BEH: PROTECTING THE ROYALS

CLINICAL CANINE! BEH’S TOP DOG HELPS PATIENTS

HUGH WHO? COMEDY LEGEND MAKES A HOUSE CALL

ONE IN FOUR ALCOHOLISM AND RECOVERY
Welcome from our Chief Executive: Maria Kane

Thank you to all the staff and service users who helped us put this together. We’re always looking for people who want to get involved. So, if you have a news story or idea for Trust Matters please email us communications@beh-mht.nhs.uk

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There has been no additional cost to the Trust for the design and print of this magazine.

Printed on paper from FSC accredited material produced from a responsibly managed forestry programme, using vegetable based inks. Our chemical waste is disposed of in an environmentally friendly way, as is the waste paper.

Barnet, Enfield and Haringey Mental Health NHS Trust

Welcome to the Second Edition of Your Trust Matters Magazine

Quite a bit has happened since I last wrote in this column and one thing I’m keen to let you know more about is our Quality Improvement work, or QI for short.

QI, as the name suggests, is all about making our services even better. It’s about making sure everything we do, no matter how small or how big, is focused on improving the quality of the care and the services we provide.

So to embed this work across the Trust we’ve asked 15 teams to pilot QI for us. The teams get together regularly and exchange ideas which will benefit patients. No idea is too small to be considered, in fact small ideas are good as it means people feel able to make the change themselves.

Asking someone to think of an idea to redesign a service is very different to asking them how they could help a patient on a ward. And the principle is simple — a lot of small changes can create a tipping point and improve quality as a whole.

A few of the ideas we’ve had so far are piping music onto the wards, and giving some of our longer term patients the opportunity to personalise their rooms. Things which will make our service users’ time with us more comfortable.

And that’s not the only things we have been up to. We’ve been busy developing a new drug and alcohol service in Enfield, working in partnership with our health partners to re-imagine mental healthcare in Barnet, and developing a wonderful new service called Choices which helps children and families signpost to the most appropriate mental healthcare in Haringey.

We’ve definitely been busy in the last few months, and you’ll find plenty more features and stories about our patients and staff in the following pages.

I do hope you enjoying reading this latest issue.

Thank you

Maria Kane
CEO
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Competitions and quizzes: Get your brains fizzing in our Fun 'n' Games page
My name is Pete. This is my story.

“A few years ago my mum passed away and I didn’t cope at all well. I started smoking weed and things went downhill. I stopped hanging out with my friends and began spending a lot of time with people who took drugs. I kept getting stressed out because I was constantly running out of money. I was spending it on cannabis.”

Simon Clark, the EI Team Manager, became my Care Co-Ordinator. I saw him weekly. It was like chatting to a mate. Initially, I was recommended therapy and medication and I started feeling better. But I had a number of other goals which I wanted to achieve — I wanted to go to university, I had friendships I had lost and wanted to rebuild, and I wanted to kick-start my martial arts training again. Simon helped me do all of that.

“I began enlisting on an engineering course at the Open University but wasn’t sure I could do it. Simon helped me get on the course, keep on top of my homework, reassured me when I had concerns, and when I didn’t do so well on my assignments, he’d always put a really positive spin on it. He helped me to continue.

And that’s not all. I was doing martial arts before mum passed away and then I stopped for a few years. I became depressed and just gave up after I lost her. Simon kept pushing me to get in touch with former friends who were still involved and to find out if the teacher would have me in the class again. He had to get on my case about it, but eventually I called my mate George, and after he spoke to the teacher I enrolled again. It was also eating away at me that there were good friends I had lost. I had stopped seeing two of my martial arts pals as they weren’t really interested in getting high when I began smoking. I knew I needed to fix the situation. I began hanging out with them again because of our training and slowly things fell into place.

In general, now, I feel really motivated. I’m seeing my friends again, doing sports, and have a new job. I am interested in life, and the team have helped me build my confidence. I owe them a lot.

“For More Information:

www.myhealth.london.nhs.uk
A website with useful videos.

Rethink Mental Illness
www.rethink.org
T: 0300 5000 927

I decided to stop smoking just over a year ago now, but it was after that when things got really bad. I began hearing voices, had delusional thoughts about people watching me, and at times believed I had special abilities. I guess my mind couldn’t handle the sudden change.

I knew something wasn’t right. I went to my doctor who referred me to the Early Intervention (EI) team at Lucas House in Enfield. The team there work with people who have a first episode of psychosis.

I had an introductory group session where I got to meet others who were a similar age to me and who also had psychosis. My symptoms freaked me out. It was frightening. The group told me they’d gone through similar things which was reassuring. We covered ways of challenging negative ideas and how to approach doing something new.

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What makes you tick? What do you do when you leave work behind? Let us know, because we want to know your... SECRET LIFE!

Yonah Odoom is our Trust’s Business Support Administrator. She has worked in the NHS for 13 years, all have been at BEH. So far so normal. But we knew there was more to Yonah than meets the eye so we sent arch investigative journalist Christine Bascoe, aka BEH’s Senior Communications Manager, to dig a little deeper.

Hi Yonah, lovely to meet you. A little birdie tells me that there’s a bit more to Ms Odoom than meets the eye. So go on, spill the beans!

Ah Christine, who have you been talking to you?! Well, yes I have a couple of loves in my life. One of them is my job, and another most definitely is performing.

So, how did you discover this talent then?

Ever since I was small I used to make up silly dance routines with my brother Melvin, but it was when I went to college to study business and finance, that I realised I wanted to be an actress.

That’s a bit different from business and finance!

When I was 21 years old, after completing my BA degree, in Media Performance and Marketing, I booked my first acting job with Millfield Theatre, and performed in my first play Blood Wedding. I absolutely loved it and got some pretty good feedback so I decided it was something I really wanted to try and pursue. At the time I was already working for the NHS but decided to take a chance, dropped my hours to part time and started doing some more acting work and taking acting classes. It played a big part in my personal development and led me to take classes in Los Angeles with Ivana Chubbuck, who’s pretty well known in acting circles.

What got you interesting in doing screen work?

As much as I love the thrill of live theatre working on various shows from fringe theatre to pantomimes, I really do love working on television. There is something about getting onto a screen set where everything has been created to make the piece as real as possible, which really blows me away. Last year I was in Prague filming a commercial for Coca Cola. The whole street was set up to make it look like Christmas, it was the middle of summer, but the whole place was covered with fake snow, it was quite incredible. I am still amazed at the level of detail that goes into a set like that. The first screen work I did was with my brother Melvin. He works for Kiss FM, and I joined him on a children’s show he was working on. That led to some commercial work for Sony and Macmillan Cancer Support and then to playing Grace’s mum, Mrs Piper on Coronation Street, and the vicar in a few episodes of Hollyoaks.

“[Playing Rosa Parks] had a profound effect on me because I felt a great responsibility portraying Rosa’s humble yet indomitable spirit and I really wanted to do justice to someone who made it possible for many to be able to have a voice.”

What’s the role you have enjoyed playing the most?

One of the most rewarding roles I’ve played is Rosa Parks in a theatre production. Rosa was a black American civil rights activist, who became famous when she refused to obey a bus driver’s order to give up her seat in the coloured section to a white passenger after the white area of the bus was filled. The role had a profound effect on me because I felt a great responsibility portraying Rosa’s humble yet indomitable spirit and I really wanted to do justice to someone who helped black Americans have a voice.

What are you up to now?

