

Executive Summary

A questionnaire was sent to 250 randomly selected patients, discharged within the last 6 months (prior to January 2014) from NSFT (Norfolk and Suffolk Foundation Trust), assessed as cluster 4 on the national payment by results framework. In total there were 49 responses submitted for this analysis including surveys and supporting letters.

The survey was divided up into three sections, asking questions on service awareness, patient experience and expectation and need.

The Service – Findings

- Healthcare professionals refer the majority of patients into this service.
- Approximately two thirds of patients describe their experience of accessing the service as satisfactory, while one third found it unsatisfactory. The main reason for dissatisfaction was long waiting times.
- Approximately two thirds of patients describe their experience of the service as satisfactory, while one third found it unsatisfactory. The main reason for dissatisfaction was a lack of support.
- Approximately two thirds of patients would recommend the service to a friend or member of the family.

Service Quality - Findings

- The following aspects of the service worked well; supportive and helpful staff; certain therapies (one to one and group); the venues (including home visits).
- The following aspects of the service did not work well; the administrative process including waiting times and communication; length of contact; particular staff; having to travel; and the delivery of certain group sessions.
- Additional comments reflected both satisfaction and dissatisfaction with the service; appreciation of the staff; and a preference for a specialist MH service.

5.3 The Future - Findings

- About two thirds of patients would prefer to be referred to the service by a health care professional (i.e. GP, Nurse, specialist doctor). The remaining third would like to be able to self refer.
- Additional feedback included the following;
 - Concerns about service funding
 - Concerns about the quality of the service provided
 - Waiting times being too long
 - The need for consistency in treatment – and follow up care.
 - The need for a holistic/joined up service
 - The need for a more localised mental health service
 - Gratitude for the care provided.

1 Background

A questionnaire was sent to 250 randomly selected patients, discharged within the last 6 months (prior to January 2014) from NSFT (Norfolk and Suffolk Foundation trust), assessed as cluster 4 on the national payment by results framework. In total there were 49 responses submitted for this analysis including surveys and supporting letters. All responses have been consolidated into this analysis.

2 Process and Outputs

A First Stage Analysis focuses on coding the responses to the survey questions. The Second Stage Analysis provides a summary of coded response sets organised into themes. The first and second stage analysis documents are working documents and may contain personal information. Therefore, these are not available to the public except on request. This final report has been drafted using the analysis and can be made available to the public as all personal or identifiable information has been removed.

In the survey respondents were asked two types of question ('rating' and 'open response'). These responses have been presented in the order they appear in the questionnaire.

This report has been written in the first person – that is, in the voice of the respondent using as far as possible the words and phrases of respondents. Text in *italics* is quoted directly from the feedback.

The themes with the most open-ended responses are discussed first followed by the next in descending order.

None of the views expressed are those of the author or any organisation for whom the author may work. Every attempt has been made to report the feedback provided for each of the respective questions, therefore there is some repetition.

3 The Service

3.1 Question 1

How did you hear about the Mental Health Services in Norfolk? *

Response

- 46 I was referred to this service by a health professional
- 1 Through the media
- 0 Via the internet
- 1 Word of mouth
- 2 Other (please specify)

* Some responses selected more than one option

The 'Other responses were *CADS* and *Doctors surgery*.

3.2 Question 2

How would you describe your experience with accessing this service?

Response

- 31 Satisfactory
- 15 Unsatisfactory
- 2 Unable to say
- 0 Not applicable

It took far too long and a while to; be seen; contact me; for the crisis team to respond. Ended up taking my husband to them. Could perhaps have been seen sooner. The referral process wasted valuable time and made my wait even longer. The waiting lists are so long. I could have been seen sooner because I was having suicidal thoughts at the time. Prompt response seems to be impossible as GP referrals seem to take a considerable amount of time to get to the necessary people so initial assessment is delayed and then the service user faces problems in getting seen. People often need immediate attention.

I wanted to refer myself because I was in need of help a long time ago. The service is so slow.

I was seen fairly quickly. Fortunately a Doctor noticed my date of birth and had me transferred to the geriatric services - from then on things took a major turn for the better. CRH, certainly far more than satisfactory in their care and treatment.

Poor treatment, inflexible, unable to service my mental health needs. After initial referral I was seen by a number of different people practically a new one each time. I felt there was a lack of support. Practitioner was useless - talked mainly about herself. Mental health team unable to support me any longer. Had to arrange support myself not easy when you are unwell.

Lack of communication between those involved in a persons care is also an issue. My GP referred me twice as the first one was lost! I was referred back and forth between mental health team and wellbeing services. Had to arrange to discharge from mental health team before I could have triage with WB team service.

