

MENTAL HEALTH SERVICES REPORT

Date: July 2024



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Disclaimer

Please note: This report is based upon feedback provided to Healthwatch North Lincolnshire from members of the public and professionals. The findings are based upon individuals' perceptions, which are not verified for factual accuracy.

Quotes in the report are written as received, to ensure opinions are kept in context, as such there may be grammatical errors within quotes.

1 Introduction

1.1 What is Healthwatch North Lincolnshire?

We are the independent champion for people who use health and social care services. We exist to make sure that people are at the heart of care. We listen to what people like about services and what could be improved. We share their views with those with the power to make change happen. We also help people find the information they need about services in their area.

We have the power to make sure that people's voices are heard by the government and those running services. As well as seeking the public's views ourselves, we also encourage services to involve people in decisions that affect them. Our sole purpose is to help make care better for people.

In summary Healthwatch is here to:

- Help people find out about local care
- Listen to what people think of services
- Help improve the quality of services by letting those running services and the government know what people want from care
- Encourage people running services to involve people in changes to care

2 Background

2.1 Why this subject?

As a new Mental health project officer was appointed in Healthwatch North Lincolnshire this survey was created as a starting point for further research into what services people were using. Healthwatch North Lincolnshire received feedback from different avenues that Mental health services were lacking in the local area. This led to the Mental Health Services Survey being produced and distributed to the local community to gain clarification that this was the case and any other issues people wanted to raise. We were already aware of the long waiting times people were experiencing for treatment and the limited options for people to access.

2.2 Methodology

One survey was created; however, it was available online via the Healthwatch North Lincolnshire Website, via a scannable QR code and a printed paper version. Healthwatch Freepost envelopes were also provided to participants so that they could post back their completed surveys; this ensured people could remain anonymous if they wished to do so.

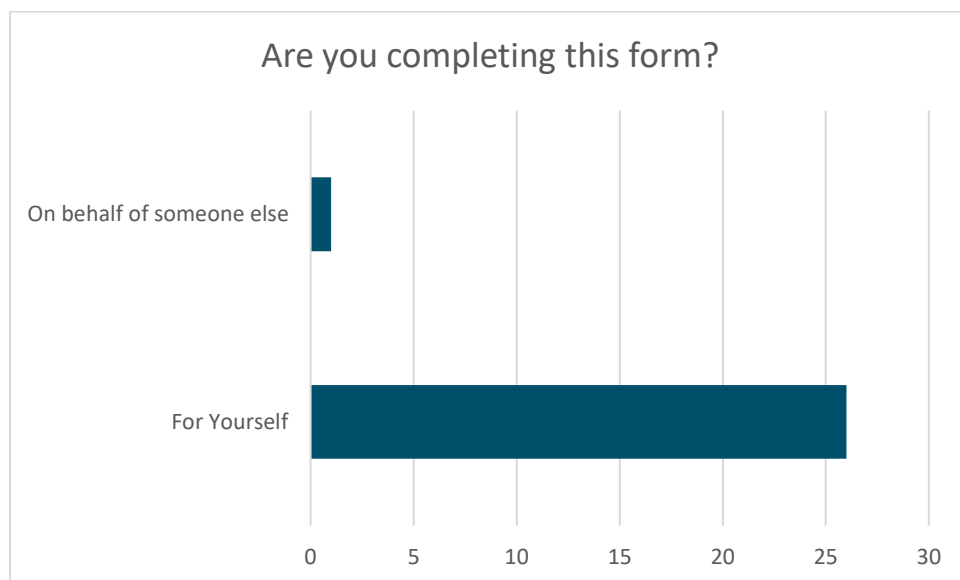
Wherever possible surveys were also handed out during regular engagement sessions at Scunthorpe General Hospital and at the Ironstone Centre

2.3 Limitations of the study

Despite our attempts at promoting the survey and the work the staff at Mind, Tent Project and Carers Support did in distributing the survey, we captured only twenty-seven responses: 12 online and 15 paper version. Although the feedback has provided some insight a larger response rate would have been preferable. We have, however, examined the results and the key findings are provided in this report.

