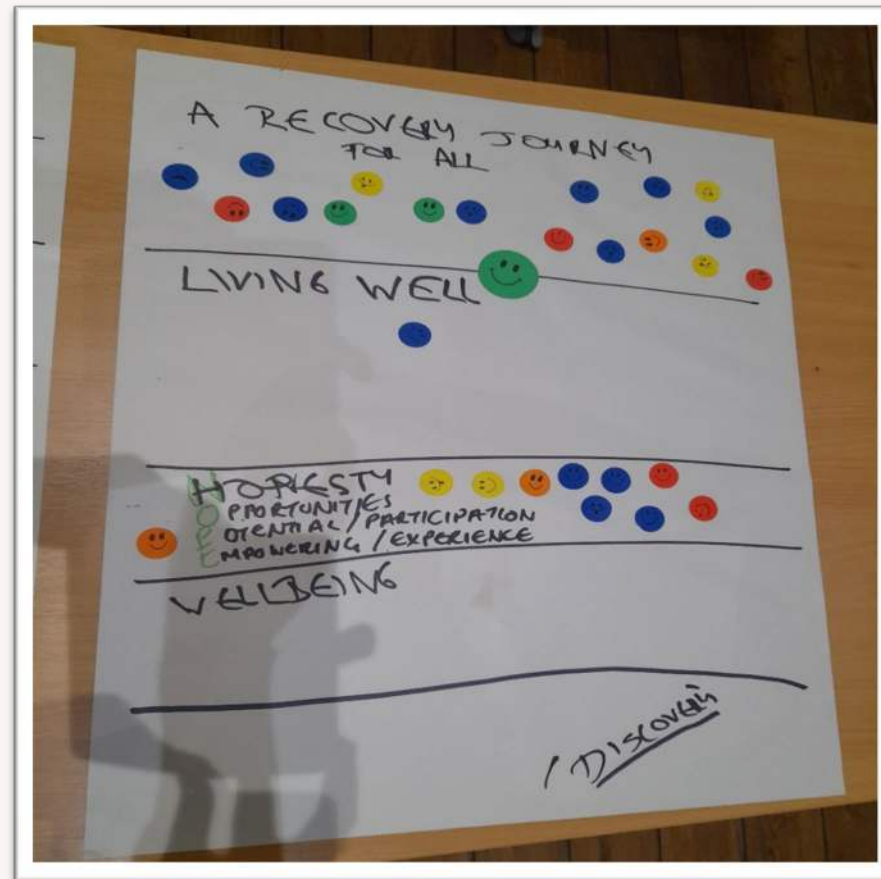
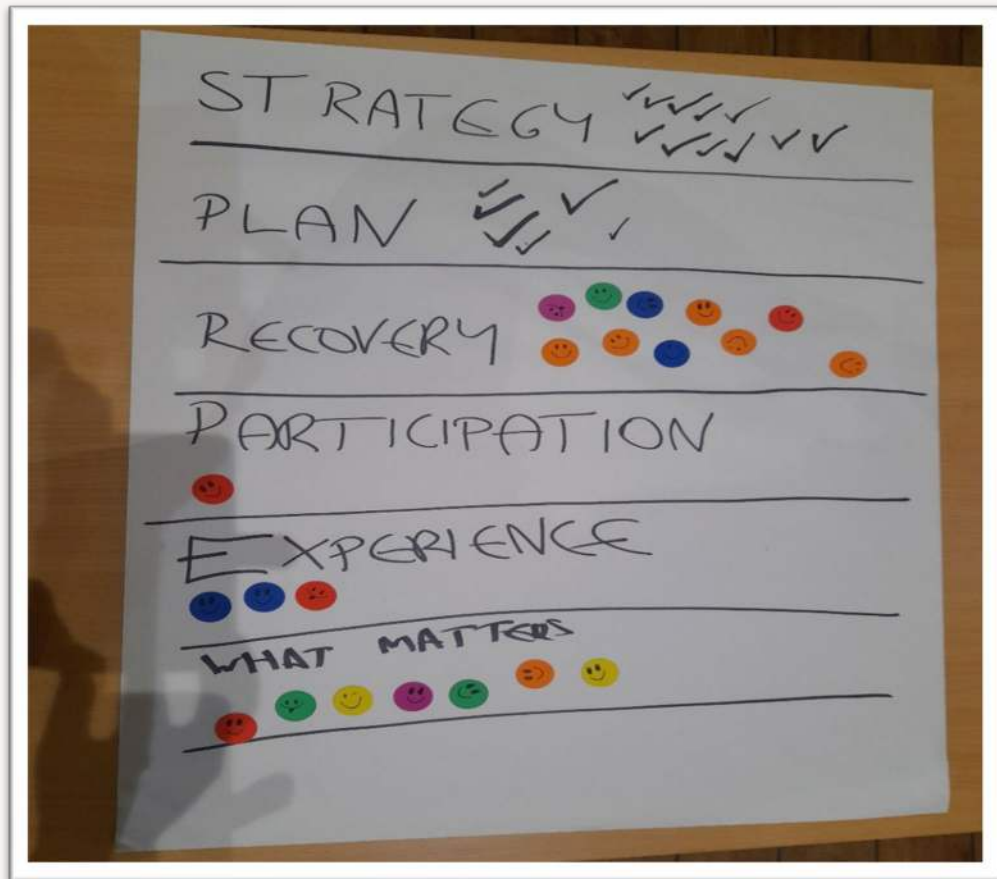
Katherine Allen

Lead, Recovery, Service User Family and Carer Experience





A co-produced strategy...



