



TrustTalk

Winter 2025

Top tips for
managing
your stress
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Run miles for Caring Minds by
taking part in the
Great Birmingham Run
this May
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Welcome to Trust Talk 2025

Welcome to this year's first edition of Trust Talk 2025. We'd like to start the year by extending our wishes of good health and happiness to all our service users, patients and colleagues for the year ahead.

For those of us who have just picked up this edition, Trust Talk is BSMHFT's quarterly publication that is packed full of the latest Trust news, celebrations and exciting developments for the future.

On the topic of exciting developments, we are making big, bold plans in 2025. In our previous edition, we shared the news that Team BSMHFT was named as one of six providers nationally to lead the 24/7 mental health service pilot. Bringing round-the-clock community mental health support and care for local people, you can read about the latest updates on page 4.

Another new advancement to Birmingham and Solihull is the way we are delivering children and young people's mental health care. We are committed to working together to improve the mental health of the next generation. You can read more about the plans we are taking by turning to page 7.

Many of us will have already made New Year's resolutions to take better care of ourselves. If you have made it your mission to get fit, why not set yourself a challenge and take part in this year's Great Birmingham Run for Caring Minds. Caring Minds is our Trust's charity that helps us in our mission to improve mental wellbeing for all, more information is available on page 15.

In this edition, we are fortunate enough to hear personal accounts from four past and present service users. Each have lived with various mental illnesses and are proof that with the right help and support, recovery is possible.

We'd like to say a huge thank you to Warren, Ian, Natalie and Mohammed who have shared their stories with the hope it encourages others to seek help if they need it.

Finally, a big thank you to everyone who continues to go over and above for the benefit of our service users and patients. With over 4,000 staff spread over 172 square miles we are beyond proud of our compassionate, inclusive and committed colleagues and we are looking

forward to welcoming more amazing members of Team BSMHFT across the year.

Best wishes,

Roisin Fallon-Williams
Chief Executive Officer

Phil Gayle
Chair



Contact us

To contact our Trust with any general enquiries:

☎ 0121 301 0000 (our switchboard)

Trust headquarters address:

✉ Birmingham and Solihull Mental Health NHS Foundation Trust
Uffculme Centre
52 Queensbridge Rd
Birmingham
B13 8QY

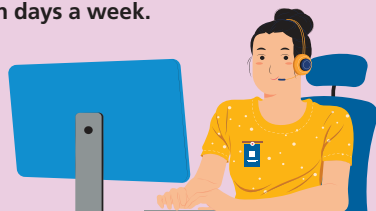
Birmingham and Solihull Urgent Mental Health Helpline, in partnership with Birmingham Mind

If mental health help is needed you can ring the numbers below for advice and support

☎ 0121 262 3555
☎ 0800 915 9292

For urgent mental health support, call NHS 111, option 2.

This line is available 24 hours, seven days a week.



Meet our Board of Directors



Roisin Fallon-Williams
Chief Executive



Philip Gayle
Chair



Patrick Nyarumbu MBE
Deputy Chief Executive and Executive Director of Strategy, People and Partnerships



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Executive Medical Director



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Sue Bedward
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Living with OCD

Warren is an Expert by Experience at Team BSMHFT who has lived most of his life with an undiagnosed mental health condition, obsessive compulsive disorder, or OCD as it is more commonly referred to as.

OCD is a disorder in which a person experiences uncontrollable and recurring thoughts (obsessions), engages in repetitive behaviours (compulsions), or both. Contrary to what people might believe, OCD is not just about being neat and orderly – it is a mental health condition that should be taken seriously.

Speaking candidly, Warren shares what life is like living with OCD with the hopes it encourages others to seek support if they need it – help is always available.



"Hey, I'm Warren. I have suffered with OCD throughout my life. I have struggled with this disorder since my younger years and only in my early fifties have I finally received a diagnosis.

As someone with OCD, I always treble check everything I do, where most people check just once. People like me always question things and think of scenarios such as "is the window closed/locked?" or "have I packed my pyjamas in the suitcase?" over and over OCD thoughts smack my brain. "Is my work sufficiently good?", "do I dot the I's and keep crossing the T's?", "do I add tomato sauce, mustard or mayonnaise on the sandwich?"

"YES" I shout.

The impact OCD has on my daily life has some detrimental effects, like colleagues and friends not understanding my OCD compulsiveness. Many times, I have to advise them I have this diagnosis to gain their understanding. Colleagues and friends will discuss more openly with regards to

assistance I require with the many decisions I have to make.

I have worked with fantastic staff at Birmingham and Solihull Mental Health NHS Foundation Trust for many years and I am currently an Expert by Experience, which allows me to share experiences with you all, outside in the big crazy world in which we live today.

Since receiving help, my concentration levels are more zoned into the particular workload/litem I am dealing with at work or at home. I used to tend to get distracted by my compulsions with the smallest error and I would annoy myself with putting a fix to it.

"I currently take prescribed medication that improves my anxiety/stress and over the past two years I have had help from Birmingham Healthy Minds to be able to deal with my stresses in life."

Best wishes for a calmer you."

People living with OCD can often feel significant distress and are sometimes reluctant to seek help because they feel embarrassed or ashamed. We are here to help.

If you are experiencing obsessions and compulsions that influence your daily life, speak to your GP or health visitor. They can support you or refer you to our specialist mental health teams if you need it.

Scan the QR code to learn more about OCD.



Follow us on
Instagram

Did you know that Team BSMHFT is on Instagram? Follow [@bsmhft_nhs](#) for the latest mental health news, support services, staff celebrations and much more. We are always looking at new ways to communicate and share information about the work we do across the Trust, used by 35 million people in the UK alone, Instagram is helping us to do just that. Why not hit that follow button to discover what exciting things we are working on this year.



Are you in a
mental health
crisis?

NHS 111 mental health crisis line

If you are experiencing something that makes you feel unsafe, distressed, or worried about your mental health, you can now contact your local crisis service in Birmingham and Solihull by calling NHS 111, option 2.

The phone will be answered by a trained mental health professional who will be able to listen to your concerns and help you get the support you need. With your permission, they can also access your electronic patient records to better meet your needs and to avoid you repeatedly having to tell us your situation.

NHS 111 is for all ages, including children and young people and those with neurodevelopmental needs.

If you're deaf or have hearing loss, please visit www.signvideo.co.uk/nhs111/link to be connected to local crisis service.

If you aren't able to make the call yourself, then anyone can call on your behalf. You can also access NHS 111 online via 111.nhs.uk.

In emergency situations where there is an immediate risk to life, you should continue to contact 999 or go to A&E.

Introducing Enhanced RECONNECT

In December 2024 we launched our newly commissioned Enhanced RECONNECT service, dedicated to supporting high-risk offenders with complex health needs during their transition from prison to the community.

Designed to address the unique challenges faced by this group, Enhanced RECONNECT provides tailored, intensive support to enable safe reintegration and improved access to health and support services.

Enhanced RECONNECT is intended to support individuals with complex needs such as mental or physical health issues, learning disabilities or substance misuse problems, leaving prison or 'approved premises' in Birmingham and Solihull, many of whom also face additional challenges such as homelessness and language barriers.

Participation with the Enhanced Reconnect service is entirely voluntary and individuals can engage with the service from six months before

they are released and 12 months post release.

Using a trauma-informed, person-centred approach, Enhanced RECONNECT bridges gaps in care by:

- Helping individuals understand how their health needs impact and relate to their offending
- Building trusting relationships for better engagement
- Providing therapies and practical support to develop strengths and skills
- Coordinating with partner services to deliver holistic joined-up care.

Enhanced RECONNECT is supported by a multidisciplinary team that includes psychologists, mental health nurses, occupational therapists, substance use workers, social workers, arts therapists, speech and language therapists and peer mentors. The diverse expertise ensures



**Enhanced
RECONNECT**
Compassionate Supportive Reintegration

comprehensive support tailored to individual needs.

Referrals can be made by a range of professionals including probation officers, police, or prison services. Eligibility focuses on those in critical public protection or high-risk groups, including individuals at risk of extremism or with a history of serious harm offenses.

If you think someone could benefit from this service, reach out to contact the team for further details

✉ bsmhft.enhanced.reconnect@nhs.net

New mental health care model

BSMHFT has successfully bid to become one of six pilot areas around the country to provide treatment and long-term, continuous care, across the spectrum, irrespective of diagnosis, severity or chronicity.

One single team in one base at the heart of the community will provide a service that is open door, 24/7. It will provide all aspects of care including inpatient admissions in the neighbourhood, with active involvement of service users, families and local communities in care and treatment. A single care pathway will replace current multiple/circular access and pathways, with 24/7 access to crisis and urgent care in the community. This will prioritise continuity of care, reducing admissions, use of coercion and Mental Health Act detentions.

