



Birmingham and Solihull Mental Health NHS Foundation Trust
Unit B1, Trust Headquarters
50 Summerhill Road,
Birmingham
B1 3RB

XXXXRedactedXXXX

Inspection Manager
Hospitals; Mental Health
(Central West) Central Region
XXXXRedactedXXXX

1st March 2021

Your reference: RGP1-10053519614
Account number: RXT

Dear XXXXRedactedXXXX

**Re: Care Quality Commission
Health and Social Care Act 2008
Notice of decision to impose conditions on your registration as a service provider in
respect of regulated activities
Reporting schedule**

I do hope that you are well. I am pleased to attach for you documents in accordance with the following conditions applied to our registration:

Condition 3 - Commencing from 5 February 2021 the registered provider must report to the Commission on a monthly basis setting out progress being made in respect of and including mitigating measures being put in place until all ligature risks are addressed.

Condition 5 - Commencing from 1 March 2021, the Registered Provider must report to the Commission on a monthly basis the results of any monitoring data and audits undertaken that provide assurance that the system implemented is effective.

The documents demonstrate our progress in implementing the plans that we submitted to you in December and early January.

With regard to condition 5, I can confirm that we have now discussed and shared the XXXXRedactedXXXX

Chair: Danielle Oum | Chief Executive: Roisín Fallon-Williams

Customer Relations | Mon – Fri, 8am – 6pm
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Email: bsmhft.customerrelations@nhs.net
Website: www.bsmhft.nhs.uk



I look forward to discussing these with you further at our monthly relationship meeting, however should you have any immediate queries or require any additional information then please do not hesitate to contact me or XXXXRedactedXXXX, Head of Health, Safety and Regulatory Compliance.

Yours sincerely

A handwritten signature in black ink that reads "Dawn Clift". The signature is written in a cursive style with a long, sweeping underline that extends to the right.

Dawn Clift
Associate Director of Governance