

Exploring the views of  
**Gloucestershire** people  
on **mental health**  
**services** in the county

Local health  
and social care  
shaped by you

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# Introduction

Healthwatch Gloucestershire is the county's independent health and care champion. It exists to ensure that people are at the heart of care. A dedicated team of staff and volunteers listen to what people like about local health services, and what could be improved. These views are then shared with the decision-making organisations, so together a real difference can be made. This report is an example of how views are shared.

Healthwatch Gloucestershire has been talking to local people about their experiences and views of mental health services in Gloucestershire. This report tells you what people said when we spoke to them about their experiences.



# Background

Mental Health services are still a priority for members of the public and groups and organisations across Gloucestershire. Feedback from the voluntary and community sector and service users and carers of people experiencing mental health illness, continue to highlight the challenges and concerns that people have when trying to access health and care services in the county.

Over the past few years, Healthwatch Gloucestershire has gathered a wide variety of feedback on many aspects of mental health services from people across the county. However, it was important for us to identify in more detail what mattered most to the people of Gloucestershire in terms of mental health support. The information gathered will be shared with those who pay and provide mental health services and will help them to shape mental health services in the future.



# What we did



We created a survey that was available online and in hard copy. This asked for the views and experiences of local people who had used mental health services, or cared for people who had used mental health services within the last 3 years. We also attended support groups of service users and carers across the county, to speak to them about their views and experiences.

We attended 30 engagement events and groups with information about the project, to speak to people about their experiences. We engaged with over 200 people through these visits. Groups were made up of carers and people with lived experience of using mental health services.



Our information leaflet

Five volunteers supported the engagement events and helped to analyse the feedback. Altogether they provided 40 hours of support.

We also:

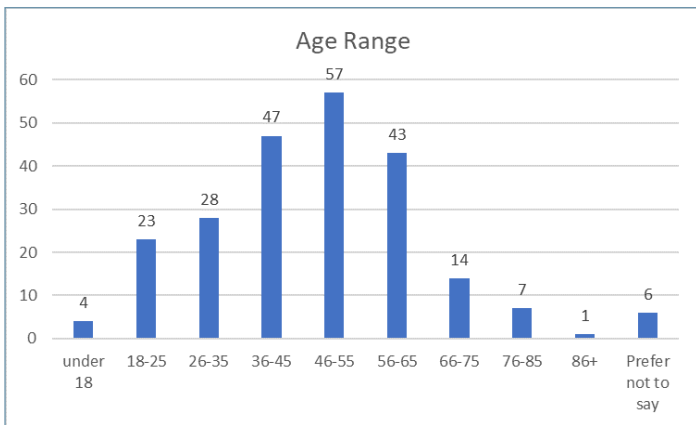
- contacted 50 voluntary, community and online groups to share the questionnaire and to encourage their members to give feedback
- had a continuous presence through website and social media feeds



Our social media posts



# Who we spoke to



231 local people filled in the survey; 67% (154 people) were service users, and 33% (77 people) were carers.

We also spoke to over 200 people in groups that we visited across the county, who were a mix of service users and carers.

Figures 1. and 2. shows the age range and geographical spread of people who took part in the survey.

Figure 1. Age of respondents

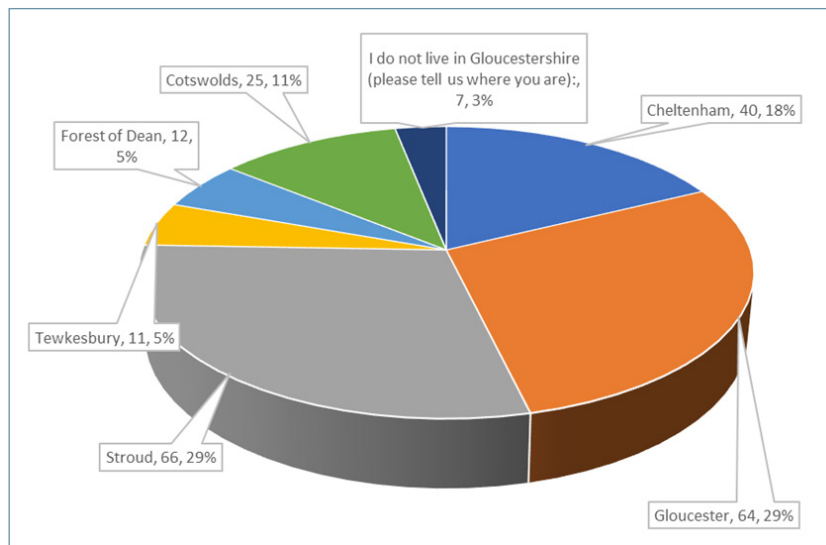


Figure 2. Where respondents live

People who we spoke to had experience of many different mental health issues or illnesses from their own experiences or those they cared for; these are shown in Figure 3.