One of the Trust's strategic aims is 'rooted in communities'. This bid will accelerate our agreed ambition to get there. A huge amount of work over recent years created the foundation for our proposal:

- Creation of a neighbourhood model, with Neighbourhood Mental Health teams (NMHTs) based around Primary Care Networks (PCNs)
- Lived experience integrated throughout workstreams
- Strong relationships with local voluntary, community, faith and social enterprise (VCFSE) organisations, enhanced through the Mental Health Provider Collaborative's creation of the VCFSE Panel and Collective
- Peer support/VCFSE workers embedded in community/acute/urgent care pathways including a Peer Support Hub and Mental Health Connector roles
- Transferable learning from initiatives, e.g. talking spaces and crisis café-type models.

The model will be piloted based on local context in a deprived/diverse setting with a 35,000 population from Birmingham East Central Primary Care Network. It will be introduced and developed for adults aged 18+, acknowledging local need and current services, infrastructure and challenges.

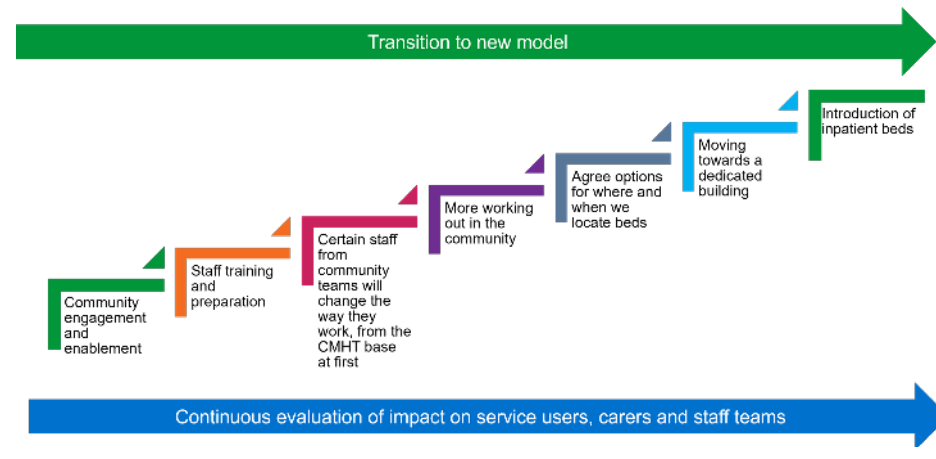
Creating a unitary model will improve commissioning through:

- Partnership/whole system thinking across various commissioning pathways and collaborative approaches

Features/benefits of our model:

Challenges in our current model	Features/benefits of the new model
Functionalised approach	Single team for all mental health care
Lack of 24/7 cover from CMHTs	Open 24/7, open access, with no exclusions
A range of crisis pathways with differing entry criteria/assessment protocols: - Home treatment - Street Triage - Place of Safety - Mental health helpline - FTB Crisis Team for up to 25 year olds	Practice based on therapeutic relationships, engagement, hospitality instead of hospitalisation (guests not patients),
- A&E / Psychiatric Liaison - Call before Convey - Psychiatric Decisions Unit - NHS111 #2 for mental health crisis	Continuity of care in all circumstances and all times
Different mental health provider for 18-25 year olds	"Inside / outside" approach, community asset mobilisation, joint working
Poor continuity of care and loss of contact, particularly during transitions in care	Co-produced and co-delivered
Traditional clinical staffing model with few opportunities for meaningful paid lived experience roles or VCFSE joint delivery.	Stronger partnership between specialist doctors and General Practices, between physical and mental wellbeing
Reliant on Trust resources and capacity.	Care in the least restrictive setting possible. Prioritising rights and citizenship and care over control
Limited opportunities for joined-up co-production due to the functionalised model.	
Physical and mental healthcare not always joined up	
Restrictive practices	

Our phased approach:



- A population health-based approach
- More flexibility/responsiveness to local needs, inclusive of community interests/priorities
- Communities, people with lived experience and families/carers having a greater say in commissioning and delivery meaning better outcomes.

Our model will benefit all underserved communities, ensuring culturally appropriate

support, particularly through VCFSE. The neighbourhood particularly includes the following priority groups whose needs are currently not fully recognised/met:

- People with severe mental illnesses (SMI) - continuity of care is often compromised at transition points and poor physical health is prevalent.
- Local Black, Asian and Minority Ethnic community - ~90% of the neighbourhood,

predominantly people of Asian Pakistani origin, with high levels of untreated/undetected morbidity, poor access and outcomes

- New migrants - often have a history of trauma and are disengaged from/distrustful of services.



By the end of the pilot period, we will have:

- Profound change in culture and practice, a whole-person, whole-life approach, reduced in restrictive practice and involuntary care, emphasis on personal autonomy and rights, active involvement of people with lived experience, families and local community, supported by bespoke training and ongoing support
- A 'one-stop' 24/7 open door community mental health centre (CMHC) at the heart of the neighbourhood
- Strong networks with mental health agencies and local community assets
- Enhanced VCFSE provisions including possible new social enterprises for inclusion/citizenship rights for people with SMI
- Current multiple/circular pathways unified into one bi-directional care pathway (access and exit)
- People currently managed in different specialist mental health teams transitioned to the CMHC along with clinical staff and resources.

Staff time will be available to provide direct patient care through training, mentoring and guided practice. They will also be able to prioritise patient safety and quality over patient risks and procedural rules, meaning less time on inappropriate/unnecessary paperwork/meetings and more time with patients.

Tips on stress awareness

This time of year can be particularly stressful for a number of reasons.

Managing your workload, physical health issues, thinking about the year ahead or financial pressures are just a few examples. Stress isn't comparable and what may seem small to you could be difficult for someone else.

Below, Dr David Cochrane, Principal Clinical Psychologist for eight years shares some of the things that many of us unwittingly do that increase our stress levels and explains what we could do to help overcome it.

"Many people spend a lot of time and emotional energy thinking about distressing things that have happened in the past and

so focus on things that can't be changed. Alternatively, it could be worrying about the 'what ifs?' or imaginary negative future scenarios leading to the mind being polluted with stress.

These stressful thinking patterns can often happen spontaneously and without choice, so becoming more aware of when we are stuck in these ruminations can be a very useful first step in exiting them.

As well as the thoughts, we might notice our heart racing, feeling sweaty or shortness of breath. This is our fight or flight response being activated and is a sign that we are experiencing stress.

If you are feeling stressed, I would recommend

you try **belly breathing** – focus on your belly expanding on the in breath and deflating on the out breath. It's a simple technique that with practice can help to soothe us, reducing our heart rate and muscle tension.

Another tip is recognising stress inducing **catastrophic thinking**, where we predict terrible future events and outcomes such as 'I'm going to make a fool of myself trying to give the presentation'. When you feel this way, try to problem solve and plan for success. Choose to think about difficulties, but in a constructive way to help manage a challenging situation.

Of course, **increased**



awareness of our thoughts, belly breathing and improved problem solving aren't going to solve all of life's challenges, but they can be really useful assets to help us get by and cope better.

"If you find you are having more bad days than good and your stress levels are becoming overwhelming, please reach out. You could reach out to a mental health professional like me, a loved one or someone that you trust. More often than not, you'll begin to feel better after sharing something weighing heavy on your mind. Conversations with others we trust can be a great source of potential solutions we haven't even thought of."

David has shared helpful links that can be found on our website by scanning the QR code.





A Senior Equality, Diversity and Inclusion Lead

Manisha Panesar

In 1948 the NHS was born, providing 'healthcare services that are free for all at the point of delivery', irrespective of gender, race, disability, age, sexual orientation, religion, belief, gender reassignment, pregnancy and maternity or marital or civil partnership status.

Equality, Diversity and Inclusion (EDI) teams across the country work hard to ensure patients/service users and staff are treated fairly, equally and free from discrimination. In this Five Minutes With edition, we caught up with Manisha Panesar, Senior EDI Lead at Team BSMHFT to share with us the steps she and her team are taking to ensure we live up to our inclusivity pledge.

Hi Manisha, please could you tell us about your role at Team BSMHFT?

My role is Senior EDI Lead and the areas I cover are Secure and Offender Health and Specialities, I also lead the health inequalities workstream. Ultimately, my role is to reduce bullying, harassment, discrimination and racism for our patients/service users and workforce. I have been a part of the Trust for over two years now and prior to this role I was a part of the Participation and Experience team.

Before joining BSMHFT, I worked as an Occupational Therapist for around seven years in mental health rehabilitation services.

Why did you decide to pursue a career in mental health specifically and what made you want to work within EDI?

I suppose I 'fell' into the mental health field while finishing my degree. I was keen to get straight into work and applied for the first position that the university sent me and got it! It's rewarding to see individuals get better with your input and be there to support them in their darkest times.

Throughout my clinical career, I was able to witness first-hand the challenges and inequalities that service users faced. These were often due to a lack of knowledge or understanding. I have a passion for being innovative in providing culturally competent care and reducing inequalities, to ensure that those who access our services have a fair and equitable experience.

I also have a particular interest in reducing the stigma of individuals within the South Asian community, specifically around mental health support as it is often taboo or not addressed.