3. Key Findings:

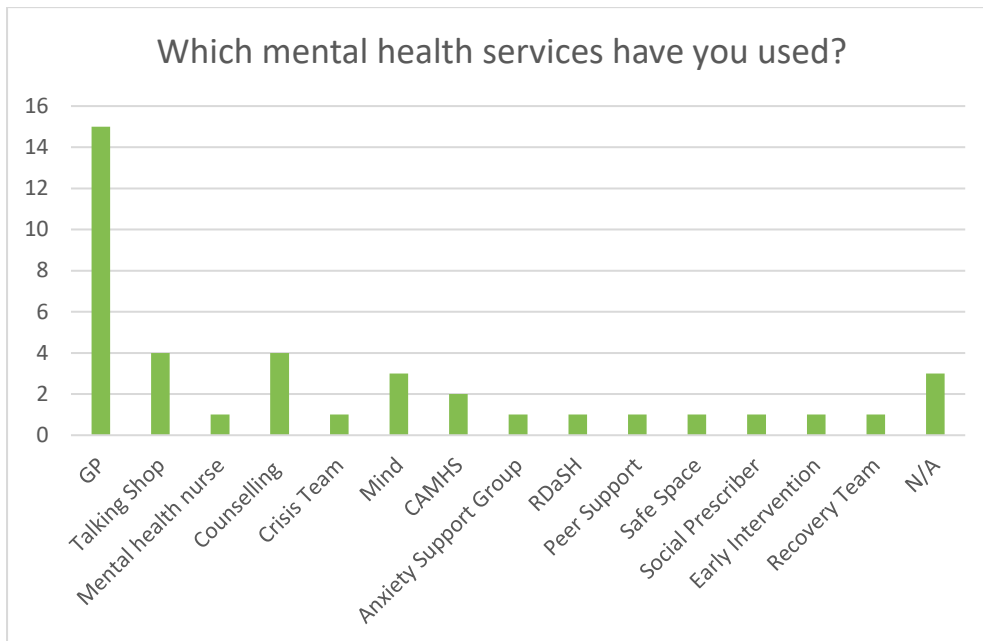
We asked people to state whether they were completing the survey: for themselves or on behalf of someone else.



Responses from the public and professional surveys have been analysed and highlighted over the following pages.

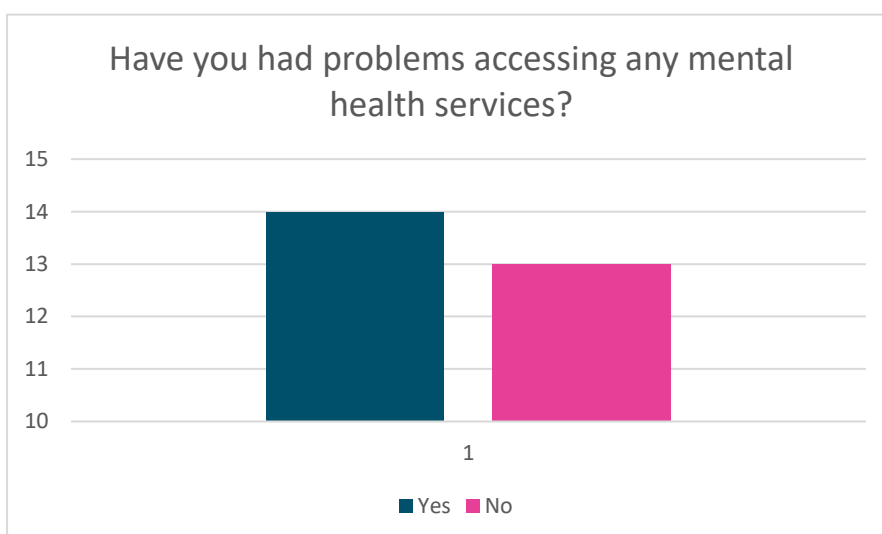
Responses from the Public Survey:

The Initial Access



It is shown that most participants accessed mental health support through their GP alongside another service with The Talking Shop and counselling being the most used followed by Mind.

