

FOI 0516 2024 Response

Freedom of Information Request (FOI) – Information regarding CPTSD (Complex post-traumatic stress disorder) in the wider trust and specifically Small Heath Mental Health Centre.

I request the following –

1. What diagnosis manual does the BSMHFT use

BSMHFT codes diagnosis using the ICD-10 classification scheme.

General information regarding my Psychiatrist

2. How many years' experience of diagnosing does Dr Shaffiulla have
*Clarification; I wish to establish his number of years' experience as a fully qualified Dr at the Trust, what is his current role, how many years as a Psychiatrist team lead/supervisor at the Trust etc (however you phrase it is fine)

Dr Shaffiullah has been practising psychiatry since 2008 for the Trust, and as a general adult consultant psychiatrist since 2018.

3. How many patients are currently under Dr Shaffiulla care/supervision

848

Note: The above figure represents the total caseload, as such it is not limited to those for whom Dr Shaffiullah has direct care coordination responsibility.

4. How many patients currently under Dr Shaffiulla have a primary diagnoses of CPTSD

10

Note: The above figure represents the total caseload, as such it is not limited to those for whom Dr Shaffiullah has direct care coordination responsibility.

5. In Dr Shaffiulla's time as a qualified diagnoser, how many people has he personally diagnosed with CPTSD

1-5

Note:

- The above figure represents the total caseload, as such it is not limited to those for whom Dr. Shaffiullah has direct care coordination responsibility.
- The data has a numerical range of 1-5, this is because the data for this areas is considerably low and therefore may lead to identification of other patients.

6. What post qualification training has Dr Shaffiullha undertaken in the specific area of CPTSD, please note if funded by BSMHFT and/or privately funded.

Dr Shaffiullah has confirmed that he is not aware of any post qualification training in CPTSD.

For all patients currently under Dr Shaffiullha's supervision;

7. I would like to know how many are diagnosed with a dysthymia.

1-5

Note:

- The above figure represents the total caseload, as such it is not limited to those for whom Dr Shaffiullah has direct care coordination responsibility.
- The data has a numerical range of 1-5, this is because the data for this areas is considerably low and therefore may lead to identification of other patients.

8. How many of the people diagnosed with dysthymia also have a trauma history *most recent month snapshot.

**Clarification: For clients under Dr Shaffiullha diagnosed with dysthymia, how many have a co-diagnosis of CPTSD and/or PTSD. If not diagnosed with PTSD or CPTSD, do they have any form of trauma recorded in their case history

This does not need to be a specialist audit or by a medical professional. A simple quick review of the case file summary will suffice, so maybe 1-2 mins per client. No personal information is sought.

Examples of trauma –

- Examples of type 1 trauma might include:
 - Severe illness or injury
 - Violent assault
 - Sexual assault
 - Traumatic loss
 - Mugging or robbery
 - 2 of 7
 - Being a victim of or witness to violence
 - Witnessing a terrorist attack
 - Witnessing a natural disaster
 - Road accident
 - Military combat incident
 - Hospitalisation
 - Psychiatric hospitalisation
 - Childbirth
 - Medical trauma
 - Post suicide attempt trauma
 - Life threatening illness or diagnosis or perceived life threatening illness
- Examples of type 2 trauma include:
 - Sibling abuse
 - Childhood emotional abuse
 - Domestic violence
 - Emotional neglect and attachment trauma

- Abandonment
- Verbal abuse
- Coercion
- Domestic physical abuse
- Long term misdiagnosis of a health problem
- Bullying at home at school or in a work setting
- Sexual abuse
- Emotional abuse
- Physical neglect
- Overly strict upbringing sometimes religious
- Historical, Collective or Intergenerational Trauma might include:
 - Racism
 - Slavery
 - Forcible removal from a family or community
 - Genocide
 - War

1-5

Note:

- The above figure represents the total caseload, as such it is not limited to those for whom Dr Shafiullah has direct care coordination responsibility.
- The data has a numerical range of 1-5, this is because the data for this areas is considerably low and therefore may lead to identification of other patients.