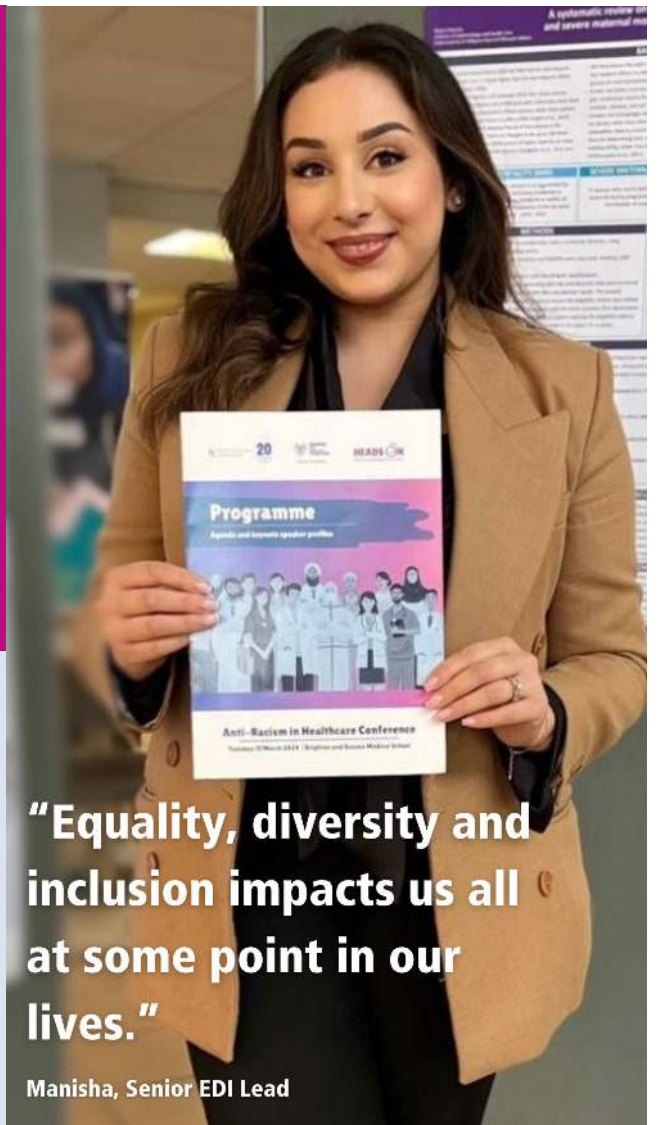
Why is EDI so important for the NHS?

It's an opportunity for real change where we can have an NHS service that provides equal care for all. I believe it's the golden thread in everything we do and if we get it right it improves the access, experience and outcomes we all have.

What are the biggest changes your team has made to the Trust during your appointment as Senior EDI Lead?

Our team has expanded which has allowed us to have a broader reach and embed ourselves within our directorates. We have continued to challenge negative practices, provide opportunities for development and continued to initiate culture change within our organisation.

I'm proud that we have continued to be resilient as a team and we always strive to be better. We are also proud as a team to be a part of the development of the Anti-racist Framework, which we believe our Trust is well ahead



"Equality, diversity and inclusion impacts us all at some point in our lives."

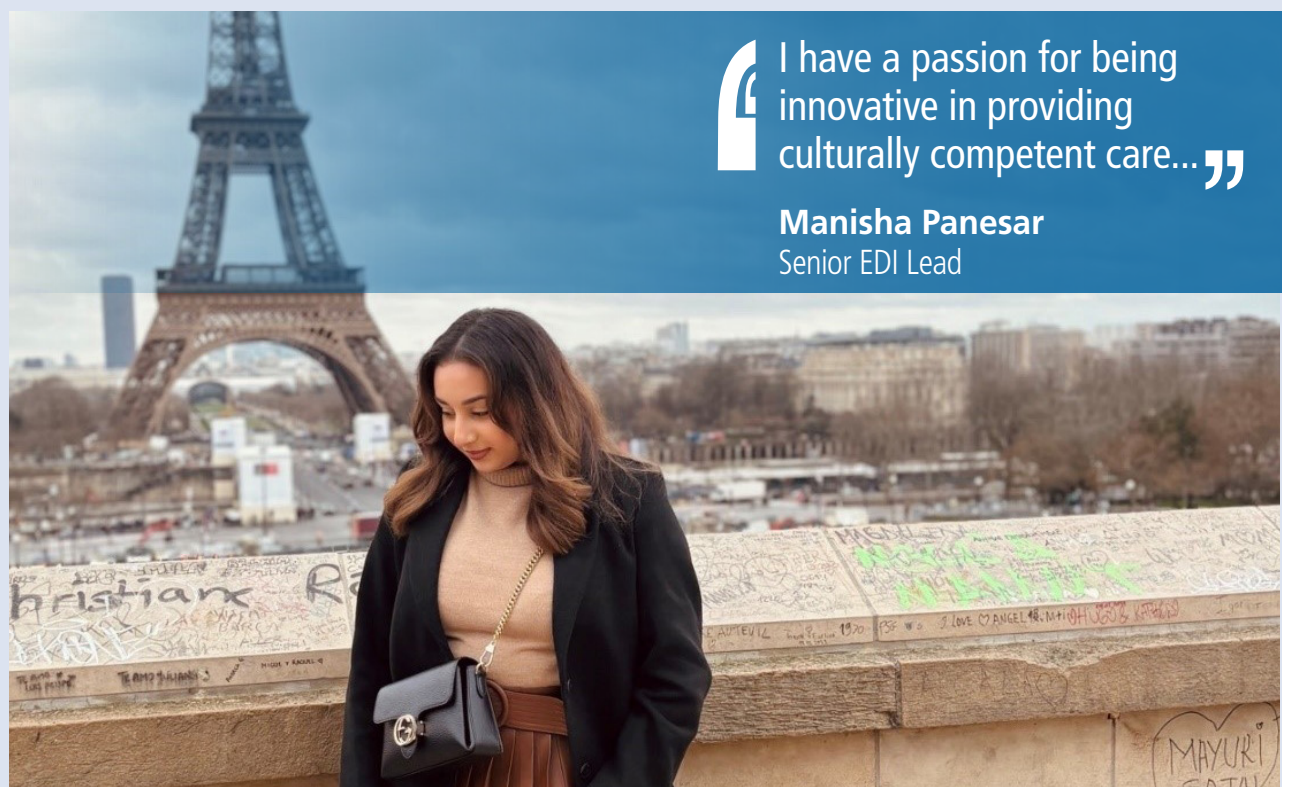
Manisha, Senior EDI Lead

in working towards becoming anti-racist with the development of this framework. We have presented the framework at national conferences, been nominated for awards and other trusts have reached out to us to learn more.

Since being in the role, it has been eye opening and an opportunity to learn more about myself – it's a constant learning experience!

Tell us something that people might not know about you

I did kickboxing when younger and was one belt away from a black belt, I've also travelled to 17 countries – hopefully many more!



I have a passion for being innovative in providing culturally competent care..."

Manisha Panesar
Senior EDI Lead



A new online portal has been launched by BSMHFT, giving past and present service users 24-hour access to their personal mental health and community healthcare information.

Set to benefit over 80,000 of our past and present service users, the Trust is the first mental health care provider in the Midlands to have produced such a platform.

In addition to mental health care information, users will be able to view their community healthcare information in the Portal from Birmingham Community Healthcare NHS Foundation Trust (BCHC) who provide core community health services to 1.1 million people across the Midlands.

The Portal's aim is to improve the way our patients and service users can view their care plans and appointments, at a time that is convenient to them.

Co-produced with our Experts by Experience, the Patient Portal has been designed with service users, for service users.

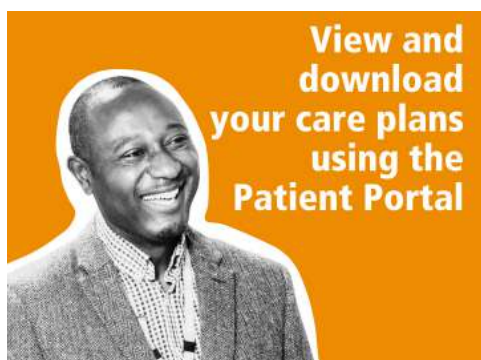
"The Portal will empower a lot of people to be more involved in their care. It's a big move forward." – Patient Portal user.

The Patient Portal is compatible with all smartphones, tablets, laptops and PCs and is currently available to past and present BSMHFT service users who are aged 16 and over, registered with a GP and have an NHS number.

Using the integrated NHS login makes registration quick, easy and most importantly keeps user's healthcare records secure.

It is important to note that the Patient Portal should be used in addition to the NHS app, which can support with GP appointments, prescriptions, vaccinations, organ donation decisions and much more.

Visit the Patient Portal webpage for further instructions on how to get your account set up by scanning the QR code.