As an actor you know that up to 95% of the time you can be without work, and when it does come it isn’t always representative of my own beliefs or ethnic background. So my friend Moshana and I decided to do something about that. We were both approaching 30 and had both of our mothers on our backs about getting married which we thought was funny. We started to write a comedy series based around our dating, or attempted dating diaries. We’ve called it YOMO “You Only Marry Once”. We put together a pilot episode, which was screened on Channel 4, and we’ve had a good response from producers, so we’ve got our fingers crossed it could end up being commissioned!

We’ve got our fingers crossed too Yonah. Thanks for sharing your Secret Life with us.
ONE IN FOUR
ALCOHOLISM AND RECOVERY

One in four of us will have a mental health issue at some point in our lives. I have decided to speak out about what I went through because I know there will be colleagues who are having to deal with their own mental health issues and may not want to let people know. That’s why I am backing BEH’s Mindful Employer, by helping the Trust set up our own staff mental health programme called One in Four. It will enable people to confidentially let someone know what they are going through.

I knew I had to stop drinking. My doctor had told me, and so had my family, friends and colleagues. And I had tried and tried to find the inner strength and will power. Always feeling alone, trying.” My name is Colman Pyne and I am an Assistant Clinical Director at BEH. This is my story: Alcoholism to recovery.

“I’m not sure when I first realised drinking was becoming a problem”

“It was four years ago,” recalls Colman. “I was on the tube going to a support group. I hadn’t drunk for 12 hours. I was attempting to get to the point of complete abstinence on my own. I was doing ok, at first, but then, as I sat on the underground I started to sweat.

“I was looking at a picture in the newspaper. I remember a jockey and a horse at Ascot, but the horse’s head began to move, staring at me. I knew I was hallucinating. Everything around me started to become strange. It was truly terrifying. Whatever my determination my body wasn’t coping. I knew I was about to have a withdrawal seizure. As a trained nurse I knew the signs.”

Desperate, Colman got to the lift, made it to the street and ran to the nearest pub and drank pint after pint. The cure to his situation was itself the problem. It was soon after this incident that Colman finally began to recover from alcoholism. He knew that he had to get help, and it had to be different from the past.

Colman grew up in Southern Ireland, near Cork. He remembers a mostly happy childhood in a rural community, spent with his sister and four brothers. Alcoholism had featured in the family. His father had been an alcoholic, but from a very young age Colman remembers him as someone who was well, in long-term recovery and
attending AA. Colman’s sister has also been some years in recovery.

“I’m not sure when I first realised drinking was becoming a problem,” he says, “but looking back at it I think I always had an unhealthy and dependent relationship with regards to alcohol. I didn’t recognise it at the time, but I probably spent a fair amount of time thinking about having a drink, or drinking situations. More so, I am sure, than other people.

“Drinking, then heavy drinking, and heading towards alcoholism, took the course of an insidious, progressive disease. It crept up slowly over the years. It had a high cost in terms of health and sometimes relationships.

“At the latter stage of my active alcoholism I was unable to stop drinking and had become very unwell. It had become a physical and psychological addiction. I had lost all control. I remember one time noticing snow, and then the next thing I noticed were daffodils as though it was the next day, without any real memory in between. A few months of my life blank, as I sank deeper into the abyss.

“I needed help,” explains Colman. “I would try to stop, then I’d relapse and each relapse was considerably worse than the previous. It’s a feature of the condition.”

Colman never drank alcohol whilst at work, and his work with patients was never affected, however keeping his condition unnoticed from colleagues became increasingly difficult as the condition progressed. “I kept thinking that I could manage the situation if I just tried harder,” he says. “I wish I could’ve talked about my condition openly. But I felt I couldn’t. I was afraid of what people might think, and I was fearful of potential consequences. I had to talk eventually. I had to trust that sharing my vulnerability would help me recover and that others would be there for me until I became well.

“For years I fought the problem of drinking. I always thought I wasn’t fighting it hard enough, or didn’t have the willpower. Actually, what helped me most was not fighting it, but accepting it and letting-go.

“Looking back I can see how much support groups, learning from people in a similar situation, helped me. I am grateful for my recovery journey which has enriched my life and made me cherish things like music, following rugby, presence, and connection. All things I had lost in the latter stages of active alcoholism.

“Recently I drove from Port Elizabeth to Cape Town with my 24 year old daughter – a beautiful experience that will stay in my memory forever. It is four years since that day in Queensway Tube Station and I feel enormous gratitude for the recovery journey that has unfolded since that time.

“One of the reasons I volunteered to give you a snapshot of my story is because if societally we really are serious about breaking down stigma and barriers at all levels, then as a Mental Health Trust we should be leading the way in this respect.

“So talking about it now, I hope, may in some way help others to see that strength can come from a point of vulnerability.

“Given that one in four of us is likely to experience a mental health condition at some point in our lifetimes, there are going to be people in our workforce who may be in a difficult place right now who will benefit from knowing they will be supported to recover.

“When I was trying to deal with the alcoholism a lot of colleagues from all over the organisation helped me and I’d like to see this enhanced and developed for others. Professionals are part of the one in four and they need help just as much as anyone!”

Our staff support our service users every day by discussing mental health issues. And, recently we’ve seen greater public awareness develop with the Heads Together Campaign with Prince Harry and other high profile figures discussing personal experiences. But, how often do our staff talk about their own mental health needs or concerns? The answer is rarely.

Despite our expertise and commitment to improving the mental health of our patients, there is perhaps still an element of fear or reluctance to talk about mental ill health within our own workforce as there is still a stigma about it. And, we want to do something about this. So we have recently signed up to Mindful Employer, a charter for employers who are positive about mental health. It will help us support the health and wellbeing of our colleagues by reviewing our processes, providing guidance and helping staff to speak up about their mental health so they can stay well.

It is a well-known statistic that one in four people may experience a mental health condition at some point in their lives. It is likely, therefore, that some of our staff will be experiencing this too. So, we want to reduce any fear of speaking out, which could result in staff not accessing the support and care they themselves need.

The starting point is to raise awareness, encourage openness and provide support where we can. It will take time but encouraged by Colman’s story we hope that it will give others the confidence to talk to someone and encourage others to do so too. And that’s the reason we are badging this as One in Four, so if you are one of the One in Four then we are here to help.

If you have been affected by Colman’s story, please speak to someone – your line manager, a colleague, or the team of counsellors at our Employee Assistance Programme (details available on the intranet). If you would like to have an informal and private conversation with Colman about his or perhaps your experiences then please contact him on colman.pyne@beh-mht.nhs.uk. And if you would like to share your own story then please contact communications@beh-mht.nhs.uk. They will be delighted to hear from you.
Cynthia began to forget things here and there. Everyday tasks at first. Then people began to notice a change in her behaviour and realised she needed some help.

DEMENTIA: Cynthia’s Story

“My neighbour noticed it initially. There were times when I would ask her a question, and the very next day I’d ask her exactly the same thing again. I didn’t even realise I was doing it — forgetting things,” Cynthia’s neighbour then told her children, who encouraged her to see a doctor. The GP put her in touch with Haringey Memory Service, run by BEH. The service diagnoses and supports people with dementia and other memory problems.

“To begin with we do a cognitive assessment,” explains Sarah Porter, Associate Mental Health Worker. “We started by asking Cynthia what day of the week it was, what month it was, and conducted some visuospatial testing with tasks like drawing shapes. And then we had a long chat about her life, and what her schooling was like, her career and what she does now. This gave us a rough idea of what’s going on with her.” Following that the team needed to exclude some causes of memory loss, often done with a brain scan.

