



Children and Young People  
Transformation Plan - Consultation  
Report Feb - Apr 16



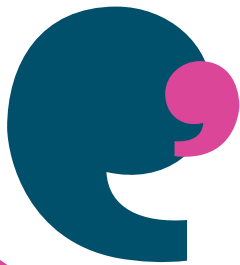
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**DARLINGTON  
BOROUGH COUNCIL**

**NHS**  
Darlington  
Clinical Commissioning Group





# Future In Mind

## Promoting, protecting and improving our children and young people's mental health and wellbeing

The Children and Young People's Mental Health and Wellbeing Taskforce was set up in September 2014 to consider how to make it easier for children, young people, parents and carers to get help and support when they need it and to improve the help that is offered.

The topics that were covered include:

- Helping children and young people stay mentally well (building resilience) tackling problems early to prevent them getting worse and taking action quickly if they do.
- Making it easier to get support that works. Care for the most needy young people.
- Services doing things openly and honestly.



- Having the right people in the right place at the right time in the workforce.

In March 2015 the Department of Health and NHS England produced a report called 'Future In Mind'.

The report details the reasons that change is necessary and sets out ambitions for what we hope to see by 2020.

To make the changes happen the Taskforce believe children and young people should be involved in making decisions about their services, along with the people who support and care for them.

The document can be found at [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/414024/Childrens\\_Mental\\_Health.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/414024/Childrens_Mental_Health.pdf)







# LOCAL TRANSFORMATION PLAN

In 2015 Darlington Borough Council (DBC) and NHS Darlington Clinical Commissioning Group (CCG) produced a local Children and Young People's Mental Health and Wellbeing Transformation Plan for 2015-2020.

The plan is about promoting, protecting and improving children and young people's mental health and wellbeing.

The plan sets out priorities for Darlington based on feedback from children, young people and families and work is beginning towards delivering those aims.

The aim of the plan is to make it easier for children and young people and their parents and carers to access help and support when needed and to improve mental health services for children and young people.

Project areas from the plan include:

Improving public awareness and understanding.

Preventing mental ill-health in schools and the community.

Improving access to support for parent/carer and child

relationships.

Improving information about what to do and where to go for support.

Improving access to care and support designed by children that works, and better support for young people moving into adult services.

Crisis support to be available whatever the time of day or night, in a safe and suitable place and close to home.

Develop mental health support and services for the most vulnerable.

Reducing complicated arrangements through joint working to provide easy access to the right support around the needs of children, young people and families.

Clearer information about levels of investment into children and young people's mental health services.

Sustaining a culture of continuous service improvement delivered by a workforce with the right mix of knowledge, skills and experience.

<http://www.darlingtonccg.nhs.uk/wp-content/uploads/2014/11/Darlington-Transformation-Plan-2015-2020.pdf>



# What is Healthwatch Darlington?



We believe, no matter who you are, where you live or how old you are. You do have a voice and you have the right for that voice to be heard.



**Healthwatch Darlington helps you and your family get the best out of Health and Social Care services in Darlington.**



Healthwatch Darlington is a charitable company limited by guarantee which makes us a totally independent organisation. We raise your views and opinions on Health and Social Care in Darlington and help make your voices heard.

Healthwatch Darlington is representative of diverse communities.

Healthwatch Darlington's vision and mission focuses our work on what needs to be achieved to improve Health and Social Care services for local people.

What we do:

- Enable local voices to influence the delivery of local Health and Social Care services
- Use local volunteers to gather views and experiences from local people



## Tell us your experience of local Health and Social Care

GPs and Practices - Dentists - Mental Health Services - Hospitals -  
Opticians - Nursing Homes - Care Agencies - Pharmacists -  
Community Health Services - Carers Services - Children and

- Involve and engage local people, putting YOU at the heart of Health and Social Care service decision making
- Enable local people to make informed choices about their own, their families and friends' Health and Social Care
- Influence the way services are planned, designed, commissioned and delivered
- Have strong relationships with Health and Social Care providers as a critical friend using community views to influence and improve planning and delivery of services
- Provide information, advice and support about local services and signpost to them



**We are independent and powerful, we make Health and Social Care providers answerable to the people who use their services.**

**We can help you to find the right services you need through our Information and signposting services**

**We have the power to Enter and View - to go and see for ourselves**

**We tell providers what YOU**

**Tell us your views and enable us to influence change and improve Health and Social Care in Darlington**





# Context and Background





### Introduction

Darlington Borough Council (DBC) and Darlington Clinical Commissioning Group (CCG) contacted Healthwatch Darlington (HWD) to help gather feedback from Children and Young People (CYP), Parents and Carers, and give them the opportunity to contribute to the development of the future mental health provision for children and young people in Darlington.