Evening behavioural changes in dementia patients

Changes in behaviour in the late afternoon/early evening can be apparent for individuals living with dementia. This is known as 'sundowning'.

Common symptoms include a growing sense of agitation, anxiety and feeling unsettled in familiar surroundings.

Whilst sundowning is not directly linked to seasonal changes, shorter days and longer evenings can often contribute to additional confusion.

Dr Nikki Belsham, Clinical Lead for the Memory Assessment Service at Little Bromwich Centre supports service users with all types of dementia. Over her 20-year career, she has seen many service users and families impacted by sundowning. Below, Dr Belsham shares her top tips for supporting individuals with sundowning and where to get help if this is becoming unmanageable.

"It can be really distressing to experience sundowning or witness your loved one getting increasingly distressed, however, here are some suggestions that may assist an individual and family when sundowning is apparent."



Dr Belsham's top tips:

- ✓ Ensure that rooms are well lit in both daytime and at night, using natural light and ensuring artificial light is bright and sufficient
- ✓ Maintain a good routine around waking, eating and sleeping
- ✓ Redirect the individual who is experiencing sundowning to other activities and utilise distraction
- ✓ Remain calm and try not to challenge them
- ✓ Consider a gentle tone of voice and body language, offering reassurance.

It is important to consider that there may be other reasons for what could be perceived as sundowning such as being in pain, needing the toilet, feeling hungry etc. If you are concerned about your loved one, please speak to the professionals. Contact your local GP and/or contact the Alzheimer's Society on 0333 150 3456. Additionally, the Alzheimer's Society has good resources for support and guidance for individuals and carers with dementia.

scan the QR code to learn more.



Research and Development at BSMHFT

The Research and Development (R&D) service is supported by a skilled team with a variety of backgrounds and interests. Based at the Barberry Centre, the team focuses on promoting and recruiting for research activities, ensuring opportunities for everyone to share their experiences and contribute to shaping future care. The team also supports staff with planning research projects and developing service evaluations for service improvements.

The team deals with all aspects of R&D, including NHS permissions, setting up studies, developing locally led studies and supporting studies that sit within the National Institute for Health and Care Research portfolio. The team's success is made possible by the invaluable collaboration of staff and service users, who support them by welcoming R&D to meetings, promote research efforts and identify eligible service users.

Below, you can read more about their latest achievements, current research trials and what to expect throughout 2025.

Huntington's disease event

The R&D team hosted Huntington's Disease (HD) Get Together 2024, an event celebrating key advancements in HD research. It brought together individuals with HD, clinicians and staff to share exciting developments that offer hope for better treatments and quality of life for those living with the condition.



Professor Hugh Rickards, Consultant and Honorary Professor in Neuropsychiatry, opened the event by reflecting on the achievements in HD research, which hold promise for more effective treatments. Thanks to breakthroughs in research, a renewed sense of hope has been brought to individuals with HD and their families, offering a brighter future for the HD community.

Research opportunity - ASCEnD study

The ASCEnD study is currently recruiting participants to investigate the effectiveness of combining aripiprazole and sertraline versus quetiapine medication in treating bipolar depression. This study aims to evaluate the clinical and cost-effectiveness of these treatments.

Eligibility criteria:

- Aged 18 or older
- Diagnosed with a major depressive episode in bipolar disorder

- Clinical uncertainty regarding treatment options
- Willing to engage in weekly follow-up calls and complete online questionnaires.

Participants will be randomly assigned to one of two treatment groups and will complete weekly questionnaires, maintain a medication diary and participate in phone calls with research assistants over 24 weeks. In return, they will receive £50 in Amazon vouchers and regular support from the trial team.

For more information, please contact **Steph Fortier, Clinical Studies Officer**

✉ stephanie.fortier@nhs.net

Looking to 2025

This year is set to be a busy one for our R&D team who will be conducting several research-based initiatives throughout 2025. Take a look at just a few of the many events to watch out for...

Research Champion initiative - This will offer staff an opportunity to actively engage with the R&D team, support recruitment and raise awareness about research.

R&D showcase - The team is preparing for its second showcase in September, where they will share their latest research achievements and celebrate progress.

Nursing Preceptorship Training - The team will be presenting at the Nursing Preceptorship Training, helping to inspire healthcare professionals to engage in research.

A culture of research and collaboration - At BSMHFT, we believe research is vital to improving patient care and outcomes. The collaboration between service users, staff and researchers is driving meaningful advancements in treatment. Together, we can ensure that individuals with Huntington's disease, bipolar disorder and other conditions have access to the best care and the latest therapeutic innovations.

We're proud of the progress our R&D team has made, but there's more work to do. Support through participation, awareness, or recruitment is essential to reaching our shared goals.

Let's continue making a positive impact on the lives of our service users and patients.

For more information or to sign up to the R&D newsletter, contact bsmhft.researchanddevelopment@nhs.net



New plans for children and young people

Health and care services in Birmingham and Solihull have been working together to improve mental health care for children and young people in our area by developing a new plan for the way services will be delivered in the future.

The draft model of care, is being shaped by feedback from children, young people and their parents and carers, as well as staff and stakeholders involved in children and young people's mental health care across Birmingham and Solihull.

The design of this new service is being led by the Mental Health Provider Collaborative.

Jenny Watson, Deputy Director of Commissioning and Transformation for the collaborative, said: "The purpose of the new way of working is to improve access to mental health services across Birmingham and Solihull by providing care closer to home and greater support at an earlier stage; and also to address health inequalities that currently exist."

The purpose of the new way of working is to improve access to mental health services across Birmingham and Solihull

Jenny Watson
Deputy Director of Commissioning and Transformation

Currently, Solar, a partnership between Birmingham and Solihull Mental Health NHS Foundation Trust, Barnardo's and Autism West Midlands provide mental health services for people aged 0-18 in Solihull, whereas in Birmingham, services for young people aged up to 25 are provided by Birmingham Women's and Children's NHS Foundation Trust.

In the future, there will be one, all-age mental health service for Birmingham and Solihull, which will be provided by Birmingham and Solihull Mental Health NHS Foundation Trust.

Jenny added: "The aim of providing an all-age service is to ensure that children can access support at the point of need regardless of their age. With earlier intervention, the hope is that these young people are less likely to need mental health support in adulthood."

The latest round of feedback is being analysed with a view to shaping the final model of care – which will then be implemented by BSMHFT as the new provider.

Jenny added: "The planned improvements will take time and we recognise that at the moment teams are working hard, in difficult circumstances to provide the best care they can in line with the current models of care but it's really important that we work together to create a service that works better – for those receiving it and for those delivering it."

The Trust recently hosted an internal discussion (Listen Up Live) with more information on the new plan and what this will mean for staff and service users. Staff can visit Connect for details and look out for more information coming soon.

If you would like to be more involved in developing the new model of care or have any questions about it, please contact
✉ bsmhft.jointcommissioningteam@nhs.net.



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Jenny Watson
Deputy Director of Commissioning and Transformation

A NEW YEAR

A HEALTHIER YOU

It's common for people to make New Year's resolutions, but sometimes, the smallest lifestyle changes can make the biggest difference to your body and mind. This year, we are encouraging our readers to be kinder to yourselves and prioritise your health and mental wellbeing in a safe, realistic and most importantly, healthy way. Below we have provided you with helpful resources that can help kickstart your journey to taking better care of your body and mind.



This is my fresh start

Better Health Smoke free NHS

You know you want to quit. We know you can.



Get free support to quit smoking.

Quit smoking

Stopping smoking is one of the best things you will ever do for your health.

It's never too late to quit smoking. Whether you've attempted to quit before, been thinking about it for a while, or are only just considering stopping, NHS services can help.

There are lots of different support options and tools available, so you can find the right way to quit for you.

Quitting not only improves your respiratory health but also your mental wellbeing.

Make sure you throw away all your cigarettes before you start. Remember there is never 'just one cigarette'. You can do it!

🔍 Search 'Better Health Quit Smoking' or visit www.nhs.uk/betterhealth

Eat well

Eating a healthy, balanced diet is an important part of maintaining good health and can help you feel your best.

This means eating a wide variety of foods in the right proportions and consuming the right amount of food and drink to achieve and maintain a healthy body weight.



The Eatwell Guide shows that to have a healthy, balanced diet, people should try to:

- Eat at least five portions of a variety of fruit and vegetables every day
- Base meals on higher fibre starchy foods like potatoes, bread, rice or pasta
- Have some dairy or dairy alternatives (such as soya drinks)
- Eat some beans, pulses, fish, eggs, meat and other protein
- Choose unsaturated oils and spreads, and eat them in small amounts
- Drink plenty of fluids (at least six to eight glasses of water a day).

Please note, if you or someone you care for has special dietary requirements, medical needs or an eating disorder, please seek advice from a registered healthcare professional in the first instance.

Scan the QR code to read the Eatwell Guide.



Better Health

Let's do this

NHS



Get active

Being active is good for your mind and body. Every minute of activity counts – and the more you do, the more you'll benefit.