“We did lots of exercises, it was quite fun… we focus on a topic like food or childhood, and we’d end by singing. I really enjoy baking and brought in cakes for everyone!”

“Brain scans help us to rule out tumours which may affect memory and other conditions, or it might reveal that someone has had a stroke,” adds Sarah. “It’s after that when we can provide a diagnosis and discuss treatment.”

Cynthia was diagnosed with Alzheimer’s disease. This type of dementia is characterised by a gradual deterioration in memory often noticed by others before the person affected becomes aware. There are medications which can help slow down the rate of deterioration which Haringey Memory Service prescribe and monitor.

Cynthia attended Cognitive Stimulation Therapy (CST) over a period of seven weeks, meeting twice weekly with seven other people and two members of staff. “We did lots of exercises, it was quite fun,” Cynthia explains. “We focus on a topic like food or childhood, and we’d end by singing. I really enjoy baking and brought in cakes for everyone!”

CST is based on a wide range of research into ways to stimulate the mind, including reminiscence – drawing on old memories. Music and group conversation is combined into the programme.

“Food can stimulate the senses, exercises help stimulate the body, and there are word and number games. We have a different topic each session, such as childhood, maps, number or word games,” Sarah explains.

Cynthia also goes to Tom’s Club, a club named in honour of Tom Harmer. He was a player for Tottenham Hotspur and Chelsea FC in the 1950s and 60s. After he developed vascular dementia his wife Jean received support from the Haringey Admiral Nurse Service (mental health nurses who support carers of people with dementia). Her particular situation meant she couldn’t leave Tom alone.

At that time there were no local resources catering specifically for people with dementia and their carers. As a result Jean felt increasingly isolated. When Tom passed away the Admiral Nurse Service, with Jean’s support, established the first Tom’s Club to provide a service for both patients and their carers. It’s still really popular.

“Tom’s Club gives us a chance to get together, sing and chat,” says Cynthia. “It takes my mind off other issues and everyone is in the same boat so we can talk without feeling embarrassed. It helps us stay connected and socialise.”

VOLUNTEERS NEEDED!

The Memory Service is looking for volunteers.

Service Manager, Mark Pritchard, says: “We have a number of volunteers working with us in the service who help run groups and we really value their contribution. We’d be delighted to have more people join us at Tom’s Club and other activities within the service, to help support people with dementia and their carers.

If you want to find out more please call the Haringey Memory Service on 020 8702 6300

See page 17 for a related story
Katie is NINE years old and is already an Occupational Therapy Assistant! Okay, we may be stretching the truth there a little since she can only say “woof”, but what she lacks in conversation she certainly makes up for with tail wagging and being 100% committed to being patted. Katie is BEH’s visiting Pets As Therapy dog!

Katie is a Border Collie. Originally a stray from Ireland she belongs to Marianne Welsh, who works for BEH as a Senior Occupational Therapist in the Magnolia Unit, at St Michael’s Primary Care Centre in Enfield. The Unit is an inpatient physical rehabilitation service for adults and older people.

Patients may be on the ward because they’ve had a fall, sustained an injury, suffered an infection, or have a neurological disease. And, the one thing they’ve all got in common is they need to get back on their feet. This may be increasing the distance they walk, improving their hand function, their posture, their ability to bend and reach further, or even their cognitive skills, and Katie helps them reach their goals.

Her visits are a highlight for patients like Joan Kettle and Martin Ross. "You don’t know what a wonderful thing it is bringing in Katie," says 86 year old Joan. "She makes us smile and feel good." And Martin Ross who’s 58 says, "I wanted to reach down further to brush the dog’s coat. After I had done this I realised I had reached further than I had in any other sessions. I know this is going to help when I need to put on shoes and socks at home."

The animal assisted therapy sessions conveniently known as the PAT Group, have been running for just over a year now and there have been some remarkable results. “For example, one patient needed a patient turner," says Marianne, "to transfer him into the wheelchair to attend the Group, but once he was in the Group he was so focused on Katie, he stood up from the wheelchair with only some assistance.

"Katie becomes the centre of attention during the sessions and she absolutely loves it! There is a wonderful atmosphere with many of the patients smiling and laughing, and without them even realising they have reached their goals.

FOR MORE INFORMATION:
www.petsastherapy.org
T: 01494 569130
“What a wonderful thing it is bringing in Katie... she makes us smile and feel good”
Joan

“Seeing the joy Katie brings the patients is really rewarding”
Marianne

All dogs registered with the PAT Charity need a temperament and behaviour assessment. The dog has to be trained to always follow commands, but also to be able to respond to changes in their environment, such as navigating around medical equipment and not being alarmed by loud noises and visual distractions. This ensures that the dog will be safe in any setting.

Katie: Taking a well-earned rest from all that patting!
After 34 years in the NHS Bob Ryan, Assistant Clinical Director, has finally hung up his NHS badge. Before he left for retirement Bob told us in his soft southern Irish accent about his career, what the future holds, and how a recent heart attack almost killed him.

Bob can you tell us a little about how you started out?
Well, I qualified as a nurse in 1983 at Claybury Hospital in Woodford Green, Essex but, I’ve been with BEH in different guises since 1998. I came here as a Bed Manager when it was Barnet Healthcare and since then I’ve had a number of posts. Most recently, in 2015, I became the Assistant Clinical Director of Acute Care in Barnet.

“In mental health there is now a greater focus on quality care and with having the right staff”
That’s a fair bit of time in the NHS. How has mental health changed over the years? There have been a number of changes. First and foremost, there is a greater focus on quality care and with having the right staff, in the right place, at the right time. We also try to ensure that the service user experience is central to our work. And, there is also an increased emphasis on community care, and trying to get people to better look after themselves and foster independence.
There’s great work going on in the wards to help people get back in the community, so what was the best thing about your job? I think it was really about staying connected with all the staff I managed at the Mental Health Liaison services in Barnet Hospital, North Middlesex and the Health Psychology Services. The thing I loved most was that no two days were ever the same. They were a wonderful team of people.

But, was it challenging trying to fit it all into one day?
I always found the Trust a positive place to work, and I always liked the fact I was able to contribute at many different levels.

I’m curious Bob, what made you want to go into mental health in the first place?
Actually I didn’t. Something that people might not know about me is that before I came into nursing I trained to be a priest for two years. As the saying goes, ‘many are called but few are chosen’. In class I used to talk to one of the Seminarians who had been a nurse before coming to the Seminary. I was getting to a stage where I knew I didn’t want to stay, but, I needed to think about what my next move would be. He advised me that nursing could be an option. I took heed of his suggestion and came over to London in 1979, trained in a big psychiatric hospital, and the rest as they say, is history. That was 38 years ago and I’ve never looked back.

I’m very sure there will be plenty of people who are pleased you made that choice. What’s your personal experience of the NHS?
Well, last summer I had a really personal experience - in July I went out cycling and had a heart attack. I had a stent fitted and I was off for three months. I received immediate care from Barnet A&E and Royal Free Hospital. I had regular follow-ups with my GP and the cardiac team. It was a very positive experience and I was treated very well from some great staff. It made me proud to be part of the NHS.