‘A Recovery Journey for All – service users, families and staff alike’



Holding on to HOPE





Our vision of HOPE

Our vision is for all our service users, their carers and families to be supported to live fulfilling lives, with hope, meaning, purpose, opportunity and choices. This means supporting and enabling people to flourish in whichever way that is important to them.

This includes colleagues, students and volunteers who use mental health services.



Domain: Recovery for All Through Health and Opportunity





Domain: Participation





Domain: Experience

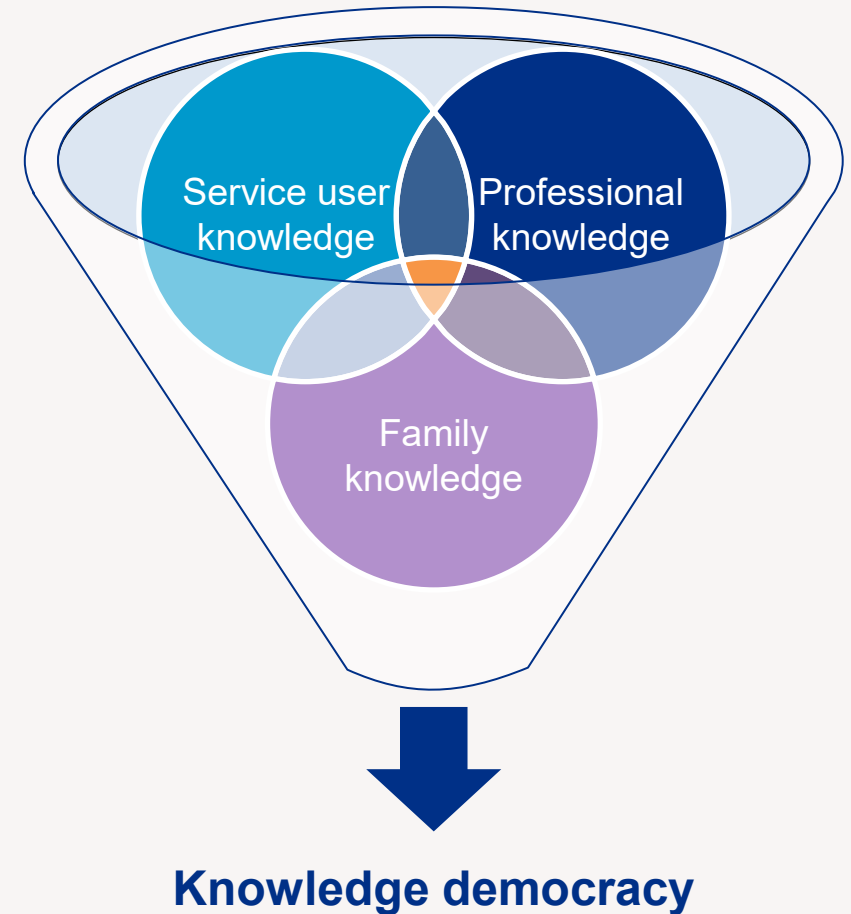




Co-production

Co-production is when different types of knowledge are brought together and treated equally, power is shared, and decisions are made together.

It's called knowledge democracy!