They had also accessed support from many organisations, with support from the NHS and those in the voluntary and community services. Figure 4. shows some of the key support services that people accessed. The larger the word, the more popular it was within the survey responses.

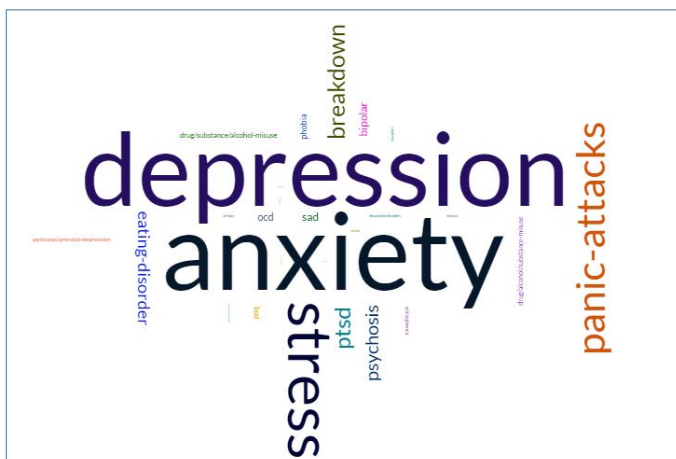


Figure 3. Mental health issues

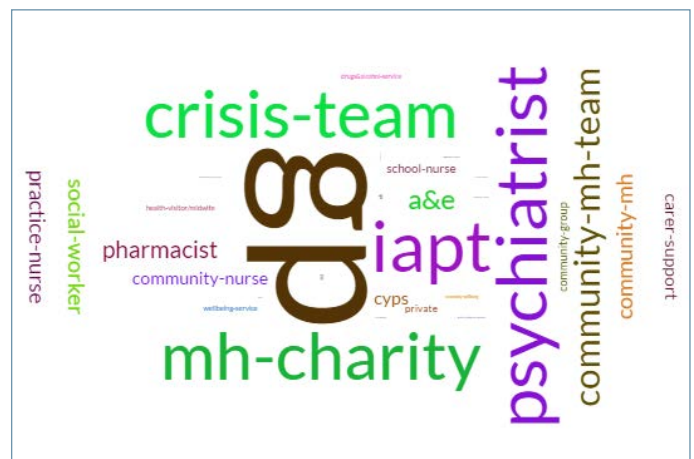


Figure 4. Key support services

# Key messages

A lot of people talked to us about the long waiting times for the Improving Access to Psychological Therapies Service (IAPT) and Children and Young People's Services (CYPS) across the county.

People talked about the positive support and help that their GP gave to them, but understood that they were not specialists and were limited in the support that they could provide.

Service users and carers spoke about the need for more flexibility on the number of support sessions or extra support sessions that they are given and that they were concerned that this could affect their wellbeing.

Some people were able to access information about services and support easily, however some people struggled to know where to go to get this information. Carers especially felt that accessing professional support or advice for themselves was hard.

People felt that the information they accessed could sometimes be conflicting and difficult to understand. It often came from many different sources.

People talked about the difficulties in accessing support for people who were in acute crisis and that they were sometimes signposted to services that were not able to offer support for those in crisis.

## What people told us



**When you last spoke to someone about a mental health condition, were you happy with the service?**

## What they liked about mental health services

GP's were seen as being understanding and supportive, but people realised that there was only so much they could do in terms of further help. Some people felt that mental health symptoms were sometimes missed due to a lack of specialist knowledge of GP's. Many people talked about how person-centred care was especially important for good mental health support. Feeling like they were listened to, understood and could influence the support they received was important.

"My GP gave me the support I needed, she was patient, willing to take time to understand my issues and the way they affected me. She made me feel that someone was on my side and explained what was happening, that it was ok not to be ok. She also gave me hope that I would get through this."

People told us that the service was better when they were able to speak to the same member of staff each time, as this helped build trust and rapport and meant that they did not have to repeat themselves. This was a shared view of carers and service users.

“There is poor communication between professionals across services, it is not good, and I have to repeat my life history every time and I am tired of it.”

