



What local organisations think of mental health support

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Introduction

Healthwatch is your local health and care champion, and we are here to listen to the issues that really matter to people. There is a Healthwatch in every local authority area of England.

As an independent statutory body, we have the power to make sure that NHS leaders, and other decision makers, listen to your experiences of using local services and use your feedback to improve health and care for everyone. We can also help you to get the information and advice you need to make informed decisions about the right support for you.

The national [Community Mental Health Services Framework](#) (CSF) published in 2019, outlines changes to adult community mental health services. It looks at how support for people in the future can be delivered more locally, so that they can get the support that they need to live well.

The framework aims to break down barriers to accessing mental health and wellbeing services so that people can get the right support, care, and treatment when they need it and from wherever they seek it. This could be from their GP, community services, self-referral to services or through digital or other routes.

The effects of the Covid-19 pandemic on people's mental wellbeing has seen an increase in individuals requiring access to mental health support. It has been recognised that the voluntary sector, sometimes called the third sector, forms a key strand of the mental health crisis response by providing support to people closer to their homes and communities.

In September 2021, Healthwatch Bath and North East Somerset (BaNES), Swindon, and Wiltshire were asked by BaNES, Swindon, and Wiltshire Clinical Commissioning Group (BSW CCG) to facilitate three online workshops, one in each locality, to hear the views of organisations across the area who support people with their mental health.

The feedback shared in this report supports earlier engagement undertaken by BSW CCG to hear people's views and experiences of community mental health support and this will be collated to help shape and develop the new service.

What we did

In September 2021, BSW CCG and Healthwatch teams from BaNES, Swindon, and Wiltshire worked together to plan the online workshops. It was agreed that there would be one for each locality and the discussions would focus on three main themes:

- What have you heard from the people you support?
- How can this be improved and what do we want to keep?
- How are we going to achieve this?

The workshops were held in October 2021, and we heard the views of 22 organisations across BSW.

- 5 organisations attended the BaNES workshop.
- 10 organisations attended the Swindon workshop.
- 7 organisations attended the Wiltshire workshop.

What organisations told us

What have you heard from the people you support?

The lack of accessible information to make informed mental health decisions was a key theme. We were told how GPs are not always aware of the support available in their local area to help people manage their mental health. Not all medical practices have a mental health practitioner and strong emphasis was placed around GPs not making referrals due to a lack of clear referral routes to mental health services.

Patient is told they don't meet the criteria and is then re-referred to their GP and end up going round in circles. — *Workshop participant*

Poor communication and co-ordination between services leads to people being stuck in the system and being signposted out of care. We were told that more social prescribing is needed locally.

GPs are too quick to prescribe medication, people often need something more therapeutic, need more social prescribing. — *Workshop participant*

The lack of understanding of specific conditions was frequently raised, examples given included adults with a brain injury who often feel there is no one out there to help manage situations. People felt that health and social care professionals outside of mental health services do not understand the challenges they face, and do not always know what support services are available.

New Bipolar mother not getting support from health workers. — *Workshop participant*

Many people expressed views around the lack of empathy and respect from healthcare professionals. These feelings can be made worse by the short appointment slots on offer. People want to be involved in decisions about their care, and to be taken seriously. We also heard that some staff say they lack the right skills to best support those with mental health conditions and would like more training.

Individuals would prefer to talk to someone who has been through a similar experience and can understand their needs. — *Workshop participant*

Caregivers commented about the lack of support, information, and follow-up that they had received after a crisis. Carers felt that they were not always involved in conversations about the care of their loved ones and were not offered support for their own mental health and wellbeing.

Parents and carers noted that there was help and advice aimed at adults but less for children and young people. The workshop participants felt that no one was taking responsibility for helping them and that a lack of choice in services for children and young people would not allow them to contribute to decision-making that affects their lives.

Children often feel they are not given choices as to how to manage their own mental health and wellbeing.

– *Workshop participant*

We also heard that not enough education and support around mental health is given in all schools, with only a handful having introduced initiatives. It was felt there should be more in place to address mental health at an earlier age. Teachers do not often know how to deal with students experiencing a mental health crisis or have the right training to identify and support students with their mental health.

Strong emphasis was placed on the long waiting times to access services with more needing to be done in the interim period. The waiting time is a huge challenge, people are reaching out for help, and it does not come soon enough. More work should be carried out in reducing waiting times. For example, Targeted Mental Health Services (TAMHS) and Child and Adolescent Mental Health Services (CAMHS) currently have up to a one-year wait and this will have a detrimental impact on people, especially those who are reaching 18 and transitioning from child to adult services.

Minimum 5 months' wait to access services.

– *Workshop participant*

We also heard that police and ambulance services are not always best equipped to support people with their mental health. A strong focus was placed on not having the right skills in helping people who felt suicidal or who had self-harmed.

More services are introducing digital, or telephone appointments as opposed to face to face but this may not always be the best approach when supporting people. It was thought there could be greater risk of things being missed by health professionals as they are not able to physically see the person to make an assessment.

People experiencing mental health problems require one to one and face to face support in order for them to receive the right help and treatment.

– *Workshop participant*

How can this be improved and what do we want to keep?