“Something that people might not know about me is that before I came into nursing I trained to be a priest”
Glad you’re recovering well. How do you look after your own physical and mental health?
Since I had the heart attack I’ve been doing a lot more exercise. In my retirement I plan to play golf, and go back to cycling, but in moderation! I guess one of my other interests is photography. I’d like to attend college and learn a bit more about photography when I have some more time on my hands.

And finally, what would you do if you were Health Secretary?
Looking at mental health, one of the main things we should be doing is keeping people out of hospital. But, to do this, you need resources to be used differently, so there are more people to be able to monitor service users in the community and to support them before they become so unwell that they need hospital admission.

Bob, thanks so much and we all wish you a happy retirement.
The Overcoat

The 20 strong independent film crew shot in L Block along the mental health corridor at St Ann’s, and BEH will feature in the film credits.

The Overcoat is based on a story by Russian author Nikolai Gogol. Published in 1842 it had a great influence on Russian literature at the time.

In a break between lights, camera and action we nabbed a quick chat with the film’s lead Jason Watkins. You may recognise Jason from his appearances in Bridget Jones, James Bond, and TV series W1A, Being Human, and most recently as the forensics expert in the BBC police drama Line of Duty.

Jason, Can you tell us about your role in The Overcoat?

It’s about a little man who works as a proofreader in an office. He has a lonely life in his bedsit and all he does is work. He loves his work. His friends take the mickey out of him and say ‘why don’t you go and get a new overcoat’ as his is so threadbare and he’s a bit of a miser.

So he goes and buys a most magnificent thing. He gets confidence and kudos and feels like a changed man. He’s invited to his colleague’s birthday party and gets a bit drunk. But as he leaves the pub he’s robbed of the coat. He falls deathly ill with fever and comes back and haunts the person who has stolen it. The book is only 30 pages long but it’s rich and wonderfully written.

What do you do to get yourself in character, do you have any set routines?

I have a different preparation when I play regular characters, because I know them inside out really. For a job like this, even though it’s not a long film I’ll try and think of somebody who is a bit like the character. So I imagine them as I am working on it, and how they might feel in certain situations. That seems to liberate my imagination.

I know you have worked with a few famous people, have you ever been star-struck?

I certainly have. Nicole Kidman for one. Steve Coogan, he made me laugh for years when I was lucky enough to work with him. When I’m star-struck I go quite quiet and then talk a lot, and then occasionally start making jokes which aren’t funny, which I then have to recover from. It’s pretty awful, but after a while I calm down!

Talking about being self-conscious, what’s been one of the most embarrassing moments you’ve had on set?

In Being Human I play a vampire who comes back to life. In the script the scene is on a hillside, in the middle of the countryside. However when we went to shoot it we didn’t have time and had to do the scene in a park in the middle of Bristol. I come out of the ground, naked, screaming, coming back to life. My appropriate areas were covered by what is somewhat loosely termed as a dignity patch but as I emerged out of the ground a group of elderly people were being pushed by in their wheelchairs. It surprised me, and I think, shocked them.

So that was your most embarrassing moment, what about one of your proudest moments?

I’m very proud of my BAFTA for The Lost Honour of Christopher Jefferies. Partly because it was my peers voting. It was an amazing story and we had such a wonderful time as a group making it. I got a lot of praise but the whole time it’s only indicative of the time I had with the real people I met and the emotional aspect of playing that role.

“I had to do the scene in a park in the middle of Bristol. I came out of the ground, naked, screaming, coming back to life.”
"I am a refugee and owe my life to this country for giving me and my family sanctuary. The reason for me telling my story is to say thank you.

Since I was a teenager I suffered from depression. But my family didn’t understand. When I got married I thought even if I didn’t have anything or anyone else, I’d have my husband – he became my world. So when I began to have problems in my marriage I felt like I was going to lose everything.

I wanted to do something to empower myself, so I enrolled at a local university. It was here that I joined a political activist group as I wanted to raise awareness of women’s rights. Society in Iran isn’t as accepting of women as the western world. There were many people who forced their children to marry old men to pay off their father’s debt. At university if a lecturer wanted sexual favours he would threaten to fail you or have you kicked out. These were just a few of the issues.

"I came to the UK after fleeing the Iranian government in 2009. The authorities imprisoned me in a basement following the Presidential election protests that year. I was tortured. I experienced so much brutality. My daughter was four at the time. You must understand I had to take her somewhere safe where I, where we, could live. I moved first. My husband joined us in London nine months later...

This is my story.
Around this time there was a Presidential election but the victory of the winning party was disputed and many people believed the elections were rigged. I was protesting against the government peacefully in the streets, along with masses of others. This quickly turned violent. The police and the paramilitary supressed people with pepper spray, firearms and sticks. Opposition groups were arrested and tortured. I was among them.

There was a huge empty space in a basement of the prison where they kept us. It was horrific. I saw men and women taken away beaten half to death and then brought back so we could see them dying in front of us. I was scared. I can’t even begin to tell you what runs through your head when you witness these scenes. There was blood everywhere. These images haunted me. I escaped with the help of a judge, who was a family friend, but I needed to leave my country. It was no longer safe for me there.

I was traumatised when I arrived in England and my mental health had deteriorated and manifested into physical problems too. I wasn’t able to walk, I had headaches constantly and I just wanted to die. I saw lots of GPs and mental health services and I found it hard to trust them.

Eventually I moved to Barnet and after being diagnosed with depression and post-traumatic stress disorder (PTSD) I was referred to BEH’s PTSD team in 2013. At this point I was very low. I couldn’t bring myself to go out, I was worried about other people, and I was paranoid about using public transport.

My relationship with my husband broke down because I couldn’t do anything for him or my daughter — I just laid on the bed, or on my sofa, and I gained weight. Every time I closed my eyes I wished I wouldn’t have to open them again. I could not sleep, I would have nightmares and during the day I would often have flashbacks. I could see strange people in my house, and felt very frightened.

I tried to attend the PTSD Farsi group but I missed lots of sessions because I couldn’t move. I had too much pain. Luckily, the PTSD team wouldn’t leave me alone. Marian, the PTSD manager, arranged for Idyill, the team’s Associate Mental Health Worker, and Stephanie, a BEH Psychiatrist, to come to my home with an interpreter.

Their persistence really paid off. They helped me with everything. I had many individual EMDR (see pink box) therapy sessions to explore the trauma and reprocess. I found this difficult at first, because for 25 years I hadn’t spoken to anyone about what I had gone through, but I learnt to trust Marian!

Gradually, these sessions helped me to face my traumatic memories and I began to realise that my physical and mental health were inter-connected. I also had joint sessions with my husband to help our relationship. I began to feel safer and I built up my confidence slowly. I began to go out, exercise, and think about my future. My first big achievement was getting my British driving licence, which allows me to be independent. Now I can support my family. My husband is able to leave me to look after my daughter, which meant he’s been able to find work. My daughter is doing well at school. She’s really happy and her friends visit our home now and think I am the best mum!

The PTSD Team Social Worker, Peter, even helped me to sort out my finances so I could fund my college course and get into work. I passed my first year college exams recently and my English & Life in the UK test. I’m able to volunteer at a local hospital whilst studying at college, and one day I’d like to work with UNICEF. Life is looking up for us and I couldn’t have done it without the PTSD team.

Leyla is not her real name.

EMDR is a highly-regarded evidence-based treatment recommended for trauma victims. It was used here to treat Leyla’s complex PTSD associated with her past history of multiple traumatic events and her consequent chronic psychological and physical deregulation. Establishing a trusting therapeutic relationship and emotional stabilisation was essential prior to helping her (safely) revisit, explore and reprocess her traumatic memories. In doing so she was able to slowly and incrementally heal and look to the future.