Exercise can:

- Improve your sleep
- Clear your mind
- Boost your energy
- Help with back or joint pain.

Exercise can also reduce your risk of developing heart disease, stroke, type 2 diabetes, dementia, Alzheimer's disease and some cancers.

Want to get active but don't know where to start? Couch to 5K is a running programme for absolute beginners. Couch to 5K can be completed in as little as nine weeks, or longer if you want to go at your own pace.

Scan the QR code to download the free app.



Drink less alcohol

It's recommended to drink no more than 14 units of alcohol a week, spread across three days or more. That's around six medium (175ml) glasses of wine, or six

pints of 4% beer. There is no completely safe level of drinking but sticking within these guidelines lowers your risk of harming your health.

Cutting back on the booze can be an effective way to improve your health, boost your energy, lose weight and save money.

If you drink nearly every day, drinking less might lower your risk of having high blood pressure.

If you are worried that you might have a problem with alcohol, the first big step is getting help.

Scan the QR code to find out more about the support services available.



Trust Talk readers share their stories



One in four of us will struggle with our mental health at some point in our life. Despite this, there are still so many people that struggle in silence. We want to change this. In this edition, Ian, Natalie and Mohammed bravely open up about their mental health journeys with the hopes it challenges the stigma surrounding mental illness and encourages more of our readers to reach out if they need support.

Ian's story

Former West London bus driver, Ian Tighe had his life turned upside down following the London bombings 7 July 2005. Since that day, Ian has worked hard to overcome many mental health challenges that were exacerbated due to what he witnessed.

Now an Expert by Experience (EbE) at Team BSMHFT, Ian, 57, shares his story that is one of hope to many people out there, particularly those who often suppress their emotions. This is Ian's story.

"I cannot describe to you the chaos and trauma that the public and I went through following the 2005 attacks. Everything about that event was the catalyst that sparked the decline in my mental health and changed my life forever. In a matter of months, I had lost my job, my partner, my home and shortly after I was sectioned for the first time at West Middlesex Psychiatric Hospital.

Prior to being sectioned, I didn't know that I was becoming unwell but looking back I was in so much need of support. To numb the pain of how I was feeling, I turned to street drugs and became really unwell. I was diagnosed with Post Traumatic Stress Disorder (PTSD) and after being discharged, I later left London to live in Birmingham, a place that I now call home.

I grew up in the late 60s where, particularly in my household, we didn't really talk about mental health. I'd summarise my childhood as very anxious, I was never taught to believe it was okay to share how I was feeling emotionally, I feared reprisal and I grew into a man not really understanding how to navigate my stress.

In 2008 I received support from BSMHFT following a relapse in my mental health, where I became an inpatient at Oleaster, a Psychiatric Intensive Care Unit located in Edgbaston. It was at Oleaster where I met the wonderful Dr Brownhall who has been a consistent source of support for the past 16 years of my life. I also received a formal diagnosis of bipolar disorder and was educated on how to manage my symptoms better. I am now at peace with my diagnosis, it's nothing to be ashamed of.

It's no secret that a lot of men struggle with their mental health.

Rather than the 'butterflies' I often call anxiety 'bats in your stomach'. It's an unpleasant, evil feeling and the only way to overcome it is to seek help. It's out there if you need it.

With the help of therapy, I now have an internal voice in my head that runs a bit like an antivirus software in a computer – it keeps telling me "You can do this, you can do this". It's easy to catastrophise things, but nine times out of 10, it all works out okay. I don't feel anxious to share my story with people anymore.

I am so resilient now, there's nothing that phases me.

Today, I take my medication regularly such as antipsychotics to calm my brain down and help me to sleep. Medication is nothing to be ashamed of or fear. A lot of people I speak to in my role as an EbE, particularly men, worry about the side effects of drugs impacting metabolism or erectile dysfunction – speak to your care provider who can go through all possible outcomes.

"One message I'd like to leave people with is this. If you've got that continuous looming feeling that won't go away or you're turning to dangerous habits to suppress a feeling – it's not normal. Don't ignore it, speak to your friends, your family, share what you are feeling inside and take time out for you. The alternative of living with poor mental health is a miserable one."

I don't feel anxious to share my story with people anymore."

Natalie's story

After struggling with disordered eating for over 15 years, Natalie finally fulfilled her lifelong dream of becoming a mum three years ago when she gave birth to her baby boy, Jacob. In her own words, Natalie wanted to share her story of what life was like living with an eating disorder and how it impacted both her life and those around her.

With support from our eating disorder specialists at the Barberry Centre, Natalie has been able to transform her life. By sharing her story, she hopes to encourage others to reach out for help if you need it.

"I struggled with an eating disorder from the age of 16. When I reached out to the Barberry, I was aged 29. I had been struggling for most of this time with various eating disorders (anorexia/bulimia/binge eating).

At 28 years old I had a bone density scan that revealed my spine was basically osteoporotic – not something you want to hear at such a young age.

The idea of starting a family with my husband was not a possibility and I was so desperate to try to change things but knew that I couldn't without proper help.

It affected my life in every way. I felt like I was living a daily hell that I could not get out of.

I spent years punishing myself with gruelling exercise at the gym, which I didn't want to do, but felt I 'had' to. I had days of feeling starving because I wouldn't allow myself to eat much and would be tormented at night feeling starving. I felt like I was having to listen to some bit of my head that I didn't want to listen to and then at times, would 'give in' to the starvation with periods of bingeing, to then feel guilt and shame and then purge. It was awful. Anorexia/bulimia dominated the years of my life which are meant to be the times that you enjoy. I felt like I was living a lie for most of my 20s.

When I finally reached out to BSMHFT I was desperate for help. My marriage was being tested and we wanted a family, but with me having anorexia, it just wasn't possible. No one really speaks of the fact that eating disorders can ruin your fertility.

From the moment I met the psychiatrist for an initial assessment, I was treated with kindness and compassion. I was amazed that someone could be so understanding. I was finally told that I could receive help and would be placed on a waiting list for day patient service. The staff were wonderful. They supported during mealtimes, but also had a 'hard line' approach at times which anyone with an eating disorder needs.

Eating disorders thrive on secrecy and the staff were quite astute with this. The dietitian at the Barberry made gradual meal plan changes, involving all food types and groups, to rewire your relationship with food, whilst helping me to restore weight that was very much needed. My psychologist was like no other person I have ever met. I would be nowhere without her. She helped me understand the background to my eating disorder and how to treat myself with compassion.

The support I received has helped me in every aspect of my life.

In 2021 I was able to fall pregnant and gave birth to my now, three-year-old, son. I never dreamed I would become a mother because

anorexia/bulimia stripped me of that for many years. The dietetic support helped me reframe food, so that even after a small blip post birth, I was able to get myself back on track without needing day patient treatment again. The psychological intervention that I received helped me to work on how I speak to myself. To treat myself with more compassion and ask for support from loved ones (particularly my wonderful partner) if I felt I was struggling.

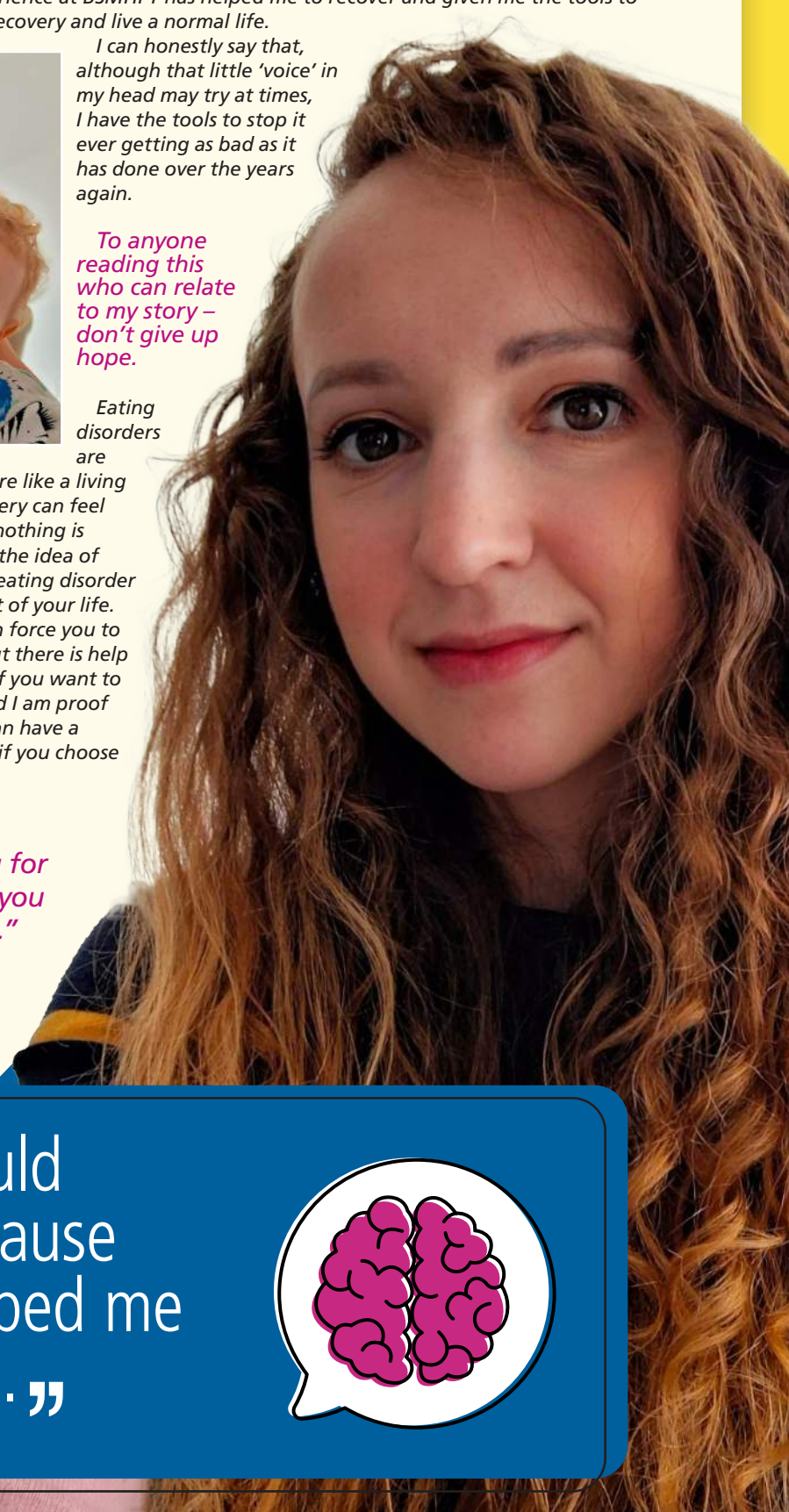
My experience at BSMHFT has helped me to recover and given me the tools to maintain recovery and live a normal life.