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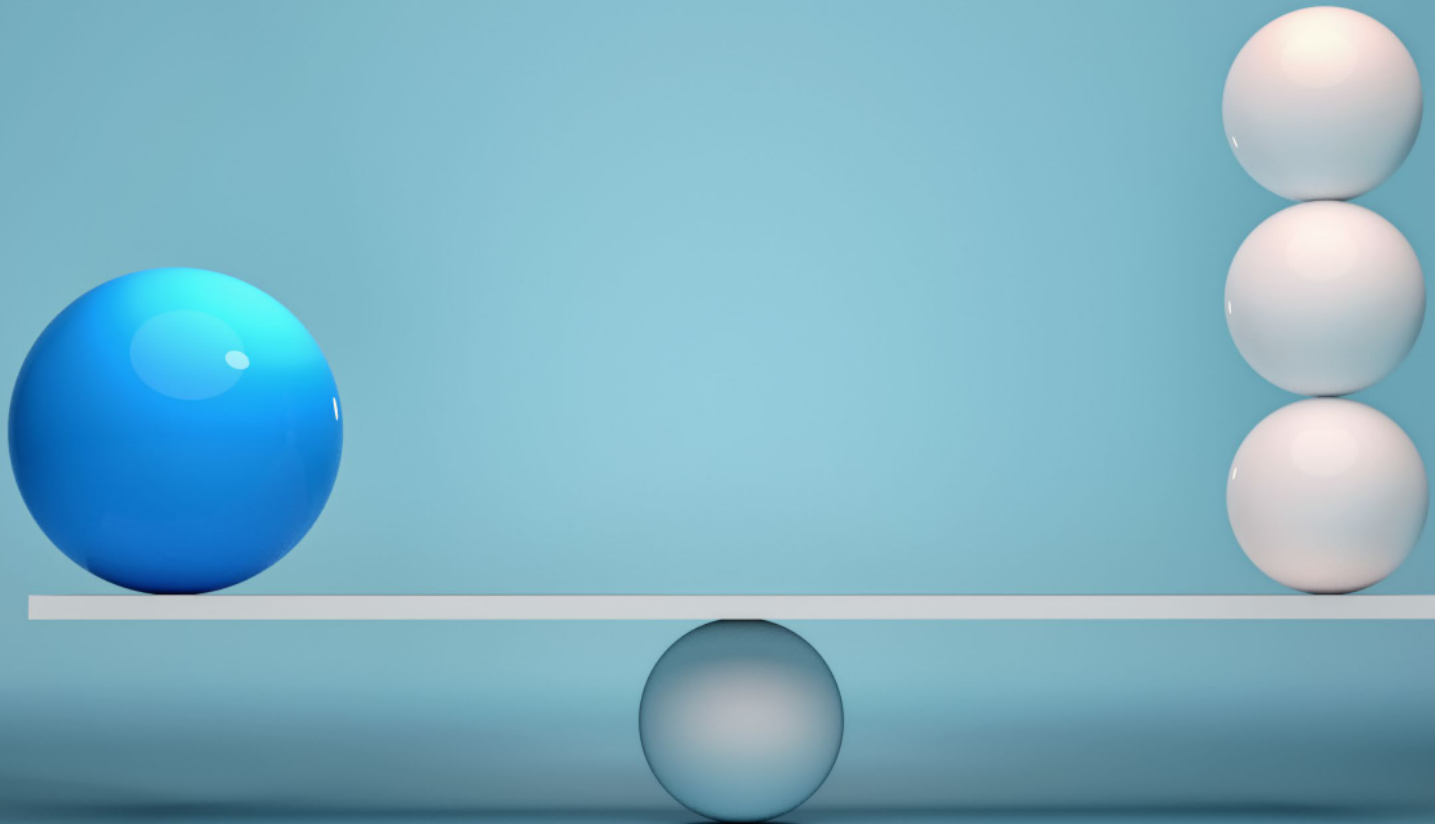
Culture of Team BSMHFT

Jas Kaur

Associate Director of Equality, Diversity, Inclusion and
Organisational Development



Value Me to Reduce Inequality





Why...

To enable the right ingredients for an
Inclusive culture
which is...
Anti-racist
and
Anti-discriminatory
for all
to
Improve
access,
experience
and
outcomes
for
our people



Value Me to Reduce Inequality



What..



Every person to be valued and understood



Why...



So that I have a fair opportunity to take the next step-*whatever that looks like for me*



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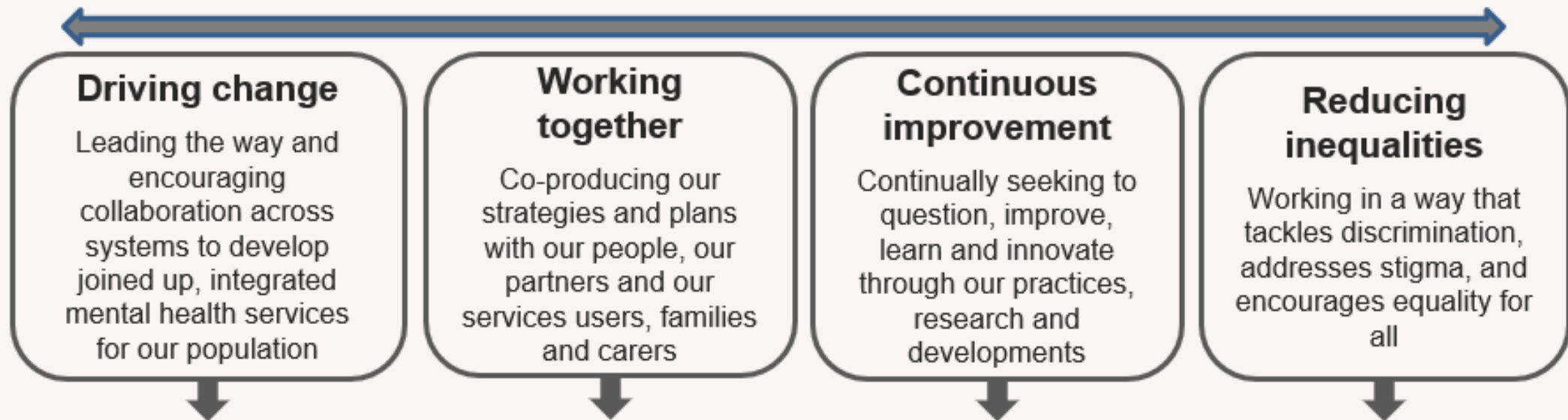
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How our strategic priorities align