BEH’s Enablement Team in Barnet is working with the specialist PTSD service to ensure people are able to Live, Love, Do. We want people who use our services to have a safe and secure place to call home, improve relationships which may have broken down during their illness and to help people get into employment, or education.

These factors combined can help create independence and empower people and is part of our Enablement approach.

If you want to find out more about Enablement go to our website www.beh-mht.nhs.uk
Terrorism, Lone Actor, and Protecting the Royals: All in the day job for FTAC

Sitting in an open plan office around the corner from Buckingham Palace a team of Psychologists, Psychiatrists, and Mental Health Nurses from BEH sit side by side with officers from the MET’s VIP protection squad. As a team they work in the Fixated Threat Assessment Centre, FTAC for short.

Years ago this sort of liaison was unheard of, but things have changed. A growing number of people are demonstrating an unhealthy fascination with VIPs, and Royalty.

In the past if a member of the public had come to Buckingham Palace wanting to meet the Queen then they were swiftly dealt with by the soldiers at the front gates, told to move on or, if persistently troublesome, arrested.

Now it’s very different. Now the soldiers at the gates are trained to ask, “Have you seen your GP recently?” or, “Have you a diagnosed mental health condition?” It’s a response which BEH has had a powerful hand in shaping.

“Clinicians are involved at FTAC because the vast majority of people who become fixated are mentally ill,” explains Dr Farnham. “A significant number of those are either not in treatment or have dropped out of treatment some time ago.”

“On the whole, as individuals, the threat they pose is low but there are a lot of them and so there is a small, but possible risk of violence and disruption at events.

“And, from a psychiatric perspective they are ill. Most of them are untreated and they need help. So we try to get people into treatment, and back into care – that’s been really successful. People who we have managed to arrange care for and are treated have become less preoccupied with the idea that they are owed ten million pounds by the Government, or that they are the rightful heir to the throne, or that they have some sort of love relationship with Prince Harry.”
Frank and the team also work closely with agencies to consider whether there is a connection between terrorism and mental health. While that is highly unlikely there is a greater possibility that a lone actor terrorist may suffer from a mental illness. In fact the issue is such a hot topic that FTAC’s last conference on the subject drew speakers and delegates from all around the world.

Tracy Linford is the Assistant Commissioner with the Queensland Police Service in Australia, and she also commands the state’s Counter-Terrorism Service. “Since 2014,” says Tracy, “the threat level in Australia has risen to high, which means an event is likely. We have seen the numbers of people heading over to conflict zones increase, with more than 120 travelling from Australia. We have also seen the number of radicalised individuals on our home turf increase too. So coming to conferences like this helps us gain the edge, and make new contacts too so we can share intelligence and ideas better to counter any threat.”

FTAC has been in existence for around 10 years. It’s now so renowned for its work that some countries try to use its model to improve what they do, as Bram Sizoo, Psychiatrist to the Threat Management Team in the Dutch police explains. “I don’t think you can prevent people people becoming lone actors, aka lone wolves, unless you are very early in the cycle, but given the fact that there are lone actors then I think police and mental health professionals working together more closely is a great way of sharing information. And we can then reduce the threat by looking at the person involved. We ask what makes a person express themselves in a violent way. There must be a problem underneath – and that’s what we are interested in. We want to tackle the problem at its core and not when it is too late.”

Back to policing in this country and Detective Chief Superintendent Clarke Jarrett, who works for Counter Terrorism Command says understanding mental health better is essential. “We are here,” says Clarke, “to help protect the public and keep the vulnerable safe. And one way we do this is by getting to know the community, gaining intelligence from people who might be worried about friends or family who they think are getting radicalised.”

However, as Dr Farnham points out, “Organised terrorist cells are not generally mentally ill, because if they are psychotic that could destabilise the group. But someone who is angry, may have a paranoid delusional belief about something and that ends up being dressed up as a grievance against the state or the government, and that person could end up becoming a lone wolf, and that’s what we have to keep an eye out for.”
BEH pledges support to national Dementia campaign

On average 850,000 people in the UK have dementia, but more than 21 million people will be affected by dementia as a friend or family member. At BEH we want to do what we can to help, so we have signed up to the Alzheimer's Society's Dementia Friends campaign.

Margaret Southcote-Want, Deputy Director of Quality trained as a Dementia Friend champion. She says, “With one in three of us over the age of 65 predicted to develop dementia it’s important that we promote understanding of the condition. "We want everyone in the Trust to become a Friend. And, it’s not just clinical staff who have pledged their support, we aim to train everyone - from front of house reception staff to the most senior clinicians and managers.”

Dementia Friends are asked to help people who are living with dementia in a variety of ways. At BEH, the aim is to create a dementia friendly organisation so that people affected by dementia feel understood and included. After the training staff will have a better understanding of the condition and are able to support patients, visitors and relatives who come into the Trust every day.

Five thing you need to know about dementia:
- Dementia is not a natural part of the ageing process.
- Dementia is caused by diseases of the brain.
- It’s not just about losing your memory.
- It’s possible to live well with it.
- There is more to the person than the dementia.

FOR MORE INFORMATION ON BECOMING A DEMENTIA FRIEND
www.dementiafriends.org.uk
Your compliments
WHAT YOU’VE BEEN TELLING OUR STAFF

Our staff are delighted to hear the difference their care and support have made to your lives. Here are some of the lovely messages we’ve been sent recently about the care we provide:

I have several problems including alcoholism, agoraphobia, and anxiety. My Community Psychiatric Nurse Peter Ryan (Barnet Community Rehabilitation Team) has helped me with all of these in such a professional and non-judgemental way. There have been some times when he came to visit me, and I had had too much to drink, but he did not say a thing. He would talk about why it happened and didn’t make me feel bad. Peter was worried about my weight, and asked my GP to do a blood test. I was diabetic, so Peter got me a dietician. I was 25 stone, and now I am 22 stone, and my last blood test said “no diabetes”. Mr Ryan has done so much for me. With his advice I can now go into my back garden, which I hadn’t done for years. It has been hard, but there is no way I could have done any of this without his help. I have learned so much and will still keep on doing so. I thank him so much for showing me the way.

Kind and caring support given by all staff and especially Felicitas Ndukwe’
HF Nurse Consultant (Lucas House).

You were professional and kind and you made me feel welcome, and you also respected the dignity of the service user at the front desk. I really appreciated it. Chase Farm Hospital

I’ve been your client for many years with various addictions. Together with Dr Isaacs you’ve helped me A LOT and I’ll be always grateful for all the hours you have spent with me trying to push me back to normality.

I found Dr Rashid (Edgware Hospital) to be professional in his approach to me and also to my daughter. He listened to what we had to say and has since changed her medication and monitored it. We are pleased with the outcome.

HAVE YOUR SAY
WE ALWAYS WANT TO HEAR FROM YOU!
communications@beh-mht.nhs.uk

BEH IN THE MEDIA

VICTORIA DERBYSHIRE SHOW
BEH’s Medical Director, Jonathan Bindman, featured in the BBC’s show and on BBC News. He discussed the length of stay in mental health wards, the importance of care in the community and funding in social care.

