

WEMWBS WELLBEING SCORE

How are you feeling today?

Below are some statements about feelings and thoughts. Please circle the number that best describes your experience over the last **two weeks**.

	None of the time	Rarely	Some of the time	Often	All of the time
1. I've been feeling optimistic about the future	1	2	3	4	5
2. I've been feeling useful	1	2	3	4	5
3. I've been feeling relaxed.	1	2	3	4	5
4. I've been feeling interested in other people	1	2	3	4	5
5. I've had energy to spare	1	2	3	4	5
6. I've been dealing with problems well	1	2	3	4	5
7. I've been thinking clearly	1	2	3	4	5
8. I've been feeling good about myself	1	2	3	4	5
9. I've been feeling close to other people	1	2	3	4	5
10. I've been feeling confident	1	2	3	4	5
11. I've been able to make up my own mind about things.	1	2	3	4	5
12. I've been feeling loved	1	2	3	4	5
13. I've been interested in new things	1	2	3	4	5
14. I've been feeling cheerful	1	2	3	4	5

When a member of our Team calls you they will ask for your Wellbeing Score. Please record it here for your information.

Total Wellbeing Score.....Date:.....

By completing this form, it is assumed that you give consent for any information held by Birmingham Mind about you, can be made available internally and to external agencies if necessary All information held is subject to the Data Protection Act

How to Access the Hub

1. Through a referral agent (GP, Health Professional, Social Services, NHS 111, Community Organisation etc.)
2. Self- Referral.

Simply complete our online referral form and self-assessment via our website birminghammind.org or simply complete the attached form and self-assessment tool and contact us as below



Birmingham Mind Wellbeing Hub, The Beechcroft Centre 501 Slade Road, Erdington, Birmingham B23 7JG



0121 262 3555



wellbeinghub@birminghammind.org



@Birminghammind

Opening hours:

9am—5pm, Monday to Friday
10am—2pm on Saturdays

A member of our assessment team will speak to you, to discuss what help is available and how you can access this.

Birmingham Mind's Purpose

"We will provide high quality services which range from those that support mental wellbeing and health promotion to those offering a specialist recovery based approach. We will challenge the stigma that surrounds mental distress."

Registered Charity No. 1003906

Company Limited by Guarantee No. 2024372

V1 02/2016

Birmingham Mind Wellbeing Hub

Access point for people requiring Wellbeing Services to maintain or improve their mental wellbeing

Getting help is easy!

Call our Wellbeing Hub on

0121 262 3555

Our service is **FREE** and funded by the Birmingham CrossCity Clinical Commissioning Group.

Our Wellbeing Hub

Our Wellbeing Hub offers a range of information and access to community services that support emotional wellbeing.

We offer a range of courses/workshops/groups that you can sign up for and we are also able to provide information on other services in the community that might be helpful.

We offer

- Workshops
- Groups
- Courses

5 Ways to Wellbeing

Coping with Anxiety & Depression

Self Esteem / Confidence Building

Relaxation

Mindfulness

Or we can offer you an appointment to discuss your concerns in more detail before arranging access to our courses and/or signposting you to other organisations.

Eligibility Criteria

- 18 years old or over
- Registered with a GP in Birmingham, within the Cross City Clinical Commissioning Group boundaries
- A desire to consider different ways of improving mental health
- Experiencing stress, anxiety, depression and not under the care of specialist mental health services



We can also signpost you to other services which may help with ...

Employment

Health & Lifestyle

Housing Support

Volunteering



Full Name:	
Full Address:	
Contact Number (s):	Email:
Date of Birth	Age
Gender	NHS Number <i>(if known)</i>
Who suggested you contact us? <i>Please tick the relevant box:</i>	
Self	<input type="checkbox"/>
GP	<input type="checkbox"/>
Community Mental Health Team	<input type="checkbox"/>
Health Practitioner	<input type="checkbox"/>
Primary Care Services	<input type="checkbox"/>
Secondary Care Service	<input type="checkbox"/>
Employer	<input type="checkbox"/>
Birmingham Mind	<input type="checkbox"/>
Other (Please state)	<input type="checkbox"/>
GP Name:	
Address:	
Contact Number:	
Reason (s) for referral	
Mental/Physical Health Conditions?	
Risk Factors / Risk Information	