One vision: improving mental health wellbeing

We need to work in four key ways to achieve this vision – these are themes running through our strategy





Our Four Strategic Priorities

Clinical Services	Leader in mental health – integrated pathways and services; system partnerships	Recovery focussed – co-production as a norm for how we develop and design services	Service transformations; clinically effective and evidence-based	Rooted in communities – reducing inequalities for our service users and carers
Quality	Patient Safety collaboratives; system working e.g., suicide prevention, safeguarding	Improving service user experience – emphasis on co-production and EbE roles	A focus on quality improvement, learning lessons, using data and research	Reducing unwarranted variation; physical health
People	Workforce planning across the system	Staff engagement; lived experience roles; co-production of our systems and processes	Evidence based people practice; using data and analytics	Embedding our value of inclusion; diverse workforce; just culture; safety to speak up
Sustainability	Range of strategic partnerships and governance structures to support integrating	Staff and service users involved in identifying and developing and evaluating opportunities	Digital transformation evidence/research based; sharing practice/learning; environmental initiatives;	Resources, partnerships and data to support reducing inequalities; ensuring digital inclusion



A picture of our population in 2021

Total population (2021)



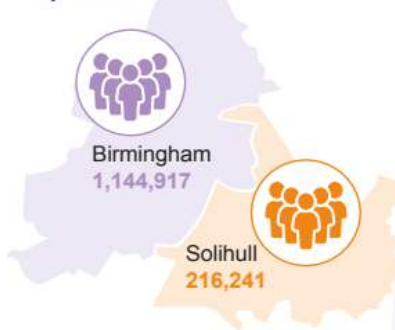
Sexual orientation



Under 18yrs conception rate (2020)



Population



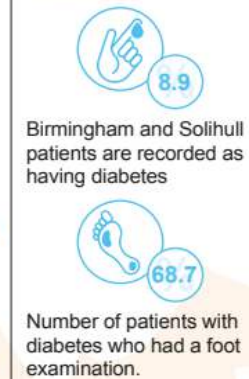
Disability (2011 Census)



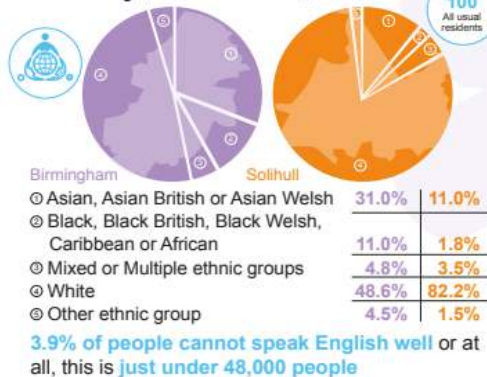
Economic activity status



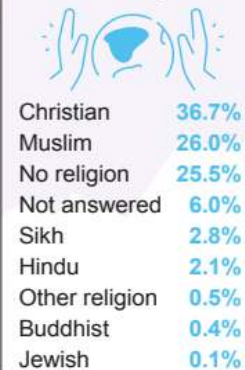
Diabetes



Ethnicity (2019 ONS estimates)



Faith and religion



Flu 2021/22 - vaccine uptake

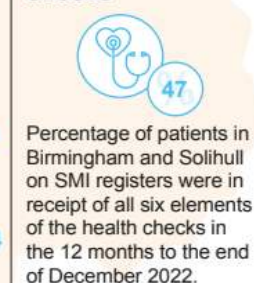


Cancer

Birmingham and Solihull ICB had **6,384 emergency admissions** with cancer, with a rate of **406 admissions per 100,000 population** compared to 514 Nationally.

There were over **5,317 new cases of cancer diagnosed** across Birmingham & Solihull. This is a rate of **344 per 100,000 patients** compared to a National rate of 456.

Physical health checks





Workforce Race Equality Standard 2023

Data collated from WRES and Staff Survey 2022

Staff representation



Our black and minority ethnic workforce representation is **39.1%**
In 2023 we showed a small increase on the **37.6%** reported in 2022 (+ive).



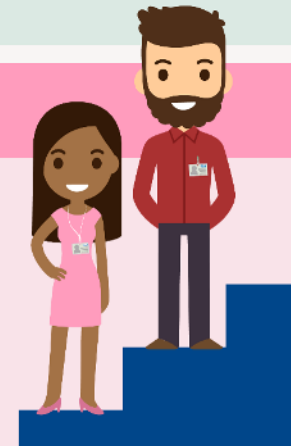
Shortlisting

White colleagues are **1.3** times more likely to be appointed from shortlisting.

In 2023 we have decreased the gap on the **1.52** reported in 2022.

Career progression

43% black and minority ethnic colleagues believe that our Trust provides equal opportunities for career progression as opposed to **54.5%** white colleagues (-ive)
Both sets of scores have increased but the gap remains.