TEA, BISCUITS AND MUSIC: INSIDE AN ECT CLINIC
Typically, electroconvulsive therapy (ECT) is used to treat patients with severe depression, often accompanied by psychotic symptoms, a high risk of suicide or a refusal to eat or drink. Robert Tobiansky, BEH’s lead ECT consultant, met with Guardian reporter Nicola Davis to help breakdown the stigma surrounding this, often lifesaving, treatment.

SUPPORTING PRISONERS WITH AUTISM
The National Autistic Society has been working with staff from BEH and Feltham to improve autism practice and lower offending rates. This has meant developing and implementing standards across the prison to improve the identification and support of autistic people, an achievement recognised with a Sternberg Clinical Innovation Award. This story featured in Mental Health Today.

Having a Paintbrush in the Ward
BEH featured on BBC News, BBC London and BBC online with Katie, BEH’s Pets As Therapy dog. The animal assisted therapy sessions are making a huge difference to people on our rehabilitation ward, Magnolia Unit. The nine year old Border Collie helps those who need to increase their range of movement — assisting with how far they can walk, how many steps they can make, how far they can reach.

OUTSIDER GALLERY
The BBC World Service visited Haringey’s Outsider Gallery which exhibits art and music by those with mental health issues. The project, which is run by BEH, explores the positive impact music therapy can have on people.

STUDENTS CREATE NEW MURAL
NORTH LONDON NEWSPAPERS
Students from Barnet and Southgate College appeared in a host of newspapers across North London after spending a week creating a beautiful mural which has brightened the children’s clinic at BEH’s St Michael’s Hospital in Enfield. NHS staff who run services on the site, wanted to make it more welcoming for parents and children.

COMMUNITY NURSE WHO GOES “EXTRA MILE” WINS UNIVERSITY AWARD
Community Psychiatric Nurse, Damian Levy, received an award from Hertfordshire University for the work he’s been doing with student nurses. He works with BEH’s Community Rehabilitation Team at the Springwell Centre in Barnet Hospital. Damian’s story appeared in the Enfield Gazette and Advertiser.

TOP TWEETS
@BEHMHTNHS
Looks like an amazing initiative and maybe something that can be shared with @NHS_News and @RoyalNurses to make patient’s journey better.
Let’s transport you back to 1892. Queen Victoria was on the throne. William Gladstone was in power, and London was gripped by fever, Scarlet Fever to be precise. A huge outbreak was sweeping across the capital. And, with the existing fever hospitals unable to cope the Local Government Board agreed that a new hospital should be built in Tottenham — land purchase price £12,000.

And so the North Eastern Fever Hospital came to be. Opening in October 1892 it consisted of around 50 temporary wooden huts with 500 beds. But there was strong opposition from locals. Nobody wanted a fever hospital in the area especially one with 500 beds. But the site carried on growing. Later that month the Board paid £2500 for Mayfield House as a residence for the Medical Superintendent. And then bought eight cottages and 12 plots of building land in Hermitage Road, where the hospital’s main entrance was situated, all for the tidy sum of £4,500.

Building work on the Administration Block began in 1898. The block had stables where the old stores are and hooks for hanging harnesses can still be seen. Construction of the laundry began the next year, the original Works Department was built in 1907 and the ‘old’ boiler house in 1912. Also built around the turn of the century were Block 6, Acacia House as a residence for the Hospital Engineer, and Mulberry House for the Steward, and Orchard House for the superintendent.

During WW1 it became the Base Hospital No. 29 for the American Expeditionary Force. When the hospital was decommissioned in March 1919 it had treated 3,976 patients — 2,351 surgically and 1,625 medically.

During the 1920s the gardens were laid out by a former employee of Kew Gardens, who planted trees which were reputed to be of therapeutic value.

The original wooden buildings, which had been designed to last just 10 years, were actually only replaced in 1935 when G,H,J,K,L,M,N and O Blocks were built.

In 1948 the Hospital joined the NHS and in 1951 it was renamed St Ann’s General Hospital, treating patients with chest disorders and infectious diseases.

In April 2001 the freehold ownership and management of the site was transferred to BEH. The site now houses BEH’s mental health wards for Haringey, a specialist eating disorders unit and a range of mental health community and outpatient services. A number of other NHS services also operate from the site, including Moorfields Eye Hospital’s surgical unit, an X-ray and sickle cell service run by the North Middlesex Hospital, and a range of community health services run by Whittington Health.

BEH is developing plans to modernise the site, as the next step in its long and varied history. The Trust has outline planning permission for a new, purpose-built inpatient mental health facility and other improvements, and to develop housing (including some affordable housing) on the part of the site that will become surplus to NHS needs. It is expected that building work on the new mental health buildings will commence by early summer 2018, with completion by late 2019.

Thank you to Peter Higginbotham at workhouses.org.uk for help with this article.
CHOICES is a new service. It offers help to children and young people in Haringey who might be worried by bullying, sleeping problems, or self-harm.

Children from Park View School in Haringey say they think the service is great.

“It would be intimidating for most people my age to go to an actual counsellor because it seems quite formal. But, when it’s a conversation it makes it feel a lot less scary — it’s somewhere I or my friends could go to talk through problems. It’s a good idea.”
Jack Athwal-Kirby, 15

“I think it’s really important that people are given the chance to self-refer. It’s a lot better than being forced to go by someone else. It creates a more comfortable environment.”
Sunzida Khan, 15

FOR FURTHER INFORMATION
If you want to get in touch with the team please call 020 8702 3405 or visit www.haringeychoices.org
How autism didn’t hold MoStack back

Singer. Rapper. Performing at Reading and Leeds festival. European tour. His song Liar Liar already more than 8.5 million views on YouTube. MoStack is making a name for himself, but a few years ago MoStack, from Haringey was making a name for himself the wrong way, because nobody had spotted that MoStack had autism until he was referred to one of BEH’s children’s services.

HERE’S A PARENT’S STORY
My name is Fenella and this is my son MoStack’s story. Although he was shortlisted for last year’s MOBO Awards it wasn’t always plain sailing. For a long time we found it difficult to understand him. The teachers at school thought he was naughty but I always knew he was misunderstood. I just couldn’t work out why. It was only when he was 16 that he was diagnosed as autistic. That was when the pieces of the puzzle began to fall into place.

If CHOICES had been around at the time, I believe I would’ve received the support I needed to help understand my child’s condition. I’m so pleased that people have recognised there was a gap for this sort of service. Hopefully, now, other families faced with autism, won’t have to endure what we did.

When MoStack was young I noticed there was something different about him. I have two other children and immediately knew his behaviour wasn’t like his siblings. It was hard to explain and make sense of at the time.

During pre-school MoStack struggled to integrate with the other kids, which led to him playing on his own. At primary school this got worse, and I ended up leaving work. Sometimes I’d have to go into school three or four times a day because the teachers struggled to manage his behaviour. I collected him during playtime and lunchtime, taking him home while the other children played together.

There was an incident when he was eight. I got a call from the school asking me to collect him. When I arrived, I found all the children outside lined up as the teachers evacuated the classroom. All the tables and chairs in the classroom were turned upside down and my son was sitting in the corner playing with some toys. The teachers thought he was misbehaving but I knew it was much more than that. This was the turning point, as I realised we needed help.

The process was long and arduous because nobody was able to recognise there was something wrong. He argued with other children and struggled with basic social skills such as play and waiting to take his turn. MoStack had difficulty understanding himself or his family. He took everything literally and struggled with communication.

In primary school I found there was a real focus on his behaviour which meant he wasn’t able to actually learn very much. You can imagine my surprise when I was told by his secondary school teachers that his reading level was much higher than all the other kids.