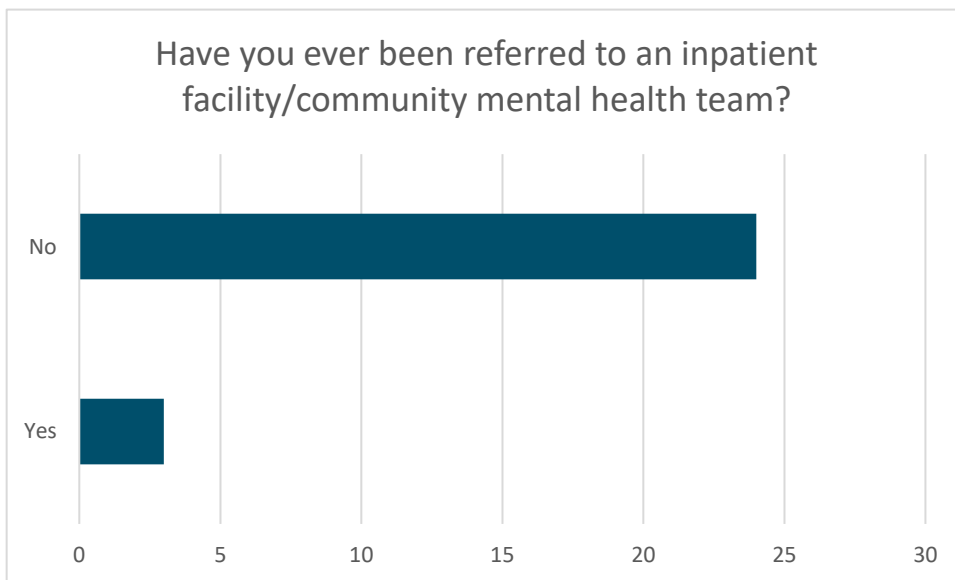
Have you had any problems accessing any mental health services?



13 individuals stated they did not experience any problems when accessing any mental health services. 14 individuals stated they did experience problems and specified these problems as:

- “Long waiting times.”
- “It is the time from having a 6-week course to then waiting to start again with Mind.”
- “Time taken to be seen/assessed.”
- “The referral process is not very good; you have to do it all yourself.”
- “Long waiting list – dismissed about concerns.”
- “No solutions – just given medication.”

Other Services accessed



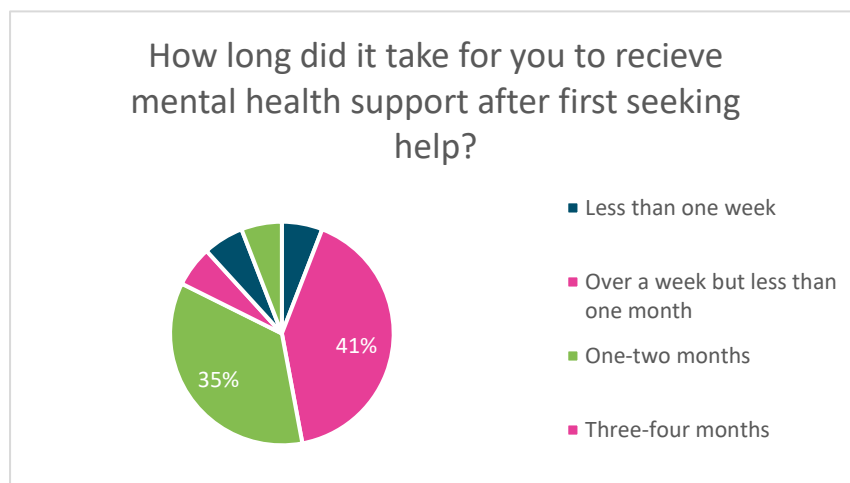
Most participants stated they had not been referred to an inpatient facility or used the community mental health team however 3 responses stated yes, and their experiences were described as feeling invisible, not everyone is given equal treatment, no follow up after initial meeting and felt like they were discharged too early.