Workforce Disability Equality Standard 2023

Data collated from WDES and Staff Survey

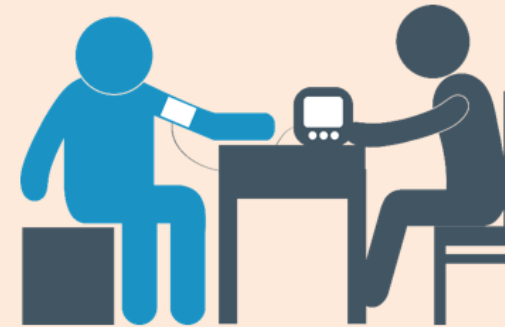


9.65% colleagues across our Trust report having a long-term condition or illness. Compared to the **5.56%** reported in 2022

Colleagues with long-term condition or illness are...



The likelihood of non-disabled colleagues being appointed from shortlist compared to colleagues with disabilities is **0.84** compared to **1.31** in 2022 (Colleagues with disabilities less likely to be employed)



Colleagues with disabilities are now equal to those without disabilities to enter the capability process. **(reached equity)**



What have we done?

Equity Panel & Recruitment guidance

Staff Networks

Patient Carer Race Equality Framework

Buddy Pool

Cultural Ambassador

Equality Impact Assessment training

Listening spaces

Integration of EDI & OD

Mental Health & LD Recruitment Programme

Active Bystander

No hate zone

Anti-Discrimination, Anti-Racist Policy & Framework

LGBTQ Training for Execs and senior leader team

Public Sector Equality
NHS Reporting WRES/WDES/GPG

External and Internal Webpages

EDI Fundamental Training Package





Barriers and Myths
Six Principles Framework
Guide to using Principles
Leadership
Policy
Transparency
Wellbeing and Belonging
Education
Employment
Individual Accountability
Anti-Racist Leadership
Anti-Racist Management
Anti-Racist Colleague

Anti-Racist Framework

Help shape the
framework



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Birmingham and Solihull Mental Health Provider Collaborative and New Ways of Working

Jenny Watson

Deputy Director Commissioning and Transformation



Background

- BSol Mental Health Provider Collaborative – live 1 April 2023
- ‘Our Approach to Partnerships and Integration’ sets out our **Case for Change**
- BSMHFT lead provider on behalf of the collaborative
- Service Integrator Contract for circa £379m
- Robust governance arrangements which separate commissioner and provider responsibilities within the Trust
- Delivering against our roadmap for a BSol Mental Health Provider Collaborative Strategy



What do patients, service users, families, carers and staff want?

Shared decision-making means getting **real feedback about what works for staff and service users**

There's nothing worse than not being able to **access services** (too much red tape)

Need to address the **root problem** of each service user, e.g. job opportunities, housing etc.

Need local services to work better with **better linkages**

To be seen, heard and believed

Waiting times to be cut

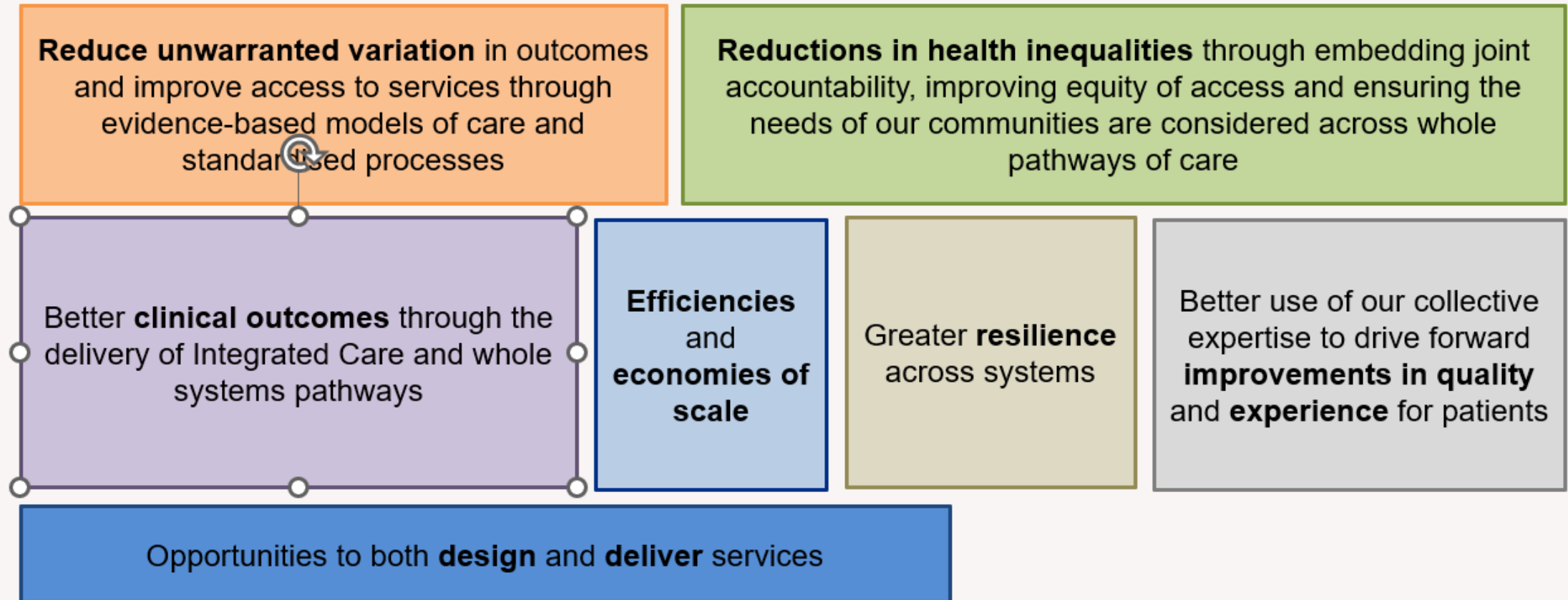
Patients who have used services in **different areas** find the care can be so different.

