

Bipolar Service

- Please see link - [Bipolar Service \(MDS\) - Birmingham and Solihull Mental Health NHS Foundation Trust](#)

Psychosis, Schizophrenia/Schizo-Affective Disorder

CMHT Psychological Services:

- Psychosis Foundation Group Programme and Hearing Voices Group Programme
- CBT for Psychosis input through individual therapy
- Alongside this is the usual input from medics, CPNs, and OT as well as support workers.

EIP service in Solihull through BSMHFT

Birmingham EIS is provided by FTB who are in the process of coming under our trust soon

Assertive Outreach, Steps to Recovery and Integrated Community Rehab Team

- Assertive Outreach and Steps to Recovery teams work with people experiencing Psychosis or Bipolar Disorder. These service users have a range of strengths and needs, and, for a variety of reasons, many have found it difficult to engage with mental health services.
- There is a unique opportunity to work flexibly with individuals, carers, and teams to support recovery and improve wellbeing. As psychological practitioners, we offer a range of therapeutic interventions, using creative approaches to facilitate collaboration and engagement. Working as part of the multidisciplinary team, we contribute to meeting the needs of service users and carers in an individually tailored way.

Bipolar and Psychosis Working Group

The Bipolar and Psychosis Working Group is a fortnightly multi-disciplinary transformation, collaboration workstream spanning across the different services in BSMHFT.

It brings together clinicians, Experts By Experience, and other key stakeholders to improve care pathways, service design and outcomes for people living with bipolar and psychosis.

The group is committed to co-production, continuous quality improvement and the implementation of evidence-based practices across the Trust. Its work is guided by five priority themes identified by stakeholder engagement:

1. Early Intervention
2. Training
3. Self-Management and Relapse Prevention
4. Family and Carer Involvement
5. Treatment Options

Key initiatives to date include:

- **Development of a referral tool**
A tool has been created to help clinicians and services better navigate the existing bipolar and psychosis care pathways.
- **Screening Tool Pilot**
A 31-question checklist, completed jointly by the clinician and service user, is currently being trialled. The tool generates a score to guide whether referral to a specialist service is appropriate.
- The pilot is taking place in two Neighbourhood Mental Health Teams (NMHTs) over a three-month period, with both short- and long-term outcome measures in place to evaluate its impact.
- **Whole-team training for CMHTs**
A four-day training package on bipolar and psychosis will soon be rolled out across CMHTs, supporting team-wide confidence and consistency in assessment and care planning.

EUPD/CEN

- The Trust is developing a clear structured pathway with a choice of comprehensive evidenced-based treatments for individuals with a diagnosis of Borderline/Emotionally Unstable Personality Disorder, including Mentalisation Based Therapy, Structured Clinical Management and other therapies.
- At present the Care Pathway for Personality Disorders is made up of a number of different services across the various directorates . Providing care and support to those with a Personality Disorder/complex emotional needs, ranging from generalist services to specialist. These include: Specialist Psychotherapy Service, CASCADE – DBT service, Enhanced Team for Personality Disorder, Community Mental Health Teams.
- Training for staff is an important component and a 2 day training on Personality Disorder is available for Clinicians, with a further training for non-clinical staff being developed.

The vision and values of the pathway, across the Trust, are:

- To ensure Personality Disorder and/or related complex trauma/complex emotional needs is part of our standard care.
- To ensure all staff feel confident about working with service users with a diagnosis of Personality Disorder
- No person using our services will be excluded because of a diagnosis of Personality Disorder and/or related complex trauma/complex emotional needs
- To ensure we are providing appropriate, active, collaborative, evidence based treatment pathways for Service Users with a diagnosis of Personality Disorder, and for those who are not ready for that, to help them leave services and return when they are ready.
- Ensuring the pathways for Personality Disorder are underpinned by our trust values: Compassionate, Inclusive, Committed.

- The Personality and Complex Trauma Steering group meets monthly with representation from across the Trust including Clinicians, Experts By Experience, with the purpose to improve care pathways and develop guidance on working with Service Users with Personality Disorder, risk management, service design and assessment/diagnosis of Personality Disorder.

Complex Emotion and Trauma Group

The monthly Complex Emotion and Trauma Group is a key project group within the transformation programme. Its primary aim is to develop and implement a pathway and interventions for people with complex emotion and trauma needs (sometimes associated with Personality Disorder diagnoses), in line with the NHS Long Term Plan.

The group is responsible for improving access to care, embedding trauma-informed and compassionate approaches and supporting the wider system through training, consultation and co-production.

Key areas of focus include:

- Designing a Complex Emotion and Trauma pathway appropriate for use from Primary Care and linked with other services, including Community Mental Health Teams and specialist services.
- Delivering interventions such as the Managing Emotions workshop pilot and DBT Skills Group in Primary Care settings.
- Workforce development, including the recruitment of Lived Experience and Peer Support Workers.
- Training and consultation for primary care and mental health staff, including delivery of lived experience led Personality Disorder staff training.
- Promoting equity and inclusion, including co-production at all stages and attention to diagnostic labelling and stigma.

Key deliverables include:

- Recruitment of peer support coordinators
- Delivery of training to primary care teams
- Implementation of primary care-based interventions
- Development of consistent resources and revised language use
- Scoping and integration of VCSE support

Treatment resistant depression and bipolar

- specialist mood disorder clinic for review / treatment optimisation consultation
- Eating Disorders – FREED pathway