Unsure - awaiting results from ATOS appeal

3.3 Question 3

How would you describe your experience of the mental health service?

Response

30	Satisfactory
14	Unsatisfactory
0	Unable to say
1	Not applicable

There is not enough support in place. I need more input from the team more often and maybe a lot more advice – the service is under resourced. I had to keep ringing to find out what was happening. The courses I was sent to did not help me. When I asked where I could get extra help I was referred to another health centre. Recently no help or support is available even when you have a genuine need. I think the mental health service is terrible. I have been waiting for 4 months and still waiting.

Those employed are doing a good job. My therapist managed to get me through a very dark time in my life.

3.4 Question 4

If you have experienced any part of this service, how likely would you be to recommend it to a friend or member of the family?

Response

16	Extremely likely
14	Likely
4	Neither likely nor unlikely
2	Unlikely
6	Extremely unlikely
2	Don't know

Comment;

I would never recommend NMH mental health service you're better off self harming or going private

3.5 The Service – Findings

- Healthcare professionals refer the majority of patients into this service.
- Approximately two thirds of patients describe their experience of accessing the service as satisfactory, while one third found it unsatisfactory. The main reason for dissatisfaction was long waiting times.
- Approximately two thirds of patients describe their experience of the service as satisfactory, while one third found it unsatisfactory. The main reason for dissatisfaction was a lack of support.
- Approximately two thirds of patients would recommend the service to a friend or member of the family.

4 Service Quality

4.1 Question 5

If you have experienced any part of the service, what did you think worked well about the service you received?

Response

The interest, helpfulness and behind the scenes actions taken. Initial contact good, prompt expert advice. I found it very helpful. Good passage through and guidance in the right path. Talking to different people. I was able to calm down, regain confidence, cope and start to believe I would get positive support. I could finally resolve and understand issues I had in my life.

Regular sessions and appointments that were on time. CBT worked a little bit on me - mindfulness instruction. The EMDR helped me.

I consider being in a group helped me as you do not think you are alone and it made me enjoy going there. Alternatively, one to one sessions with professional over a long period.

Staff were brilliant, their approach and commitment to their work was first class. They took the time to listen to me and help me through problems. I now seem easier to cope - thank you

The venue (e.g. hospital, Julian day centre) provided somewhere to relax and talk. Home visits worked very well - they worked to a time that suited me. The help I received from MHN SD at home and via the telephone. One particular member of staff was useless.

4.2 Question 6

If you have experienced any part of the service, what did you feel did not work well about the service you received?

Response

Nothing works! So much Bloody Paperwork, referrals waiting times - took too long to get help and advice The service provided seemed able enough but was unsuccessful - very poor service. I feel disempowered and my MH has deteriorated as I have been passed from pillar to post and not had any real success regarding outcome. I have very little confidence in it.

Everything - I don't think there were enough sessions. I was told to discharge when still in need of service. I had to ask to go back. Treatment is given without a diagnosis. Counselling didn't work with my problem.

I found that there was nothing that did not work out well for me - it all worked well

Too long waiting times between referral and assessment and then care. Urgent referrals taking weeks to see anyone. Getting support early on when I really needed it ... the waiting is ridiculous - having to wait weeks for appointments.

The crisis team are very unhelpful. Staff were late and often cancelled; it was all about her. Being changed to another person when not being listened to. A lack of staffing.

Difficult and impossible accessing service when they don't seem to have records passed forward to them promptly from the mental health team. Lots of stupid hoops to jump through before you can get treatment or see the person with the answers. Confiding in someone you feel suicidal or want to hurt yourself takes a lot of courage.

I had to organise my own discharge from MH team even though they had stopped providing me with help. My referral being lost TWICE, me having to chase it and being classed as did not attend!!

Poor communication i.e. none. Trying to get through to department trying to change appointment when ill and the message not getting through. Not communicating right - asking more questions. Lack of communication between professional bodies.

Aftercare or lack of it - lack of contact over the past year.

Had to travel to Kings Lynn as no beds in Norwich. Patient was overdosed on medication.

Group session poorly run no real talk just a lot of reading that was not fully explained. Poor venue extremely cold.

4.3 Question 7

Is there anything else you would like to share with us relating to your experience with the service?

Response

Very good help once diagnosed - excellent service could not fault it.

If I could afford to go privately, I would because being let down by this service nearly cost me my life. Lack of meetings - lack of staffing. When it was localised it was more responsive and I felt more confident with it as I knew who I was talking to and there was more chance/ hope of a quicker resolution. I need continued support not just medication.