Counselling services provided in **community languages**

Carers and families often feel they are not well **understood** that equates to them not feeling well treated

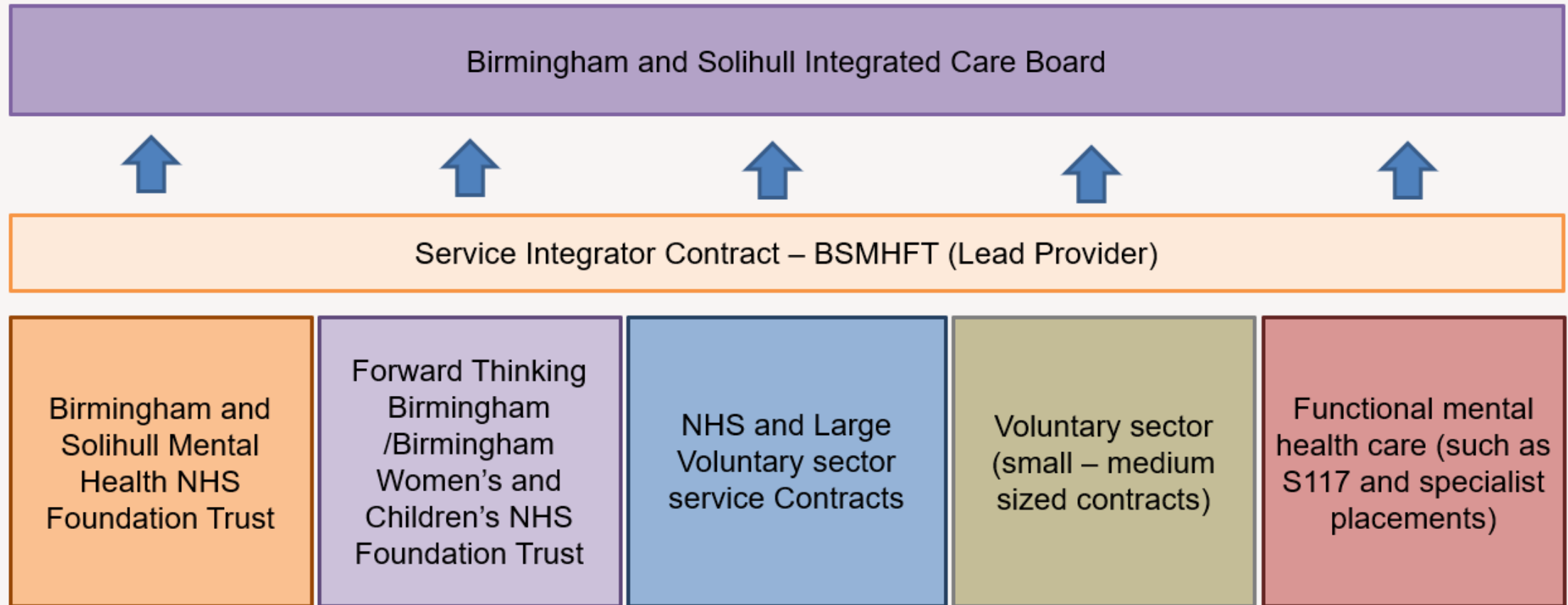


Case for Change





The BSol Mental Health Provider Collaborative





What will be different?

- Collaboratively **working at scale** to deliver improved outcomes for the local population
- **Collective decision making** about the design and delivery of integrated pathways of care
- **Collaboration on the development of integrated pathways of care**, ensuring staff, patients, carers, families, citizens and partners have the opportunity to co-produce
- Making **better use of the resources** available
- **Shared understanding, decision making and accountability**



Building our capacity and capability

- Developing our Commissioning and Transformation Function for the Collaborative
 - Mental Health Commissioning Team
 - MH/LD Specialist Placement Team
 - Contracting roles
 - Finance roles



Governance arrangements

- Extensive governance architecture for the collaborative, involving all partners transitioned from shadow to formal arrangements, 1 April 2023
- New Commissioning and Transformation Hub
- New separate governance reporting, assurance and escalation routes for provider and commissioner responsibilities in place
- Commissioning Committee – which is the Board in Committee (all members)