But, he kept getting into trouble. He had detention time and time again. Eventually, as he struggled to make himself understood, his despondency grew, so did his tendency to isolate. He became lost in his own world and began to channel his energy into his music.

He was eventually excluded from school. This is when he refused to leave the house, he became withdrawn and depressed. This period spanned two years and eventually he came to the attention of our local CAMHS service. It was only then that he was diagnosed with autism. It has been a long journey but there was a sense of relief when we were told - we could begin to learn and understand how best to manage it.

Being a good parent and preparing your children for a successful future is by no means a walk in the park, but when coupled with challenges like autism, when you do not understand what your child is going through, and therefore are unable to help them, it can become a nightmare.

If you want to follow MoStack’s career catch him on Twitter @realmostack or he’s super easy to google.
Take two... and relax...

We know life's hectic. And, we know taking time out after work is really important to do, but how often do we do it? Well, we thought we'd share some ideas with you from a few of our staff around the Trust.

**JIDE ODUSINA**
HEAD OF EQUALITIES AND ORGANISATIONAL DEVELOPMENT COMMUNICATIONS
"My number one relaxation activity is gardening. In the summer at weekends I can be out there from dawn to after dusk. What I find so relaxing is that my wife and I have a relationship with our plants and there’s an excitement with the results we get. It is physically and intellectually challenging, and there is a fantastic and deep satisfaction of a job well done. The evidence of success is there all around us to see and often taste."

**ALLISON LERNER**
TEAM LEAD FOR BARNET HEADQUARTERS – SENIOR ADMINISTRATOR
"I love to unwind and focus on a good sweaty spinning class, it’s a fab way to de-stress. I try to get there three or four times per week and find I leave feeling pumped and happy, having burned off my calories and it really clears my mind. My chill out time is essential to my sanity, after all it’s ‘me time’, which everyone needs! Although I thrive in a busy environment, I find deep breathing and a good stretch helps too, as does a regular coffee!"

**ELIANA CHRYSOSTOMOU**
LEARNING AND DEVELOPMENT MANAGER
"I enjoy cooking, coming up with new recipes and decorating plates with funny quotes. I know that last bit sounds a bit unusual but it is a lot of fun. I use porcelain and ceramic mugs and plates with liquid pencil which I then cook in the oven. I get my ideas off the internet and personal experiences as I like making my own puns and memes. It certainly gives meals and tea time a different note!"

**VIVIENNE YOUELL**
BANK PHARMACIST
"I started going to the Friday late openings at central London galleries as a way to end the week with a cultural activity away from the busyness of the week. My favourite is the National Gallery for its peacefulness and splendour. The idea to draw from art was to improve the depth of the experience and I found that the practice of observation is very calming. It improves the hand-eye coordination and the activity is also so complex and absorbing that the challenges of the day vanish no matter how chaotic the day or week has been. I could not draw very well at the start and seeing my drawing improve is a fantastic bonus."

How do you relax? Let us know and send a snap to: communications@beh-mht.nhs.uk
And who better to ask about de-stressing than BEH’s Helmi van Leur, Clinical Team Lead for our talking therapies service IAPT (Improving Access to Psychological Therapies), based in Enfield. We sent Communications Manager Priyal Dadhania to de-stress herself and get some top tips from Helmi.

I have a few questions for you Helmi. I know we all feel stressed from time to time, but let’s start with the basics. Can you tell me a bit about what stress actually is and how it becomes problematic?

When we’re under stress our mind and body become focused. At times it can be useful for us to have this pressure, but it can become an issue when there is an on-going situation which then puts your mind and consequently your body under constant pressure. The best way to illustrate stress is using an elastic band. When you put pressure on it for a short period it’ll go back to normal, but after a prolonged period of time it will snap. Similarly, we also reach a breaking point if there is constant pressure.

And, what mental health conditions is stress commonly associated with? Typically, anxiety disorders and low moods. People with these conditions have a constant stream of negative thoughts which become very stressful to deal with.

When you’re anxious you tend to see and interpret everything as a danger or a threat. When your mood is low, your thoughts are automatically negative. ‘A glass is half empty’ is an example most people know. But, as you can imagine, it’s not limited to these conditions.

So, what effect does stress have on your body?

Well, there are a lot of physiological symptoms to stress which people don’t realise. When you’re stressed you’ll find your breathing becomes increasingly shallow and consequently your muscles need more oxygen.

When your body is in this condition over prolonged periods it can cause headaches, jelly legs, sweaty hands and palpitations which people often confuse for heart problems. If we continue to tense our muscles it can cause additional problems, shoulder pain, stomach upset and more.

That doesn’t sound great! Tell me then, how does the IAPT team help people cope with stress. What kinds of techniques do you teach?

We focus on relaxation exercises. We also go through mindfulness techniques where you scan your body with your mind and whenever you feel there is tension breathe through it.

It might be that an individual has a particular situation which is causing on-going stress, housing worries or financial strain. We run workshops on worry management, problem solving, and more, to help people rationalise their thoughts and identify where they are going wrong.

What are your tips for people managing stress?

It’s so easy to forget to take some time out in the hustle and bustle of everyday life but I can’t emphasise how important this is. Make sure you work out what you find relaxing and do it regularly.

‘We all get stressed, unless of course you’re lucky enough to be meditating on top of a mountain somewhere near Kathmandu! So, assuming you’re not (up a mountain that is), stress is a fact of life and we need to know how to deal with it. If we don’t it can become a problem and lead to physical and emotional exhaustion.’

I know working on the frontline can often be stressful for staff. How do you help the team to maintain their mental health?

Well, it’s funny you mention that – we had a wellbeing hour the other week! We host these once a month so staff are able to have some time to take a step back from their work and have some time to themselves. The team often hear troubling stories which can have an emotional burden on them – they may have to provide support to someone who has been abused, tortured or been through some other trauma.

Whilst, part of our training helps everyone manage these situations our wellbeing days are essential in giving the team time to bond with their colleagues and have some time out.

FOR MORE INFORMATION

www.lets-talk-iapt.nhs.uk/
T: 020 8342 3012
E: lets-talk-enfield@nhs.net
Student mural brightens up children’s clinic

Children attending their clinic appointments at Cedar House in St. Michael’s Hospital, Enfield are enjoying the bright and creative mural painted by art and design students from Barnet and Southgate College.

BEH’s chief executive Maria Kane said, “It is a beautiful mural which is bringing joy to children, parents and staff. It’s a wonderful example of partnership working in the community. We would love to do more of these projects because creative environments and imaginative surroundings contribute to good patient care.”

Surfing the web is now easier

Our IT teams are installing free wi-fi for staff and for the people who use our services. We want to improve our patient experience and help service users keep in touch with their family and friends, or just while away some time on the internet.

Last year we had wi-fi installed at St Ann’s and Chase Farm. Now this is expanded to Edgware Community Hospital’s Dennis Scott Unit, Lucas House and St Michael’s.

Hugh Laurie on tour at... BEH

Actor, writer, director, singer and comedian. Hugh Laurie has rather a lot of strings to his bow, but now he is developing another. He’s become a neuropsychiatrist! Not a real one, of course, but that hasn’t stopped him researching the field heavily with the aid of one of our clinicians, Dr Richard Taylor.