What changes would you make to services

Many comments were made around changes people would like to see regarding local services, most relating to the long waiting times:

- “GPs need to signpost people to get better help.”
- “More face-to-face appointments.”
- “Talking shop (CBT) was very superficial. Delivered in group setting online, couldn’t talk or share.”
- “Access to a drop-in service would be beneficial.”
- “Increase of staff and later appointments.”
- “Waiting 6 months for an ADHD specialist appointment – I have suffered longer than I needed too.”

The impact of waiting times



Most participants responded that they experienced some degree of wait varying in duration to receive mental health support after first seeking help. 1 respondent waited less than one week. 7 stated they waited over a week but less than a month. Other responses dictate that individuals waited 1-6 months for treatment. Many individuals explained the wait for treatment caused their mental health to deteriorate further:

- “The wait made me feel very alone.”
- “I didn’t seek help until late, so any delay was difficult for me.”
- “My mental health deteriorated significantly.”
- “Increased my anxiety – felt worthless.”
- “Had to go back to GP – ended up on medication.”

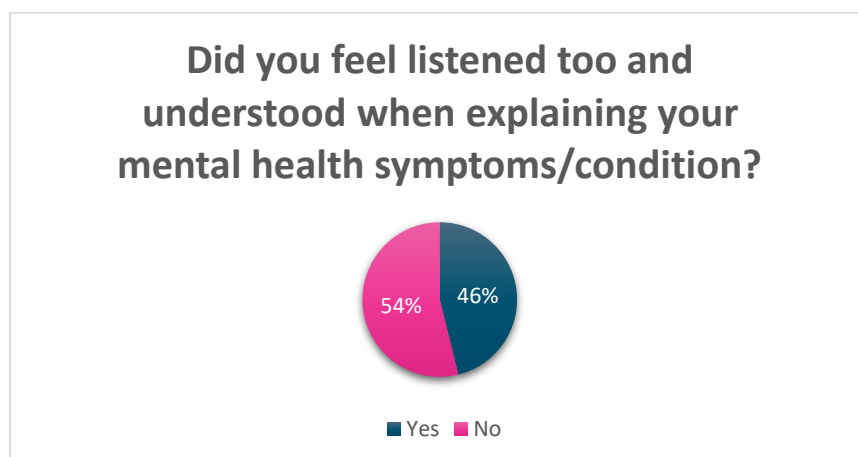


We also asked participants if they were offered advice whilst waiting for further help; whilst majority stated they received no advice, some stated they received advice on other local places and/or information on how to manage their symptoms. 14 individuals dictated that they did not receive

or cannot remember if they received any advice on how to keep themselves safe, manage symptoms or signposted to any other local support services. 4 were offered advice on how to keep safe and manage symptoms and 4 were signposted to other local support services. All responses who were provided with some advice stated they could follow all or some of the advice given. Many individuals faced difficulties in following the advice given:

- “Just given leaflets but no context.”
- “Was given a list of places to call as I had more than one issue – no one knew where I could go or what support was available; just told to google websites.”
- “Only time I have struggled is when my concerns are being dismissed, being told to get over it.”
- “Lack of compassion.”
- “Advice was given too early in my recovery for it to be relevant.”
- “Wasn’t specific enough to my case.”
- “Sometimes seeking support or knowing that the service is actually available is enough.”