Key areas of opportunity

- **Integrated pathways of care**
- **Life Course** approaches to mental health
- Re-shaping and re-forming the **community offer for S117** packages of care, including improved discharge pathways, increased offers of Personal Health Budgets and proactive reviews
- Single **electronic patient record**
- More people receiving **care closer to home** with a reduction in out of area placements
- A new **model for commissioning and contracting** with the VCFSE



Creating our BSOL Mental Health Collaborative strategy

- **By collectively understanding our local population health needs** – assessing needs, reviewing provision, deciding priorities collaboratively
- **By active listening** – developing an understanding from staff who work in the services, patients, carers, and partners about what works well, where are the gaps, what are the opportunities to improve patient experience, safety and quality?
- **By collaborating with partners to design and shape services** across pathways and systems which can demonstrate improved patient outcomes, sharing what we know works well and learning lessons



Summary

- A new way of leading mental health delivery
- Making things better for every person who needs help
- Improving experience and outcomes for those in our care
- Building on our excellent services is about always looking at what we can do better
- We want to work with you, your colleagues, Experts by Experience and partners to help shape decisions about services
- By working in **partnership**, we can make a difference



Annual General Meeting Annual Members' Meeting



#BSMHFTAGM23



compassionate



inclusive



committed



Caring Minds Charity

Louise John
Charity Manager





Caring Minds progression 2022 – 2023

- **Physical presence** across sites
- **Staff engagement** activities
- More **information** about the charity in regular **communications**
- Utilising Trust **social media** platforms
- The charity sits on a number of exciting **networks**, that enable **further reach**
- More **grants** have been **approved**
- Generating **more applications** to the charity
- **Charity banners** across sites
- **Merchandise** available to colleagues to support events / fundraisers



Thanks to our wonderful Comms Team

LinkedIn Join now Sign in



**Five Minutes With...
A Charity Manager**

Birmingham and Solihull Mental Health NHS Foundation Trust

Our vision is simple: improving mental health...

+ Follow

Caring Minds

Enhancing a person's visit to BSMHT can make all the difference to their wellbeing, improving recovery and overall experience of our services. Caring Minds is here to support our Trust's vision of improving mental health wellbeing by providing added extras that are seen and above what the NHS can provide. This may include equipment, specialist services, service user events, activities, career wellbeing initiatives, staff appreciation events and much more. The charity relies on the generosity of individuals and businesses to help raise funds and enhance the profile of the charity so that it can provide the added extras that make a big difference to real lives.

Reaside

An insightful video into a medium secure setting

Values Awards 2023 raffie

Lozells school pupils and staff raise £700

Book sale at Uffculme

compassionate inclusive committed Improving mental health wellbeing 15

Birmingham and Solihull Mental Health NHS Foundation Trust

25 Aug

If you would like to raise money for our charity Caring Minds, please email bsmhft.fundraising@nhs.net, alternativ... See more

Caring Minds

Book sale at Uffculme



Some of our relationships and partnerships

- **NHS Charities Together**
- **Birmingham Community Health Care charity**
- **Help Harry Help Others charity**
- **The Childrens Storehouse**
- **Holte School – choosing to support us for another year**
- **Starbucks – partnership for 12 months**
- **Barrat Homes – choosing to support Mental Health**



Thanks to the support of NHS Charities Together

We have been able to **develop** the charity team with a **new post**

We have opportunities to further **support staff wellbeing**

We have access to **shared resource**, support and a wider **charity community**

Many opportunities for **collaborative working**, without losing our identity





Highlights from events





Thank you to *all* of our donors





How have we raised some of our funds

- **Just Giving** Platform has enabled our fundraisers to donate around **£4,000**
- **The Staff Lottery** has raised in excess of **£10,000**
- **Individual donors** have made kind donations, often as a **thank you!**
- **Teams across the Trust** have held family and carer events, book sales, coffee mornings and more, then **kindly donated any monies to Caring Minds**
- **Excellence in Psychology Awards** – Raffle
- **Value Awards** - Raffle
- **NHS 75** Big Tea event