The participants felt that, as a first step, healthcare professionals need to acknowledge that there are gaps in services and a need for improvement, and that these changes will take time.

This is the biggest change to mental health in 30 years, it will take time to get it right.
– Workshop participant

There were positive comments about linking services with local community and voluntary organisations to deliver mental health support. This could create new ways of working, where people can access the right care at the right time, in the right place. It could enable young people to access therapy alongside social opportunities, effectively addressing the needs of people with a range of mental health needs.

Clearer information and advice during challenging times would also make things easier, with more collaborative working between services. Managing a common pool of resources will require collaboration between organisations.

Promote the partnership working, provide information and support, pull it together in a central resources library.
– Workshop participant

It was felt that carers play a significant role in the recovery of individuals experiencing mental illness and their support needs are often overlooked. Carers risk developing poor mental health themselves, therefore, they must be considered in the new framework and given the right help and support to enable them to continue in their caring role.

A strong emphasis was placed on reducing waiting times for mental health services and the introduction of maximum waiting time targets for early intervention. Support should be given to individuals while they are waiting, and access to alternative pathways into mental health services should be taken into consideration.

Participants said that the person's needs should be reviewed regularly with them and those involved in their care from the onset. There should be more focus on linking with local communities – which is a key component of personalised care – by focusing on the whole person.

How are we going to achieve this?

Participants felt strongly that there should be recognition for the interplay between physical health and mental health needs of individuals. Access to alternative therapeutic and medical treatment should be put in place to minimise the impact of physical illness on their emotional wellbeing and to prevent a further deterioration of their mental health.

We also discussed how mental health services and primary care settings should collaborate to ensure that access to effective treatment for mild to moderate mental illness is timely. There should be one front door with all the necessary signposting in place.

Participants said that family members, caregivers and service users should be involved in the decision-making and design of new mental health support approaches.

They also said that information on mental health support should be shared across all services so that by working in partnership services can achieve the best results for individuals. A shared pool of resources across the entire system will enable services to respond to people's needs in a timely manner.

Have a central database of support available that signposts to support available.

– *Workshop participant*

Childhood and adolescence were seen as crucial stages for promoting wellbeing and good mental health. Participants said it was important that schools identify and address early signs of mental illness by supporting children and young people to access support as early as possible. Teachers should be trained to identify signs, and symptoms of mental illness and how to obtain the right intervention and care through a simple referral process.

Comments were also made about mental health awareness training being mandatory for all healthcare professionals, emergency services and NHS staff.

Conclusions & recommendations

Organisations told us that people felt that GPs aren't always best placed to deal with their mental health issue, there is a lack of coordination between services and that some staff don't have the right skills to support people. There was a strong emphasis on wait times and the feeling that people are waiting too long without receiving support in the meantime. Education and mental health support in schools was also seen as key.

There were many positive comments about the role of the voluntary sector and how they can work in a flexible way to offer support to people. There was a strong emphasis on people wanting to be linked in with their communities and offered alternatives to medication.

It was thought that individuals and care givers having more involvement and control over their own care was vital, including being involved in the design of services.

Many suggestions were made on how this could be achieved, including mental health services working together more with other health services, treating a person as a whole, and more support for children and young people in schools and from an early age to identify and address signs. There was also a clear message that training for staff in a range of roles was thought to be beneficial.

Based on what we heard from the organisations that attended the workshop we make the following recommendations:

- Ensure that individuals are at the centre of the decision-making process throughout their journey.
- Design and produce services by working with people with lived experience and the people who support them.
- Review the support available for children and young people and how this could be improved, including the transition pathway.
- Review the support on offer for unpaid carers and how this could be improved.
- Consider how mental health specialists can be embedded in a range of wider services including primary care and emergency services.
- Consider enhancing training programmes to further upskill staff such as teachers.
- Ensure that voluntary sector organisations are seen as equal partners in this process.

Access to care is a long-standing problem in mental health, and the emphasis that is being placed on improving this through the new integrated alliance is certainly welcome.

– Workshop participant

List of participants

Thank you to the organisations from across BaNES, Swindon and Wiltshire, who shared their views with us.

Bath and North East Somerset

Joining Healthwatch Swindon and BaNES were:

- Avon & Wiltshire Mental Health Partnership NHS Trust (AWP)
- Care Forum
- Principal Mental Health Social Work, Bath Council
- Soundwell Music Therapy Trust
- Swindon and Gloucestershire Mind

Swindon

Joining Healthwatch Swindon and BaNES were:

- Avon & Wiltshire Mental Health Partnership NHS Trust (AWP)
- Care Forum
- Carer and service user
- DASH (Discovering Autism Spectrum Happiness)
- Mosaics of Life Therapies
- SEND Families Voice Swindon
- Swindon Carers Center
- Swindon and Gloucestershire Mind
- Swindon Trailblazers Outreach
- Willows Counselling Service

Wiltshire

Joining Healthwatch Wiltshire were:

- Alabaré
- Barnardo's
- MIND (BaNES and South Gloucestershire)
- Response
- Rethink
- Wiltshire Parent Carer Council
- Victim Support

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