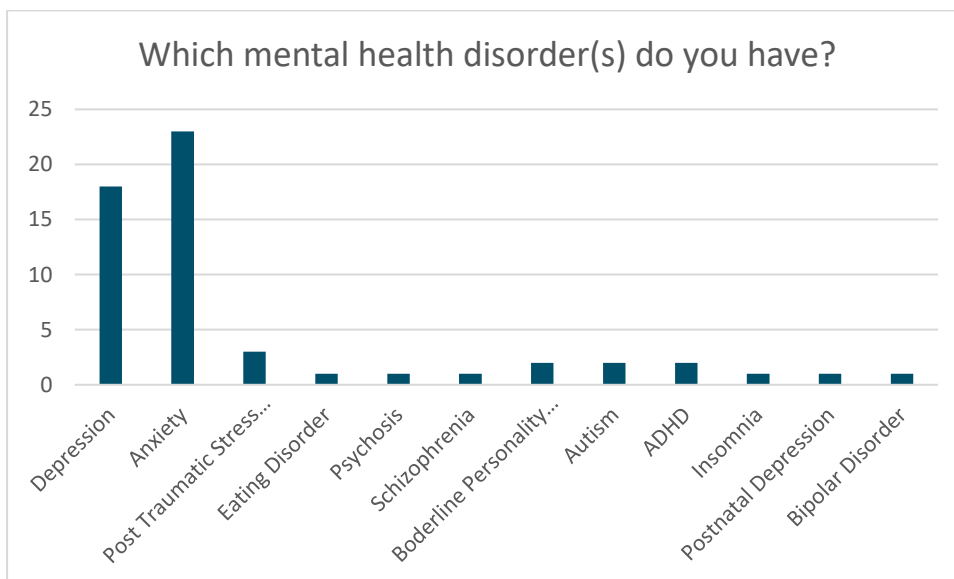
Feeling listened too and understood



12 responses confirmed they felt listened too and understood when explaining their mental health symptoms or conditions however 14 responses explained they did not feel listened too or understood for reasons such as:

- “GP seems to downplay mental health issues.”
- “GP did not care – I was the last person in the building and sat in the waiting room past closing time.”
- “Nurse was ok but seemed to be unaware on how to help but she did listen and action what I said however there was no further support provided after 2nd appointment until I prompted them.”

Mental health conditions



Responses show most participants have depression and/or anxiety along with other disorders including PTSD, BPD and ADHD.