I can honestly say that, although that little 'voice' in my head may try at times, I have the tools to stop it ever getting as bad as it has done over the years again.

To anyone reading this who can relate to my story – don't give up hope.

Eating disorders are vile, they are like a living hell. Recovery can feel scary, but nothing is as scary as the idea of having an eating disorder for the rest of your life. No one can force you to recover, but there is help out there if you want to change and I am proof that you can have a better life if you choose recovery.

"Keep fighting for the life you deserve."



I never dreamed I would become a mother because anorexia/bulimia stripped me of that for many years.”



Mohammed's story

"I had a family history of bipolar disorder, but I never really knew the extent that it could impact your life until it happened to me.

Prior to my mental health struggles, I was very social, a good laugh, opinionated to the extreme on just about everything - full of energy and motivation, eccentric (according to a mate of mine).

I used to run my own business, I was married, I was an Optometrist. On the surface everything was fine, until it wasn't.

Leading up to my nervous breakdown nine years ago, I had a series of events that began to chip away at me and out of the blue one day, I had my first nervous breakdown. I was letting the stress build up and build up and dealing with it (the way I thought was best) by not sharing it with anyone.

I remember the day of my nervous breakdown pretty well. I was driving in the car with my family and I began to have a panic attack of sorts. I couldn't think straight and began to speak gibberish, my partner at the time thought I was having a stroke and my young kids initially giggled as they thought I was doing it intentionally. I had no idea what was happening to me.

When I was growing up, mental health wasn't really talked about much like it is today. We knew about diabetes, heart disease and so on, but nobody held mental health to the same regard. You'd often hear comments like "you've just got to man up" which were completely unhelpful and degrading.



On the surface everything was fine, until it wasn't.

Brummie born Mohammed Khan, 49, opens up about his mental health journey following his nervous breakdown in 2014/15. Below, he encourages us all to treat our mental health with the same importance as our physical health. Mohammed also touches base on male hesitancy to reach out for support and how we can all play our part in challenging unhelpful stigmas.

Today, Mohammed works with our Trust as an Expert by Experience, using his lived experience to positively impact our services and decision-making. This is his story.



In addition, I came from an Asian background where the approach tends to be to always keep a "stiff upper lip" when it comes to mental health issues. Some people in the Asian community tend to blame the symptoms of mental illness on the evil eye, black magic, or demonic possession. This makes sufferers even more reluctant to come forward and seek treatment. Often people seek support from religious figures in the community, who have a reputation for 'treating' the symptoms of mental health issues aka as symptoms of black magic etc. The problem is, for some mental illnesses, you must seek professional mental health support to access NHS prescribed medication.

After being sectioned at the Zinnia Centre in 2018, I was diagnosed with bipolar disorder, type one.

Having bipolar disorder at times is like a tornado going through your life, your finances, relationships, businesses.

It affects every aspect of your life. When you become 'manic' your behaviour can get erratic, so people can find it hard to get along with you. On the other side of bipolar disorder is depression, it's like going into hibernation. I didn't answer calls, texts, I couldn't talk to anyone. It was like hell on earth.

Mental health problems are nothing to be ashamed of and today I am in a place where my mental illness is controlled with the help of long-term medication, follow-up appointments from the BSMHFT team, my religiosity leading to mindfulness (through prayer and reading the Qur'aan) and my own wellbeing, exercise, as well as trying to help others.

"Treat your mind like you would treat your physical body. If you are struggling, please go to your GP, listen to what they say, be persistent about getting professional NHS mental health support. If you don't feel like you can do it alone, you can ask a loved one to come with you or help to refer you."

We are so incredibly grateful to Ian, Natalie and Mohammed for sharing their stories. If you would like to share your lived experience and feature in our next edition of Trust Talk, please email our Communications team
✉ bsmhft.commsteam@nhs.net.

Acute Patient Council celebrates their one-year anniversary

The Acute Patient Council is a place for attendees to share their positive experiences at BSMHFT, whilst also being a safe space for people to share their thoughts on where we could improve.

Led by Katy Willmont, Participation and Experience Lead and her team, the hybrid meetings across 16 of our inpatient wards are always well attended and feature both patients and staff members.

Thanks to collective patient feedback over the year and over seven sessions, we have made various improvements to our acute care services.

Ensuring patient's voices were heard, the Trust has now introduced daily morning meetings across our acute sites where a plan for the day is discussed, including planning leave, visitors to the wards and a positive quote to start the day.

Comments were made about the lack of activities available across the sites, so, building upon existing initiatives, we have launched additional training to support all staff to carry out activities - especially in the evenings and weekends.

The Acute Patient Council would not be what



it is today without the involvement of our Experts by Experience, who helped co-produce the Patient Council from the very beginning.

Pictured above are Ian and Jess, two of our Experts by Experience who played a fundamental role in ensuring the Patient Council was a success.

Tariro Nyarumbu, Associate Director of Operations, Acute and Urgent Care said:

"Congratulations on marking your one-year anniversary. Hearing the patient voice is very important. Thank you, Katy, for your leadership and thank you to everyone who is a regular contributor!"



Proud to announce the launch of the Values Awards 2025!

Our Values Awards are an opportunity to shine a light on and celebrate some of the incredible work of many of our individuals and teams from over the last 12 months.

This year's awards see the welcome return of our Service User and Carer Choice Award.

Sam King was last year's gold winner of the Service User and Carer Choice Award. A Health Care Assistant at our Solihull Home Treatment team, Sam's genuine care for her service users is displayed in everything she does. Her nominee reflected on the care Sam gave to them saying:

"She most certainly saved my life, when I was set on ending it and I will be forever grateful to her. She made me feel like a worthwhile human being."

Take a look at Sam's beaming face following her win at last year's awards ceremony.

Is there a superstar staff member or



terrific team that has gone over and beyond to support and help you or someone you know? If so, please share your story with us for their chance to win!

Please note you must be a service user or carer to nominate in this category.

Closing date for entries, received electronically or by post, is midnight on Sunday 2 February 2025.

Scan the QR code for more information.



Our Team of the Month winners



Our *Team of the Month* award is one of the ways in which we recognise our fantastic teams. With more than 4,000 staff working across over 40 sites, we are immensely proud of the 160+ teams that support thousands of local people who need our mental health expertise.

Whatever the role each team plays, *Team of the Month* recognises those who bring alive our values of **Compassionate, Inclusive and**

Committed every day while they are at work. We are delighted to share the latest winners of our *Team of the Month*.

Congratulations to the winning teams and all of the teams that have been nominated over the last few months. To see a list of those, scan the QR code.



September's Team of the Month winners

Uffculme Reception team



The Uffculme Reception team is the face of the Trust, welcoming new inductees and supporting staff and service users to feel at ease. They go above and beyond, even when

the centre is extremely busy, they always have time to help and support. They also support Caring Minds, our Trust charity and raised a whopping £1,500 last year!

October's Team of the Month winners

Community Art Psychotherapy team

The Community Art Psychotherapy team deliver a unique and meaningful service as well as taking significant strides into new and uncharted territories. They focus on equity of provision, co-production with patients and service users and broadening the range of interventions.