Don't get rid of staff. I felt the tutors, were very professional and very understanding and made the courses work very well. All the staff are very efficient and supportive with my needs they are doing a good job.

A member of the team was out of order in regards to personal matters and my family.

I still want to be helped by a psychiatrist. GP's are really very unhelpful and a waste of time for proper mental health problems. There needs to be a GP equivalent for mental health problems.

Move to a centralised service i.e. GP referral to Hellesdon hospital has made it feel cumbersome.

I feel sorry for anyone else having to use it.

4.4 Service Quality Findings

- The following aspects of the service worked well; supportive and helpful staff; certain therapies (one to one and group); the venues (including home visits).
- The following aspects of the service did not work well; the administrative process including waiting times and communication; length of contact; particular staff; having to travel and the delivery of certain group sessions.
- Additional comments reflected both satisfaction and dissatisfaction with the service; appreciation of the staff; and a preference for a specialist MH service.

5 The Future

5.1 Question 8

Based on your experience, how would you prefer people access this service in the future?

Response

- 14 Self referral
- 28 GP referral
- 7 Specialist doctor referral
- 2 Nurse referral

Other (Please specify)

Don't bother

I believe self-referral is a very good option as I believe referring yourself helps your self-esteem. GP referral took too long, also didn't get referred until I said I felt suicidal. Long waiting - if you have mental health problems being able to speak to a professional immediately - people sometimes need help fast. Self-referral if already known to the service- at least otherwise GP has the option.

GP referral is better as they get things done very quick as they know the right channels to go through. After talking to the doctor he made the decision that I needed mental health care.

I think it would be beneficial to someone with a chronic mental health problem to be referred to you by the MH team directly and not be given a sheet of paper to look at and by chance see your service. After all we are obviously in a bad state of mind to sought out help for ourselves.

Just get rid of this so called service and give people vouchers to get private treatment that they want when they want

My doctor referred me to the Julian - I need help but have not heard anything. Good cooperation is needed.

Our problem was we had no knowledge of the service and our own doctor did not refer to the Hellesdon service. We were left not knowing what to do.

At my surgery I have GP's that take mental illness seriously and others that don't. The most important factor in successful treatment is consistency. Being transferred to a different specialist is traumatic each time it occurs. The patient has to dig down to

and re visit problems which have already been dealt with. This can be very painful. At least I would have my specialist at the hospital.

5.2 Question 9

Anything else you want to tell us?

Response

Don't cut funding as it is more costly if not addressed at the early stage. Why did they close the Julian - it's much needed it helped me a lot? I have been with the mental health services for over a decade and am very disappointed with the help available now (very limited if any) as opposed to when I was initially referred. More and more people need help in the community yet there is very little out there.

I would never want to use this service again. My GP was more helpful. The crisis team are unbelievably rude, I phoned for help and they said "What do you want me to do I have enough caseloads" absolutely appalling. People should learn to look for signs of suicide and self harm and have more understanding of the complexity of cases as people can get worse fast. It is also important that the professional is a person who speaks clearly. I have had difficulties with a couple of doctors who had strong accents and were hard to understand.

Waiting times to access help are too long. I was literally desperate; felt suicidal and cut myself, yet I had to wait 12 weeks for treatment to begin and this only happened as I contacted the therapist in desperation myself. Still waiting to see someone.

Having a personal support worker who could consistently be involved in your treatment would be ideal even after discharge being able to contact someone like that to say I am not coping is what I feel I need. I have had severe chronic depressive episodes during the past year, made worse by the lack of follow up contact from yourselves, I continue to need support.

Essential to have an overview of care to see all that can be done is being done. I also suffer from Epilepsy so I was having psychosomatic seizures - one of the GP's at my local practice - told me to get on with it. If it wasn't for [staff member] I would not be alive today.

It is disgusting that I am going to have to travel to Kings Lynn for treatment - it's not even close. Norwich is where my appointment started and should continue there. Norfolk and Suffolk are two separate counties and each should have their own. You can't combine them too many people.

I just want to convey my sincere gratitude for the help and support of the wellbeing service. Thank you very much.

5.3 The Future - Findings

- About two thirds of patients would prefer to be referred to the service by a health care professional (i.e. GP, Nurse, specialist doctor). The remaining third would like to be able to self refer.
- Additional feedback included the following;
 - Concerns about service funding
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 - Waiting times being too long
 - The need for consistency in treatment – and follow up care.

The need for a holistic/joined up service
The need for a more localised mental health service
Gratitude for the care provided.

6 Report Outcomes

This report has been developed independently using the feedback provide. All queries concerning this report can be forwarded to the author. All further correspondence should be forwarded to the Wellbeing service.



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