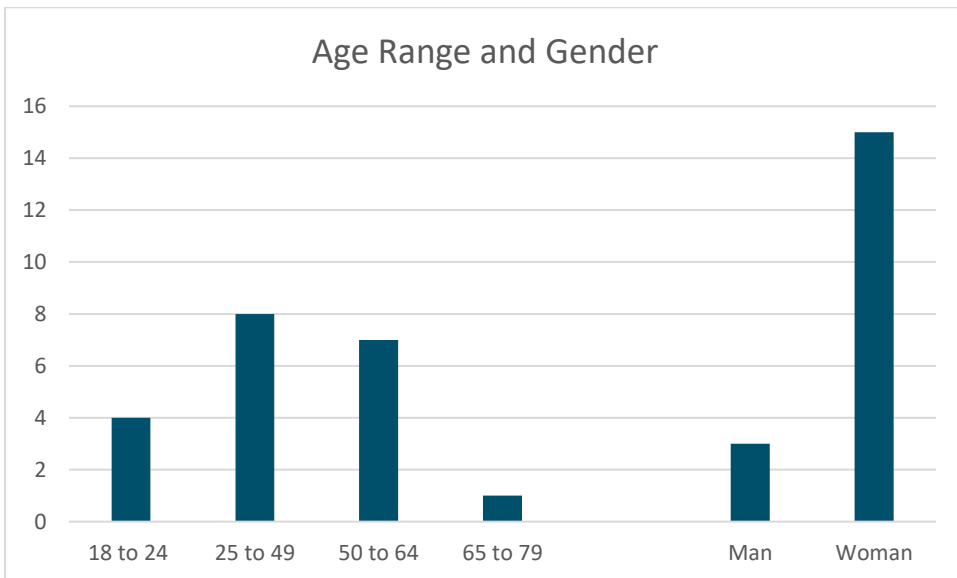
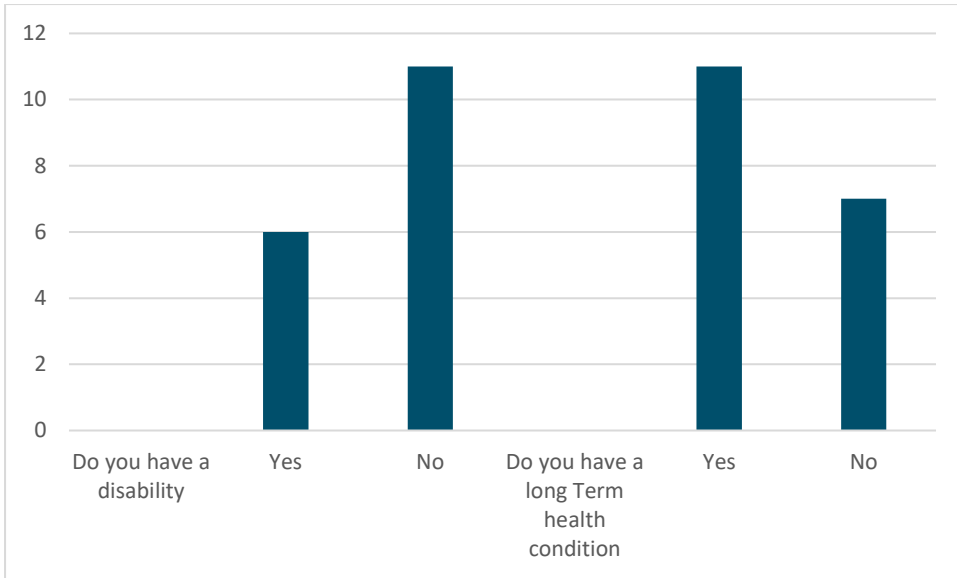
Other Comments

We asked the respondents if they wished to add any further comments regarding mental health services,

- “We need more specialist services in the area for mental health needs.”
- “Nothing for people with ASD – Given the fact that there is a high proportion of people with autism that take their own life. Much more help is needed.”
- “Whenever I go to the GP, they only seem to care about doing a questionnaire and then that is it.”
- “Mental health services need to be made more readily available to every age group.”
- “I had situational anxiety during pregnancy and delayed postnatal depression, had to seek private counselling as nothing was offered on the NHS – Was told it would sort itself out.”
- “Where I appreciate services are overrun with people accessing them, these people may not have to keep coming back if listening to and helped correctly the first time.”
- “ADHD – the staff need more awareness on the medicines available to people with ADHD. They should be aware of how they interact with other medication people may be taking.”

We also gathered some demographic data the most common age range of responses was 25-49 and mostly woman completed our survey with fewer responses from men. Most individuals also stated they had a disability and/or a long-term health condition.

Mental Health Survey
July 2024



4. Conclusion

The findings highlight variations in the length of time service users waited for assessment and the impact long waits had. In addition, most responses received help through their GP for mental health support but did not feel supported enough by their GP, there was not enough accessible support or signposting to other services. The most common recommendation from respondents was the waiting times for appointments needs to be shorter, people are having to deal with symptoms with no support or advice on how to manage. The waiting times impacted most individuals who expressed that their symptoms worsened whilst having an extended wait for support. Many people felt that professionals lacked compassion, insufficient training for certain conditions and that North Lincolnshire requires more specialist services for ASD/ADHD.

5. Acknowledgements

We would like to thank all organisation involved for distributing the survey and everyone who took part in the survey and provided us with information for the project.