November's Team of the Month winners

Riverside and Small Heath Psychological Services Community Mental Health team

The team has been instrumental in addressing the waiting times in Community Mental Health Teams (CMHT) in East Birmingham. They also created and implemented a

Stepped Care Model of Psychological Therapy delivery in secondary care. This was inclusive of all professionals and involved liaising with link workers from other services supporting CMHT.

Nominate your Team of the Month

If you're a member of staff, patient, service user, carer, family member or one of our health partners, we'd love you to nominate the team that you feel has had a positive impact on you.

Just complete the short nomination form explaining why your chosen team should be worthy winners of the *Team of the Month* crown. This is available on the staff intranet Connect or via our website

www.bsmhft.nhs.uk (see QR code). Nominations for *Team of the Month* close on the 15th day of each month. Any nominations received in the second half of the month will be included in the following month's awards.



Support for partners after baby loss

Whilst there are many baby loss support services in Birmingham, very few are targeted towards dads and partners. We want to change this.

Our Maternal Mental Health Service has teamed up with baby loss support charity, The Lily Mae Foundation, to encourage more bereaved partners to reach out if they need support.

The loss of a baby can be a devastating and traumatic experience that affects both women and men. After baby loss, people often focus on the person who carried the baby. Whilst this is naturally the focus in tragic situations like this, it's also important to acknowledge that partners have experienced a loss too and may also need support.

Working together with Matt Whitehouse, a father who lost his daughter Callie eight years ago due to complications at birth, we want to raise awareness of the support groups available in Birmingham specifically for partners.

Sharing his lived experience of baby loss, Matt reflects on how difficult it was to find the appropriate support during the hardest moment of his life.

After receiving help from The Lily Mae Foundation, Matt is now a Peer Support Worker at the very place that helped him through his loss and now supports partners going through what he once did.

Matt hopes his story will encourage more partners across the borough to get the help they need when trying to navigate their grief. Matt said:

"My message is, don't be afraid to access this support, because all we want to do is help you."

Fathers often feel the need to mask their grief to emotionally support their partners, many jumping back into work without



I wish I'd had someone like me to talk to... and I didn't."

Matt Whitehouse

allowing themselves the opportunity to fully heal.

Working with The Lily Mae Foundation, a new pathway specifically for dads and partners has been set up, providing a safe space to talk to people like Matt who have gone through similar experiences. No matter how recent or long ago, we are here to help you. Support services can vary depending on what works best for you, such as face-to-face, telephone calls or video calls.

Dr Samantha Day, Consultant Clinical Psychologist and Clinical Lead for our Maternal Mental Health Service said:

"We are so pleased as a service to be able to offer something to the partners of the birthing people we support, who we know have their

own experiences of grief and often mental health distress following the loss of baby. Being able to connect with someone like Matt from The Lily Mae Foundation will hopefully support partners to feel less alone in their experiences and provide some valuable peer support."

If you would like to learn more about our bereavement support services, please email bsmhft.mmhs@nhs.net to speak to a member of the team.

You can also scan the QR code to learn more about the many baby loss support services we have at the Trust.



'Breathe easy' by getting vaccinated this winter

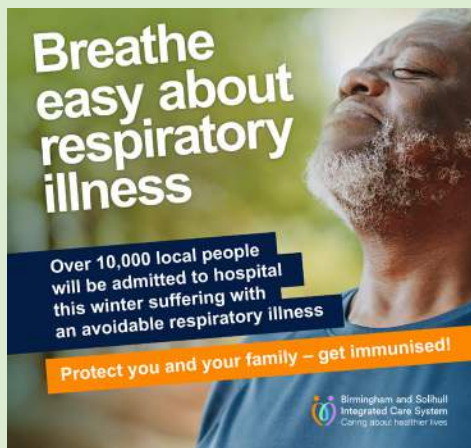
Start the New Year off right by getting vital protection against common winter illnesses.

Over the winter period, hundreds of local people may die because of avoidable respiratory illnesses and 10,000 admissions to hospital could be prevented by having timely vaccinations.

In preparation for the winter period, NHS Birmingham and Solihull has launched a campaign, encouraging people to 'breathe easy' by getting the best protection.

Unvaccinated residents over 65, those with long term health conditions and pregnant women are among those most at risk of getting flu, COVID and Respiratory Syncytial Virus (RSV).

RSV is an infectious disease of the airways and lungs. It can make people become wheezy or short of breath and lead to pneumonia and other life-threatening conditions.



There is no specific treatment for RSV and whilst most infections will get better by themselves, every year thousands of older adults and newborn babies need hospital care for RSV, with some sadly dying.

RSV can be more severe in older people, those with medical conditions such as heart or

lung disease or a weakened immune system. Those who are eligible for the RSV vaccine are being invited to get immunised by their GP. It is common in young children but is most serious for small babies, which is why maternity services across the region are offering pregnant women an RSV vaccine from 28 weeks up to delivery.

Dr Nat Rowe, Birmingham and Solihull's Deputy Chief Medical Officer, is also warning of pressure over GP appointments with over 3,500 across Birmingham and Solihull expected to be taken up by patients with avoidable respiratory illnesses. She said:

"Vaccination is the best form of defence against Flu, COVID and RSV. No one wants to be admitted to hospital for an illness that could have been entirely preventable.

"We need people to take advantage of the vaccinations that are available to them this winter and do all they can to protect themselves and those around them from these potentially serious and sometimes fatal infections."

Across Birmingham and Solihull there are

232,053 adults aged 65 years and over who are eligible for a COVID and flu vaccination. There are over 200,000 residents who are aged six months to 64 years in a clinical risk group who would benefit from the protection of both COVID and flu vaccinations.

David Melbourne, Chief Executive of Birmingham and Solihull's Integrated Care Board, said:

"We know that immunisations keep residents and health and care staff 'breathing easy.' We can only achieve our long-term goals of keeping Birmingham and Solihull residents safe and well by doing everything we can this winter."

For more on essential immunisations this winter, visit the NHS Birmingham and Solihull's website by scanning the QR code.



Did you know that community pharmacies can offer treatment and when appropriate some prescription medicine, for seven common conditions without patients needing to see a GP?

Highly trained pharmacists can now assess, treat and when appropriate, provide some prescription medicine for earache (for those aged between one and 17 years old), impetigo, infected insect bites, shingles, sinusitis, sore throat and urinary tract infections (UTIs) for women aged 16-64 - without the need for a GP appointment.

Available at the heart of local communities, community pharmacy teams have the right clinical training to give people the health advice they need, with no appointment necessary and private consultations available. Community pharmacists will signpost patients to other local services where necessary.

By expanding the services community pharmacies offer, the NHS is aiming to help free up GP appointments and give people more choice in how and where they access care.

Don't wait for minor health concerns to get worse – think pharmacy first and get seen by your local pharmacy team.

For more information, visit [nhs.uk/thinkpharmacyfirst](https://www.nhs.uk/thinkpharmacyfirst)

New hub brings new opportunities



The Solihull Perinatal Mental Health Service celebrated the opening of their new base at the Maple Leaf Centre, a significant milestone for the team and the community they support.

Officially opened by Patrick Nyarumbu MBE, Deputy Chief Executive, the event marked a new chapter for a service that has been a lifeline for new mothers and their families since its inception in April 2021.

Perinatal Mental Health Services provide specialised care and support for people experiencing mental health challenges during pregnancy and the first two years after giving birth. These services address a wide range of needs, from anxiety and depression to more complex mental health conditions such as postpartum psychosis, recognising the profound impact that early parental wellbeing has on families.

Portia Nyamakanga, Solihull Perinatal Team Manager shared her thoughts on the importance of the new base:

"This is the first time we've had a space where we can work together as a team and welcome service users in a dedicated, safe and family-friendly environment. Our service users can bring their children with them, removing barriers and creating a supportive atmosphere



where we can better understand and address their needs."

With a compassionate team at its heart and a new base to deliver care from, this service is set to change lives and help new families thrive in a welcoming and inclusive space.



Caring Minds



Run miles for Caring Minds this May!



Enhancing a person's visit to BSMHFT can make all the difference to their wellbeing, recovery and overall experience of our services. Caring Minds is our charity and supports the Trust's vision of improving mental health wellbeing, by providing added extras that are over and above what the NHS can provide.

If you would like to raise money for Caring Minds or find out more about the work of the charity, please email: bsmhft.fundraising@nhs.net

You can make a small donation today, by visiting Caring Minds' JustGiving page: www.justgiving.com/caring-minds

Scan here to donate



Put your best foot forward this May and sign up to support Caring Minds in the AJ Bell Great Birmingham Run.

Join thousands of fundraisers across the country for one of the biggest and best running events held right here in the Midlands.

One in four of us struggle with our mental health, it could be you, your parent, a sibling or a friend. By fundraising for Caring Minds, you will enhance and add value to the service user, patient and staff experience – beyond what the NHS is able to provide.