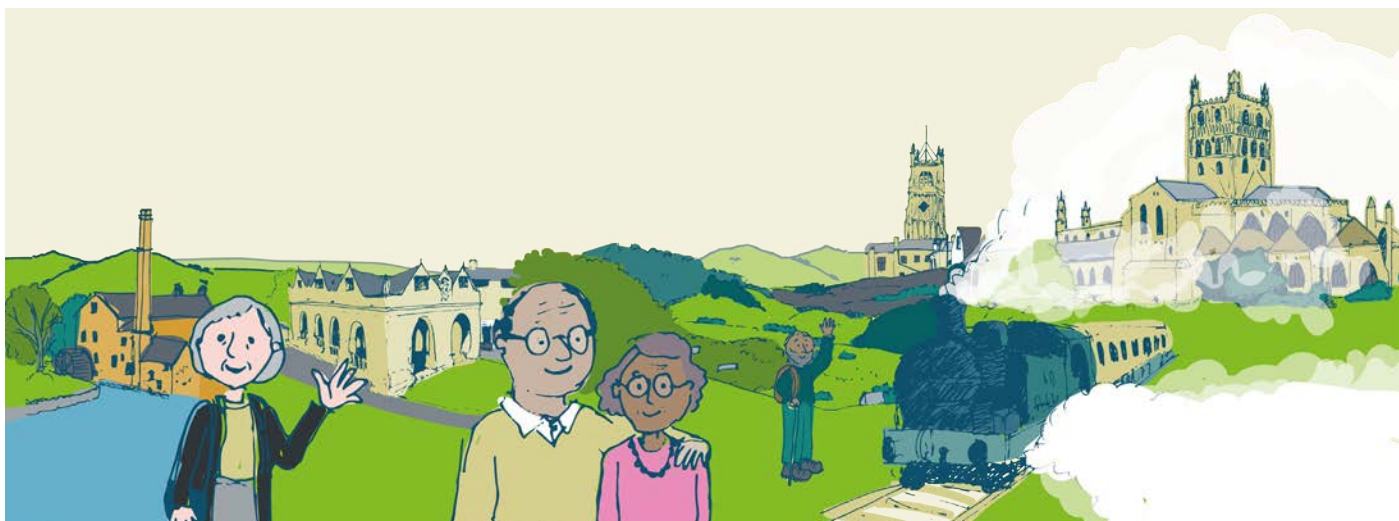
“Let’s Talk was the main source of professional support throughout. The self-referral online form made it easy to access help from home without having to go through my GP. I attended an anxiety course, had telephone and face-to-face CBT over one year which gave me the tools to cope in a practical and realistic way. I can now use the tools I learnt to help myself deal with my anxiety because of the service they provided.”

Let’s Talk, the talking therapy service for managing anxiety and depression, was seen by some as being a useful tool for mental health support. Those who found that it was appropriate for the severity of their mental health condition were pleased with the service, and felt that it helped them greatly.

People commented that having many ways of accessing therapy (e.g. via phone, face-to-face and online) was useful. Silver Cloud, an online therapy tool offered through the Let’s Talk Service, was mentioned by two respondents as being helpful, especially as it could be used as a resource to return to when needed. Support from Community Mental Health Teams was also praised particularly because it was accessible and provided a regular service. Mental health nurse specialists were thought to be positive additions to GP surgeries, allowing people to talk to a professional with specialist skills.

People felt that informal support was important to them and their wellbeing. Specific support groups and ‘cafes’ located in the community were seen as an important resource. Receiving support in the community was important to people, who felt that this would encourage peer support. It was important that these groups were free to access and spread across the whole county.

“I’m independently working through the Silver Cloud package for anxiety. I don’t have support from the therapist as after just one month my scores on the questionnaires showed I was improved enough to not need clinical support. I’m pleased I still have access to the course as that was the support I wanted and felt most comfortable with.”



## What could be improved

A common theme that ran through many people's experiences was that of the complicated referral processes - often being passed from service to service and long waiting times. People fed back that having realistic time frames for appointments and support would be helpful.

"The letter's that I received from NHS 2gether Let's Talk did not help as they always said that they expected counselling to start in four to six weeks. This continually got pushed back every month. A realistic time frame would have made me seek help via an alternative source."

This was especially apparent for the IAPT and CYPs services. Many felt that the current waiting times between referral and treatments were unacceptable, so much so that many were turning to paid support and charities out of desperation.

Some people told us that it had taken so long to get support that their condition had reached crisis point. **"You always have to wait for a crisis before anyone comes to your rescue."** Once support was offered, many felt that the restraints on the number of sessions that they could access was not useful. Not all patients felt that their condition had improved within the set time frame, and with no ongoing support, they felt left to cope alone.

"When I did get some talking therapy, it only lasted for 12 weeks, which was only enough to start trying to find ways to manage the effects of long term trauma. Since then I have been left to find my own way through and have not been offered any trauma related therapy."



"Support from my GP has been very good, but trying to access talking therapy or support has been very difficult with only the Let's Talk Service offered through the NHS locally - and that had a waiting list - or having fund therapy myself."

