

**Healthwatch Leicester and Healthwatch Leicestershire**

**Accessing Mental Health Services during Crisis**

**June 2020**

DRAFT

## Introduction

Healthwatch Leicester and Healthwatch Leicestershire is the independent voice of the public on health and social care services. We collect feedback from the public about their experiences of using health and social care services and use that feedback to work with service providers and commissioners to find ways to improve services. One of the ways that we collect feedback is by carrying out focused projects as part of our annual workplan. This proposal sets out our plans for how we will carry out one of our identified projects.

Accessing Mental Health services when a patient is approaching or in a Mental Health crisis, is a key part of NHS services for those who need them. We know through patient feedback (*Unable to access MH services*) and stakeholder feedback (*MH A&E attendance*) that patients find it difficult to know where to go or that patients don't present through existing channels. There are also concerns about the quality of the service received. There is a perception that the service is focused exclusively on risk and that there is not enough attention given to treatment and recovery. Looking at publicly available data, Adult Mental Services are one of the most complained about services at the Leicestershire Partnership NHS Trust.

The Youth Advisory Board of the Leicestershire Partnership NHS Trust felt that it was an important topic to look at because as soon as young people transition between child and adolescent Mental Health Services into adult mental health crisis services the service they receive dramatically changes.

Due to current issues (Covid-19 impact on MH) and the changes to the way patients access Crisis Care (LPT SOP) including self-referral and a change in crisis support at Leicester's Accident and Emergency department for people in crisis we have decided to more clearly understand the patient knowledge and experience of using Crisis Mental Health services.

## Aims and objectives

This work will aim to collect patient and public knowledge of how to access Mental Health Crisis support care and their experience of accessing, using and discharge from Mental Health Crisis support (also looking to understand any experience with the recently launched Mental Health referral phonenumber and the changed offer of support at the Leicester Royal Infirmary).

We will look to -

- Understand how well patients/carer/public understand how to access Crisis support
- Gain an understanding of what changes are being proposed in the near future to crisis services and what the patient/carer view is on this
- Capture the patient/carer/public experience of –
  - Accessing Crisis support services
  - Using Crisis support services (ie LPT Referral service)
  - Discharge from Crisis support services
- Highlight good practice and positive patient and carer experience
- Highlight common patient and carer experience themes
- Highlight evidenced recommendation

### **What the project is not about-**

- **This is not a review of Child and Adolescent Mental Health services- these have been looked into as part of another review carried out by Healthwatch**
- **We will not be looking at rape crisis services or drug and alcohol crisis services**

### **Proposed method of feedback collection**

To try to capture a wide response around general knowledge of Mental Health Crisis services and the specific lived examples of those accessing Mental Health Crisis services. We will be using a mixed methodology of –

- Surveys – This will be developed with HAB member Mark Farmer (HAB MH lead) and in discussion with MH providers LPT and key commissioners.
- 1-2-1 interviews with patients/carers – due to the sensitive nature of what will be discussed, we want to allow a private way for members of the public to share their experience and thoughts.
- Look at best practice crisis services elsewhere and compare to the local offer

Some of the ways we will try to ensure that get a wide ranging and diverse range of people will be to:

- Run a drop session at the recovery café at The Bradgate Unit
- Have a stall about the review at The Bradgate Unit giving people the opportunity to complete the survey online through using our own tablets to fill out the survey online Get theme-based feedback and data from mental health VCS including LAMP and the Adhar project about themes around what their service users experience.
- Run drop-in sessions in Community Mental Health settings, for example, at the Hawthorn Centre at Coalville and at the Charnwood service based at Loughborough hospitals

Reach out to our diverse communities by running sessions at venues where they come together.

### **Target population**

During this project, the focus will be on Adults Mental Health (That is 18 years old and over) however our survey will allow Children and Young people to respond.

Interview subjects will be recruited through open communication and through partnership with our partners in the public, voluntary and community sectors we will ask them to promote the review and our evidence gathering.

### **Project output**

Public report showing finding and thematic analysis of results, showing -

- public awareness of MH crisis services
- Evidence of lived experience of accessing MH Crisis services
- Recommendations based on lived experience

Presentation of report to -

- LPT Board
- City and County Council – Health Overview and Scrutiny
- Mental Health Partnership Board for the city.
- Mental Health Executive Board that covers the city and county.
- The People’s Council at LPT
- The Board of UHL (because of the crisis services provided by LPT at UHL , particularly given the link between people going to A and E for a mental health crisis )

Executive Summary press release on report findings.

### Communication plan

May – July 2020– Initial priority agreement with HAB members and project development with HAB lead. Discussion with key stakeholders LPT/CCG and MH VCS contacts.

August - Social media and overall media sharing survey links and encouraging individual Interviewee to register their interest. Promote via a press release.

September - Social media and overall media sharing survey links and encouraging individual Interviewee to register their interest.

October - sharing initial findings with key stakeholders. Seek comments for inclusion to report.

November - Press release to media contacts with report summary and links to report. Report added to website and uploaded to HWE library.

### Project timetable

Task	Responsible	Allocated hours	Due date
Project proposal agreed	HAB/LHM	3.5 hrs	June 2020
Project initiation meeting	HAB lead /LHM	5hrs	July 2020
Question design	HAB lead/LHM/COL lead	3 hrs	July 2020
Recruitment	COL Lead	Tbc	August 2020
Engagement	COL Lead	Tbc	Sept 2020
Analysis	Senior Analyst	15 hrs	15 <sup>th</sup> Oct 2020
Report writing	COL Lead/HAB lead/LHM	15 hrs	31 <sup>st</sup> Oct 2020
Circulation of draft report	LHM/COL lead	2hrs	9 <sup>th</sup> November
HAB report signoff	Chair/HAB members	1 hr	November HAB meeting
Report publication	LHM	2 hrs	End of November