Donations and smiles



Caring Minds
Just Giving QR Code





Ardenleigh Art Exhibition 2023

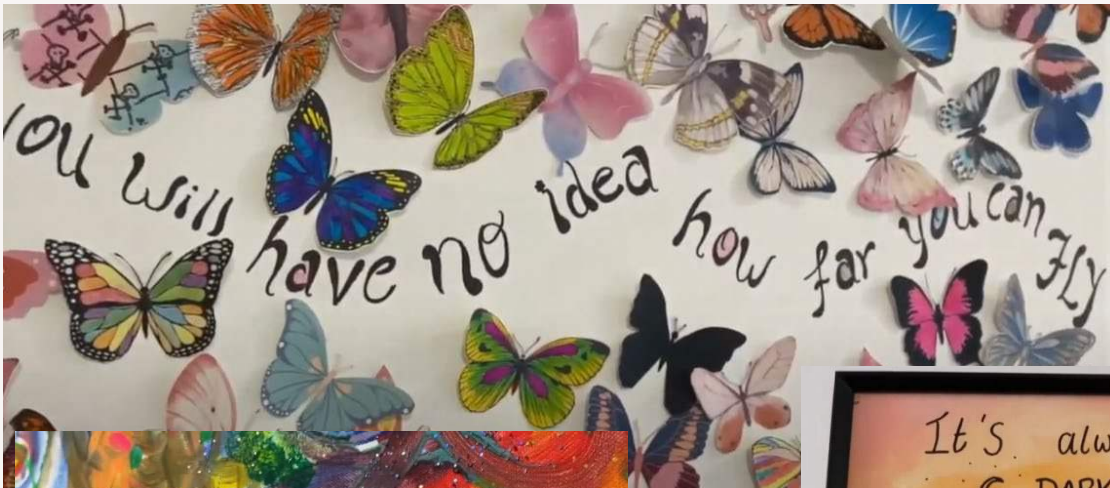
140 art pieces were collected as part of a summer art exhibition held at Ardenleigh.

Art can be a **powerful form of communication** and **self-expression** for individuals who find it difficult to put their feelings into words

“Working together in a collaborative way to create such a beautiful and diverse space was really meaningful and we are thankful to Caring Minds for making this event possible.” Deborah Tomlin-Taylor, Senior Arts Psychotherapist at Ardenleigh



Some of the wonderful work created

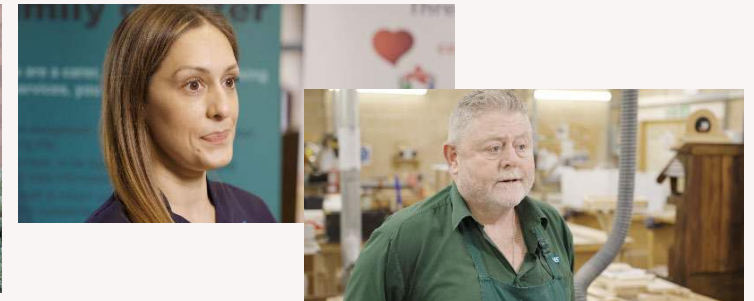


we wish we could share them all with you!



Videos that show an insight into our secure services

Our funding has enabled **short videos** to be filmed to help **support** service users, carers and family with **transition**. They also help them to understand what is behind our doors and what they can expect, which can be invaluable to all involved





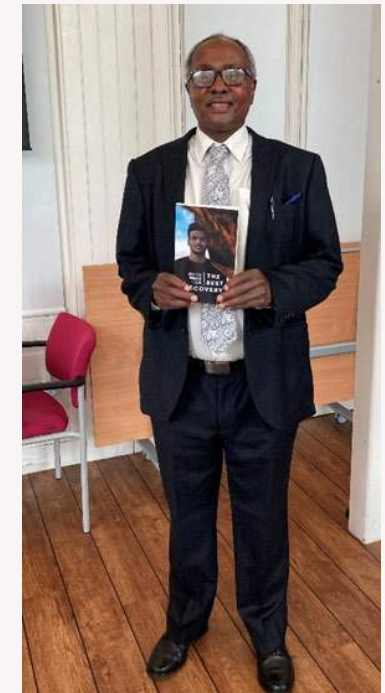
The inspiration among us

The Best Recovery, By Abdirisak 'Abdi' Hussein

A truly inspirational story written by one of our service users, who is now a Peer Support Worker.

“Some people might think that being admitted into hospital is the end of the world but as for me I rose to the occasion and really turned around my life. It was there where I realised my past mistakes and began to have an insight into my illness where I had to work hard to change and to achieve my goals in life.”

Abdi credits our brilliant **Occupational Therapy Team at the Tamarind Centre** for encouraging him and believing in him





Dates for your diaries

- Official opening Green Gym at Juniper, **10 October 2023**
- Excellence in Psychology Awards, **12 October 2023**
- The Christmas raffle is back – **purchase your tickets from Uffculme Centre**
- Christmas Lights, carols and festive goodies at Juniper, **27 November 2023**

Watch this space for exciting news, around **charities** coming together for something very special in Birmingham in 2024!

The Future is Bright, when Charities Unite



Annual General Meeting Annual Members' Meeting



#BSMHFTAGM23

 **compassionate**  **inclusive**  **committed**



Council of Governors

John Travers, Mustak Mirza and Leona Tasab



The Council of Governors

- Governors do not have a free hand; their duties are set out in statute: The National Health Service Act 2006 as amended by the Health and Social Care Act 2012 and the Health and Care Act 2022.
- Individual governors have no standing in law; the rights of governors lie with the full council.



Role of our Council of Governors: Statutory Duties

- To represent the interests of the members of the NHS foundation trust and the public.
- To hold the non-executive directors to account for the performance of the board.
- To appoint, remove and decide upon the terms of office of the chair and non-executive directors of the Trust.
- Changing duties



An inclusive and compassionate approach

- Visits and engagement
- Governor development
- Good governance
- Any questions?