"I was assessed by Let's Talk very quickly - within a week of referral - then waited for treatment for over 3 months."

Many of the comments from carers referred to their carer role, and the extent to which they were involved in the treatment of those they cared for. Many felt that they were not listened to or included in the treatment plans.



"Carers are not listened to and they know the person best."



“All information in the same place. A lot of information was contradictory. I got confused easily. The palliative care teams were great and gave me so much information and support. If I hadn’t had them, I wouldn’t have known where to go. Maybe my GP, but they have so little time in appointments, I don’t think they would have helped me much.”

“I felt in the wilderness after contacting the Crisis Team... The Crisis Team didn’t initially come out to see me, so it felt like I had been left to fend for myself.”

This was especially difficult when those they were caring for were very unwell. Some carers felt that a lack of good support services meant that all responsibility was left to them, which often put strains on the relationship that they had with the person they were caring for.

Many carers wished for professionally facilitated support groups, as many felt that support would be more useful if it was delivered by a professional with the correct knowledge, advice and signposting.

People who required urgent or crisis care reported mixed experiences. Often people told us that accessing support from the Crisis Team was difficult, and that what they had thought the Crisis Team could offer, was inaccurate. This led to a feeling of not knowing where to go next to seek support, or being left to fend for themselves, with confusion about where to go.

## Considerations

- Carers spoke to us about how frustrated they were about the lack of professional support they have in their peer support groups. They find that they struggle to know where to turn and to access correct information. Healthwatch Gloucestershire suggests that more support is offered to these groups and that there is clear and consistent signposting to accurate information.
- People spoke about the difficulties in accessing support or getting information about what support they can get when they are waiting for formal services or treatment. Healthwatch Gloucestershire suggests that the information sources are reviewed.
- A high number of people mentioned long waiting times for appointments and access to services. Many also told us communication from providers was poor. More consistent communication of what to expect when waiting and ideas of time scales would have a positive impact on people.
- Service users and carers spoke about their frustrations with crisis care and the difficulty they had accessing the service. People talked about their frustrations at being told that the service was not right for them and that they could not be supported when making phone calls. Healthwatch Gloucestershire suggests better communication with people about what crisis support is available when patients are becoming more ill, and where they should go to access the relevant support.



# Next steps

We know that it is important that people know what has happened as a result of them sharing their experiences with us. We are already working with commissioners to respond to the issues raised in this report. We will be sharing this report with key partners and will be presenting our findings at the Gloucestershire Health and Wellbeing Board and Mental Health Partnership Board.

Due to the nature of the information that we gathered, a series of follow up reports will be produced that will focus further on specific areas where we received more information. These include:

1. The experiences of carers
2. The availability of information and advice
3. Mental health stigma and attitudes

This report will be published on our website and be sent to Healthwatch England. We will also follow up on the suggestions in February 2020.

There is a large amount of information and data that has been provided to us through the survey. This anonymised data will be shared with NHS Gloucestershire Clinical Commissioning Group so that they can use the views of local people who spoke to us to inform the development of mental health services in Gloucestershire.

# Stakeholder's response

This report has been shared with the 2gether NHS Foundation Trust. A response was received in a letter dated 24 September 2019 from Jane Melton, Director of Engagement and Integration:



***"We welcome Healthwatch Gloucestershire's report summarising the results of the recent survey exploring the views of Gloucestershire people with regard to mental health services in the county.***

***"Feedback about people's experiences of our specialist services and other local services is really important. The results will add to our knowledge of how to provide best services for people experiencing mental illness and people with learning disabilities. We can see that there are areas of learning for us which specifically relate to some of our services. We can also see matters which will require a collective effort, alongside other health and care providers and commissioners in the county to progress and we are fully committed to play our part.***

***"We have previously announced that our organisation is merging with Gloucestershire Care Services on the 1st October 2019. Our new organisation, Gloucestershire Health and Care NHS Foundation Trust will continue the commitment to continuous improvement of our mental health services with you and other community partners. As such, your report is being shared with the appointed leadership team of our new organisation so that the information supports our further developments.***

***"We will look forward to the follow up reports mentioned which will detail information about the experiences of carers, the availability of information and advice in addition to the results relating to mental health stigma and attitudes in our communities in Gloucestershire.***

***"Once again, thank you very much for providing us with the opportunity to comment on this important report."***

## Thank you

Healthwatch Gloucestershire would like to thank everyone who took the time to contribute their views and experience through the engagement activities. Thanks also to our dedicated volunteers who helped to support the engagement activity. Without them we would not have been able to reach the numbers of people that we did.



## Why not get involved?



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