Dr Taylor was asked to help Hugh prepare for his new TV show, Chance, where he plays a forensic neuropsychiatrist in San Francisco. And, as a thank you, Hugh said he would come and meet some of our staff and tour one of the wards at Chase Farm Hospital.

Hugh told the packed crowd at Camlet that he was somewhat intimated coming face to face with a room full of NHS staff including psychiatrists and psychologists. The Hollywood actor, famous for his role playing Dr Gregory House, came to our forensic unit in Enfield to take part in a lighthearted question and answer session called ‘In the Forensic Neuropsychiatrist’s Chair’.

During the interview, Hugh was asked about his life as the son of a doctor and his remarkable career which has included TV favourites such as Blackadder, A Bit of Fry and Laurie, and the BAFTA nominated John le Carré thriller, The Night Manager.

Hugh kept the crowd entertained and praised NHS staff for doing a great job which doesn’t get as much praise as deserved.

Enfield Community Services

For some time both public and patients have been getting confused that Enfield Community Services (ECS) are provided by BEH, a mental health trust. Now both physical and mental health services in Enfield are known as “Enfield Health”.

We hope this will help improve visibility of all our services in Enfield, and help attract more people to the service, some of whom had been put off by the fact their physical health care was being provided by a mental health trust.

Donna Perryman, our Wellbeing Clinic Manager at Canning Crescent had a wonderful poem written about her from one of our service users called Precious.

Precious got in touch so we could put the poem in Trust Matters. Donna, who has been with the Trust for 25 years said she was honoured to have the verse written.

Donna Perryman, Poem recipient

I wish Donna a Happy Christmas

Donna Perryman works as hard as she can
She is a hardworking nurse
She keeps going when things are the worst
She keeps her cool
While others are losing theirs
She obeys all the rules
And she keeps going without any tears
She has cared for us for so many years
She has a sense of humour and she likes to dance
Mess with the Donna, there is no chance.
What a year 2016 was! As political and cultural shocks rained down on us, former Shadow Chancellor Ed Balls brought a smile to our faces as he survived in Strictly Come Dancing way longer than anyone expected. It was week five – Ed had looked in danger of dropping Katya with that lift. But it wasn’t his dancing ‘prowess’ that caused his path to cross with that of Speech and Language Therapist, Pamela Kennedy. No, Ed is a Vice President of the charity Action for Stammering Children. On Monday morning Pamela visited the Michael Palin Centre in support of one of her clients and bumped into Ed who was visiting too… who could resist such a photo opportunity? Pamela delivers therapy for primary school-age children who stammer as part of Enfield Health’s school-age speech and language service. She told us more about what the team does.

“One of our big initiatives at the moment is Voice of the Child. It’s a whole team initiative about finding and using tools to help gain children’s views and preferences and then training and coaching others (teachers, other health professionals, parents) in how to use them.”

In December, the team delivered a conference to 80 special educational needs SEN coordinators raising the question “Can you hear your pupil’s voice?” This month Pamela co-presented at a parents information day with a parent of a child with SEN on “What works in communication.”

“We need to get children’s and parents’ voices heard in designing interventions and planning service delivery. It’s a passion – the Mefirst agenda raised awareness but it needs more professionals on the ground to get it to stick. We’re pressing forward to do more joined-up thinking for families who need more than one service.

“As a service, we work collaboratively with people. I like to think Enablement is in our DNA but that said we are always reflecting and always challenging ourselves to do more.”

So not just Keep Dancing… but Keep Enabling.

If you would like to know more about our Enablement programme please visit www.beh-mht.nhs.uk

INFORMATION ABOUT OUR SCHOOL-AGE SPEECH AND LANGUAGE SERVICE IS ON OUR WEBSITE.
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WORKFORCE
We have simplified our vision to make it more accessible to our staff and service users.

**Our vision is Live, Love, Do.**

These are the three founding principles of our Enablement programme which underpin our Trust’s Clinical Strategy.

These principles mean we will help people:

**LIVE somewhere safe and secure to call home**

**LOVE to develop social contact, friends and relationships**

**DO meaningful activities, with BEH supporting access to volunteering, study or employment**

**TRUST VALUES**

- COMPASSION
- RESPECT
- WORKING TOGETHER
- BEING POSITIVE

**TRUST OBJECTIVES**

1. Excellent care
2. Happy staff
3. Value for money services

To reflect our updated vision and values we have also made our objectives more straightforward.
QUIZ TIME

Are you smarter than BEH's very own self-appointed Quiz Master? He thinks he's being fiendishly clever with this selection of questions, but can you bring him down a peg or two?

1. To check you've read the magazine, as we do like to do that here at quiz master central, can you remember what type of hospital used to be on the St Ann's site back in 1892?

2. What is the name of the new service in Haringey that helps young people?

3. Now we turn to a rather eclectic mix of questions to satisfy any appetite, and we'll start with a bit of geography. On which island would you find Mount Etna?

4. What is the capital of Portugal, and for a bonus point, which river runs through the city?

5. In which English seaside town will you find the longest pleasure pier in the world?

6. According to legend, which of Henry VIII's wives had a sixth finger on one hand?

7. During World War 1 who was the President of the USA?

8. Which musical note goes before 'soh'?

9. From which ingredient does curry get its colour?

10. Karl Marx spent the last 34 years of his life in which country?

11. In the phonetic alphabet what word is represented by the letter M?

12. In The Wizard of Oz what was the Scarecrow looking for?

13. By what name are Sheffield United F.C. also known?

You'll find the majority of the answers to our quiz on the next page. If you have a question which you think our Quiz Master might like to include in our next edition of Trust Matters then please email: communications@beh-mht.nhs.uk

Put your creative juices to the test. Send in a witty or clever caption to go with this picture and we'll choose the one we like the best. The winner gets a £25 voucher. Email your captions to: communications@beh-mht.nhs.uk before 30th September 2017.

TRUST MATTERS ISSUE 1 CAPTION COMPETITION

Winning caption:
“Bob had warned the children about getting sand in the car”
Congratulations to Amy Anderson, who spotted the magazine in her local GP surgery

Top captions
“Give us a push, the tide is coming in!”
Graham Koch, Staff Nurse

“Roger thinks he should have listened to Mavis when she said the Car-Boat combo would not end well”
Stella Singh, Ward Administrator, The Oaks
SPOT THE DIFFERENCE
SOMETHING FOR THE KIDS. HAVE SOME FUN SPOTTING THE 10 DIFFERENCES!

Can you guess what this picture forms a part of? Send your answer (and give a very precise location) to communications@beh-mht.nhs.uk

All correct answers will be put in a hat. The winner will get a £20 voucher.

Deadline 30th September 2017. Winner notified shortly afterwards.

MYSTERY PHOTO: WHERE AM I?

Can you guess what this picture forms a part of? Send your answer (and give a very precise location) to communications@beh-mht.nhs.uk

All correct answers will be put in a hat. The winner will get a £20 voucher.

Deadline 30th September 2017. Winner notified shortly afterwards.

RIDDLES

HARD: Every night I’m told what to do, and each morning I do what I’m told. But I still don’t escape your scold.

EASY: I can see me in water, but I never get wet. What am I?

Answers can be found on the BEH website: www.beh-mht.nhs.uk <search> COMPETITIONS.

Sudoku
Put your maths to the test in our sudoku challenge.

http://1sudoku.com http://1sudoku.com

Answers can be found on the BEH website: www.beh-mht.nhs.uk <search> COMPETITIONS.
Sudoku puzzles are provided by www.sudokuoftheday.com