



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

**1<sup>st</sup> April 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**

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.

I am pleased to enclose for your attention our latest position relating to the implementation of the section 31 improvement plan XXXXRedactedXXXX and for improving the safety of the physical environment.

Since our last report to you and the implementation of our plan, we are able to see some improvement in the safety of aspects of our physical inpatient environment.

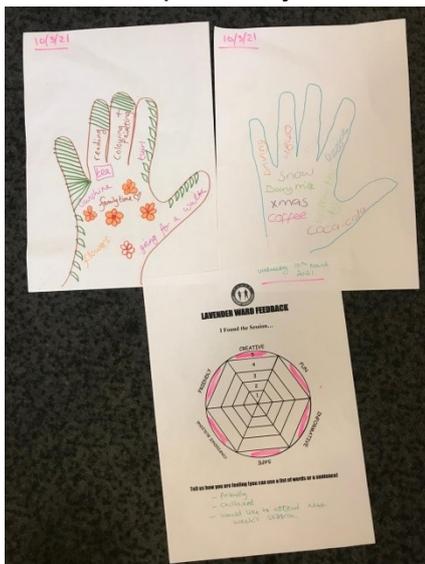
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Chair: Danielle Oum | Chief Executive: Roisín Fallon-Williams

Customer Relations | Mon – Fri, 8am – 6pm  
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Email: [bsmhft.customerrelations@nhs.net](mailto:bsmhft.customerrelations@nhs.net)  
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Within this we can see that on some wards such as Lavender there have been zero ligature related incidents reported since the implementation of the controls detailed in our improvement plan. Controls on this ward include the daily safety huddles, additional therapeutic activities, the appointment of an additional 2 Health Care Assistants over-establishment and the minimum MDT standards. Service users have engaged very positively with the therapeutic activities on offer on the ward and we have received some very positive service user feedback. Nagina on Lavender recently told us - *'Women in Theatre had their last session on Lavender last Friday and the sessions have been going really well and there has been a real positivity around the Drama sessions on the ward. Both staff and service users have approached me to ask for further information regarding these sessions. They have found both the facilitators and the content of the session fun and enjoyable. Several women were planning to only sit and observe however managed to stay throughout the sessions and actively engage in them also. Equally the sessions facilitated by Loudeemy have also been very much enjoyed. Although the numbers attending the sessions are not large in quantity they have certainly had a positive impact on the service users and they have felt listened to and relaxed'*. Some examples of outputs of the sessions and a piece of service user feedback are shown pictorially below:



On Mary Seacole House Ward 2 we have implemented the same controls, albeit the take up of therapeutic activities has been lower. In addition, we also have the en-suite door alarm system in place on this ward. Ligature related incidents have reduced to below the median since January 2021.

On Newbridge House we have had one attempted ligature related incident reported and this was managed by the team. We have experienced an increase in ligature incidents (with no anchor point) at Larimar Ward relating to 2 particularly complex service users. Each service user has an individualised plan of care and risk assessment and is regularly reviewed through weekly MDT.

Our over-recruitment of Health Care Assistants has progressed well and we now have actively recruited to 10 over-established posts in the North of the City and a further 2 posts

are out to advert. We have recruited to 13 over-established posts across the central sites in the City and we have 2 additional postholders in place in the South. A further eight vacancies are currently being recruited to in the South with interviews scheduled for the 12<sup>th</sup> and 13<sup>th</sup> April 2021.

XXXXRedactedXXXX

We are also reviewing the roles and responsibilities of ward managers with the aim of increasing their direct clinical time to care by removing appropriate non clinical duties. This includes duties such as e-rostering which for some ward managers will soon be moved to a centralised team. We will then test the effectiveness of this arrangement before determining whether this is something that we should adopt across a wider cohort of ward areas. Our en-suite door alarm programme of works is on track and there is no slippage or risk to report.

XXXXRedactedXXXX

XXXXRedactedXXXX

XXXXRedactedXXXX

Despite the improvement work that is being taken forward we have faced two challenging situations during XXXXRedactedXXXX. The first being an unexpected death on George Ward and the second being a Regulation 28 PFD Report from the Coroner. We remain committed to our improvement journey and to identifying any further additional controls that we can to improve the safety of care of our service users. We would welcome the opportunity to discuss these matters with you at our next meeting, however should you have any immediate queries or require any additional information then please do not hesitate to contact me.

Yours sincerely



**Sarah Bloomfield**  
**Interim Executive Director of Quality and Safety (Chief Nurse)**