Starting and finishing in the heart of the city centre, soak up the atmosphere alongside other fundraisers on Sunday 4 May 2025. You can either run 10k or a half marathon - the



"I've always loved doing challenges for charity, the more bizarre the better!"

Stacey Watkins



choice is up to you! You don't need to be an experienced runner; people of all abilities take part for a cause that is close to their heart.

If you or a loved one has experienced exceptional care from Team BSMHFT and you would like to give back, this event is for you. Simply scan the below QR code to take you to the official Great Birmingham Run webpage.

Once you have secured your place, get in touch with the charity team by emailing bsmhft.fundraising@nhs.net who will send you your fundraising pack. Please note, all fundraisers are expected to raise a minimum of £200.

One of our runners this year is Stacey Watkins, Quality Improvement Lead who shares why she is running for Caring Minds.

"I've always loved doing challenges for charity, the more bizarre the better!"

Caring Minds is close to my heart as I feel so strongly about mental health. It is easy for people to overlook and stigmatise; but when yourself or others around you experience it, it's something you develop a passion for advocating.

I've always been a bit of a couch potato and didn't do any exercise, early last year I had never done any running before. In June 2024, I completed the Couch to 5k programme, loved running and wanted a bigger challenge, so I signed up for the Great Birmingham Run 10k.

My advice to anyone who wishes to take part in running for Caring Minds is this - small steps make the big things happen. Treat yourself to some good running shoes and start with the Couch to 5k programme, each run you complete will give you a sense of satisfaction.

Knowing you are doing something that makes a difference is why I've worked in the NHS over seven years, fundraising for our charity is the icing on the cake!"

Unlike Stacey who is relatively new to running,

Louise Hudson, Senior Project Manager has completed various half marathons over the years and is keen to take part this year for Caring Minds.

"This is a great opportunity to raise awareness of BSMHFT and Caring Minds through an inclusive, supportive and enjoyable event.

For me, the charity reinforces the reason we do the job that we do – to support recovery from mental illness. I personally find running helpful for my own mental health. It's a chance to get some fresh air, process our often-overloaded minds and just take time for ourselves.

I don't think any of us need to reach out far to know of someone who has been impacted by mental illness. This just reinforces how important it is to keep raising awareness of mental health and how much support is available to aid our recovery.

Running is probably one of the most inclusive and accessible sports you can do. In any run, you have the people who are sprinting for their personal best or newcomers that don't even know if they can make it to the end! Being nervous is part of the experience but once you have done it, you will feel such an achievement and will no doubt go home and sign up to your next race.

"Focus on you, don't worry about anyone else (because they are only thinking about themselves as well) and just ask yourself, what's the worst than can happen?"

Scan the below QR code to set up your JustGiving page today.



"This is a great opportunity to raise awareness of BSMHFT and Caring Minds through an inclusive, supportive and enjoyable event."

Louise Hudson



SSL trial hydrogen vehicles



Summerhill Services Limited (SSL) continue to develop the Trust's Green Strategy by being one of the first organisations in the UK to trial hydrogen vehicles. The trials took place Monday 16 December 2024 - Thursday 16 January 2025.

Hydrogen vehicles are an eco-friendly alternative to petrol or diesel vehicles, as they emit water vapour into the atmosphere, producing zero harmful emissions.

The trials are part of a full feasibility study being carried out by SSL, which will compare the running costs of hydrogen vehicles against diesel, petrol and electric vehicles (EV). The study will also look at how the vehicles support the general operation of SSL and our Trust and how effective the vehicles are in reducing our carbon footprint.

Synbiotix - Electronic meal ordering system coming soon

SSL and Emily Stuart, Trust Food Services Dietician, have been working on the implementation of a digital food ordering system called Synbiotix. The new ordering system will replace existing paper-based food ordering across Trust sites, which is primarily driven by mandated guidelines within the NHS England 'National standards for healthcare food and drink'.

The changes to food ordering, will also offer many benefits to patients and staff, including:

- More involvement of the patients in the process of ordering food
- Reducing time between ordering food and eating it, which creates a more normalised approach to eating as well as reducing waste
- Better ability to track food waste and monitor the drivers for waste
- Creating a direct link between food orders and Rio. Patient names and daily food orders will align to their dietary information and care plans such as the

- type of therapeutic diet required or food allergy information
- Improving time efficiency
- Reducing the use of paper, which helps us all work towards keeping our Trust green and sustainable.



Synbiotix has been rolled out across a number of Trust sites including Highcroft, with the feedback so far being positive. This year, the project team will be rolling out the system at Ardenleigh, followed by Reaside, Tamarind, Zinnia and Barberry.

The introduction of the electronic system means that patients will now be supported to make their meal choices the day before they eat them, with the aim of transitioning to same-day ordering in the future. Clinical staff will support patients with making their choices.

This change supports the new menu roll out across our secure sites, Zinnia and Barberry which was trialed with patients at the end of 2024. The Synbiotix project team will be seeking feedback on the new menus at the relevant patient councils in the coming months.

If you have any questions or feedback about Synbiotix, please contact:

- ✓ Emily Stuart, Food Services Dietician emily.stuart6@nhs.net
- ✓ Lee Gough, Head of Facilities Management lee.gough1@nhs.net

Quiz Challenge

1. Which title is usually given to the president of a yacht club?
2. The Labouchère system is used in which gambling activity?
3. The stirrup bone is where in the human body?
4. Which school attended by King Charles III was later described by him as being like 'Colditz with kilts'?
5. Wolf Hall, the 2009 Man Booker Prize-winning book, is by which author?
6. Who came third in football's 1998 World Cup on the first time they had competed?
7. Reformed in 2024, the band Oasis includes the Gallagher brothers. What are their first names?
8. Kaolin is a type of which substance used in arts and crafts?
9. Which astronomer first discovered that the universe was expanding?
10. What V is the title of a TV series featuring Ragnar Lothbrok, an ancient warrior?

FIVE ALIVE

SA	AC	UI	NT	TE
CS		PD		EA
PA	HI	EP	AE	SD
RI		AE		DE
FC	UO	RL	LA	YL

Here are two miniature five-square crosswords using the same grid – but the letters have been mixed up. You have to work out which letters belong to which crossword.

EQUALISER

3	4
5 ○ 3 ○ 4	
8	2
6 ○ 4 ○ 1	
9	1

Place the four signs (add, subtract, multiply, divide) one in each circle so that the total of each across and down line is the same. Perform the first calculation in each line first and ignore the mathematical law which says you should always perform division and multiplication before addition and subtraction.

CROSS CODE

26	25	21	7	26	18	18		17		14		8	
5		16		25		15	7	4	17	24	13	26	
4	15	13	3	24	21	26		22		23		25	
11		17		22		26	10	9	11	8	11	2	
15	7	24	18	2	11	22					16		
15			12		2	9	6			26	25	21	18
26		15	11	25	26		16	25	22	26		4	
21	3	4	17		17	24	6		9			25	
		20				22	16	7	16	25	26	7	
7	24	20	11	26	18	2		24		16		11	
26		7		19		4	25	2	6	11	25	13	
24	17	26	3	11	22	24		11		18		9	
1		21		7		7	16	25	13	26	18	2	

ALPHABET

1	2	3	4	5	6	7	8	9	10	11	12	13
		T				L						
14	15	16	17	18	19	20	21	22	23	24	25	26
		O										

Each number in our Cross Code grid represents a different letter of the alphabet. You have three letters in the control grid to start you off. Enter them in the appropriate squares in the main grid, then use your knowledge of words to work out which letters should go in the missing squares.

As you get the letters, fill in other squares with the same number in the main grid and control grid. Check off the alphabetical list of letters as you identify them.

CRYPTIC CROSSWORD

1		2		3		4		5	6		7
8								9			
11						12		13			
		14	15								
16											17
18						19				20	
21						22	23				
24						25					

ACROSS

1. Aversion to said test possibly (8)
5. Bones of an albatross actually hidden (4)
8. Heavenly guide for European actor (4,4)
9. Throw ring around ancient coin (4)
11. Direction to the penthouse hospital? (7)
13. Right to put yours truly in goal (5)
14. Realistic stage of an astronaut's journey (4-2-5)
18. Commander elected once more (5)
19. Having lumps, our land was remodelled (7)
21. One sort of trust (4)
22. Went up as many finished (8)
24. Old form of recording was a single (4)
25. Personal appearance of a spirit (8)

DOWN

1. Provide testimony from French model (6)
2. Targeted relative for excursion (5)
3. Voting not to take part (10)
4. Most of the side have a drink (3)
6. National theme (7)
7. Make reference to the fact that everybody is due to change (6)
10. Anyway look at the French ship (10)
12. Take a plunge with fatal results (5)
15. Hunter clutches at the address (7)
16. There's nothing in this flask (6)
17. Plod is last to arrest Barnaby (6)
20. Wild eland charged (5)
23. Titled man to whom a letter might be addressed (3)