General information about the BSMHFT trust and CPTSD (please split numbers by each site)

9. How many patients are currently under the wider trust

Site	Caseload	PTSD
CMHT Adult Longbridge	1,978	67
CMHT Adult Ladywood & Handsworth	2,011	54
CMHT Adult Zinnia	2,123	46
CMHT Adult Newington	1,525	27
CMHT Adult Erdington & Kingstanding	2,261	26
CMHT Adult Lyndon	2,400	19
CMHT Adult Warstock Lane	1,182	19
CMHT Adult Sutton	1,637	17
CMHT Adult Aston & Nechells	1,396	14
CMHT Adult Yewcroft	1,114	14
CMHT Adult Riverside	1,425	13
CMHT Small Heath (O'Donnell)	1,750	12

Note: The wider adult Community Mental Health Service sites have been provided as a comparative sample to the caseload of Dr Shafiullah.

10. How many patients of the wider trust have a primary diagnosis of CPTSD. Most recent month snapshot.

Please refer to the table in question 9.

11. How many are seeking help following trauma caused by making protected disclosures or whistleblowing. Most recent month snapshot.

While we can report on psychological therapy sessions, we would not be able to confidently identify patients seeking help following trauma caused by making protected disclosures or whistleblowing.

This is because the requested information is not centrally recorded or reported across the Trust and would necessitate additional focused reporting at service level, which exceeds the threshold of this task.

The Trust therefore rely on exemption Section 12 of the Freedom of Information Act 2000 to deny this aspect of your request.

12. How many are seeking help following trauma caused by political or legal issues. Most recent month snapshot.

While we can report on psychological therapy sessions, we would not be able to confidently identify patients seeking help following trauma caused by political or legal issues.

This is because the requested information is not centrally recorded or reported across the Trust and would necessitate additional focused reporting at service level, which exceeds the threshold of this task.

The Trust therefore rely on exemption Section 12 of the Freedom of Information Act 2000 to deny this aspect of your request.

11. What training does the trust provide to its staff in the specific area of CPTSD

For staff who provide psychological therapies, the Trust has accessed/provided training in Trauma-focused cognitive behavioural therapy (TF-CBT), Eye movement desensitisation and reprocessing (EMDR) and Dialectical Behaviour Therapy (DBT) skills, which are indicated in the psychological therapy treatment for CPTSD.

12. What trauma specific therapy service does the wider trust provide to patients

The Trust does not have a trauma specific therapy service.

The Trust has a wide range of primary care mental health, secondary care community mental health and specialist mental health provision, including inpatients and forensic care services, all of which include the provision of psychological therapies for referred patients.

These services provide a range of NICE approved psychological therapies for a variety of psychological and mental health conditions, including post-traumatic stress disorder such as Eye Movement Desensitization and Reprocessing (EMDR), Dialectical Behaviour Therapy (DBT), cognitive Behaviour Therapy (CBT) and Compassion-focused therapy (CFT).

13. How many trauma specific therapy sessions take place each week. Most recent month snapshot.

While we can report on psychological therapy sessions, we would not be able to confidently identify which were 'trauma specific' as requested.

This is because the requested information is not centrally recorded or reported across the Trust and would necessitate additional focused reporting at service level which exceeds the threshold of this task.

The Trust therefore rely on exemption Section 12 of the Freedom of Information Act 2000 to deny this aspect of your request.

14. What is the waiting time for trauma specific therapy/ Most recent month snapshot.

While we can report on psychological therapy sessions, we would not be able to confidently identify which were 'trauma specific' as requested.

This is because the requested information is not centrally recorded or reported across the Trust and would necessitate additional focused reporting at service level which exceeds the threshold of this task.

The Trust therefore rely on exemption Section 12 of the Freedom of Information Act 2000 to deny this aspect of your request.

15. Does the wider trust provide any therapy specific to late diagnosis ADHD/ADD/Autism? If so, how many slots per week, and how long is the waiting list. Most recent month snapshot.

The Trust is not commissioned to provide therapy for ADHD or ASD (when this is the primary presenting need).