The Transformation Plan provides a framework to improve the emotional wellbeing and mental health of all children and young people across Darlington, and to make it easier to access help and support when needed and improve these services for CYP. *DBC and NHS Darlington Clinical Commissioning Group - Children and Young People's Mental Health and Wellbeing Transformation Plan 2015-2020*

### Aims, Objectives and Scope of Work

HWD undertook this project work over a three month period in two proposed Stages, as an independent organisation to gather feedback from current and potential service users; CYP, parents, carers, vulnerable and at risk populations, e.g. looked after children, disabled children and youth offenders, and relevant stakeholders, using a combination of qualitative and quantitative methods.

Aims of the consultation and engagement included the identification of the preferred type of peer support for CYP and an understanding of how Apps and digital media can be used to support positive mental health in CYP.

Feedback will include patient experience of current services, both positive and negative, with identification of what works well





and what does not, and from people needing to access services.

HWD's consultation and engagement included the following:

- Preparation of a project timeline, Action Plan and Risk Assessment.
- We planned to conduct 4 targeted focus groups with a cross section of the demographic of current and potential service users; CYP, Parents, Carers, vulnerable and at most risk population; and a minimum of 5 participants at each group.
- The design of appropriate Questionnaires in conjunction with DBC and partners to use in consultation with all groups and appropriate service providers, approved by the Implementation Group.
- We were asked to aim for 100 completed questionnaires from the targeted groups, social media, and other engagement activities.

- We used Survey Monkey to support participation in consultation
- Face to Face consultation and visits to schools, colleges and other appropriate venues.
- Patient stories or case studies identified where appropriate that measure the impacts of services on service users.

## Methodology

### Our Target Audience

The teams at HWD spoke to CYP, their parents and carers at various venues across Darlington.

### Our Approach

We used surveys co-designed by Healthwatch Darlington, CYP and the Implementation Group.

We chatted in person, to individuals and actively promoted the online survey via email and social media.

We spoke to people during focus groups arranged by Healthwatch





Darlington.

HWD gathered information and evidence.

Completed individual questionnaires on a 1:1 basis with CYP and their parents and carers.

Completed individual surveys online.

Input all data onto Survey Monkey.

The approach was a simple but direct way of gaining views and opinions.

### Questionnaire/Individual Interviews

We found that each of the questionnaires worked well to gather statistical information needed to evaluate the impact the new pilot initiatives had on the patients. The questionnaires were tailored for those spoken to face to face and those completing online.

The consultation was overtaken over a period of 10 weeks.

### KPIs and success measures

We were tasked with completing at least 100 questionnaires with a minimum of 20 people chatting to us face to face during focus groups.

Consultation was conducted with Children & Young People (CYP), Parents & Carers and key stakeholders between February 2016 and April 2016, using a mixed-method approach combining focus groups, online and hard-copy surveys, interviews, parent and carer forums, off-site visits to schools, colleges, youth groups, children's centres, housing groups, networks and community groups. The Stakeholder Consultation List can be located in *Appendix 1*.

During the consultation period, 228 surveys were completed by CYP, 34 completed by Parents & Carers and 68 completed by key stakeholders.

# CHILDREN AND YOUNG PEOPLES FINDINGS





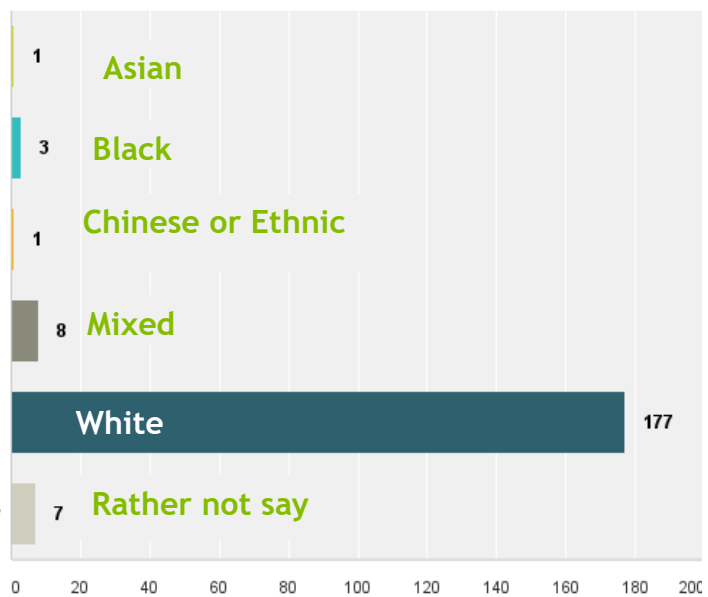
Healthwatch Darlington staff consulted with the following groups and individuals: (Focus groups have been highlighted in GREEN with number of attendees)

- DAD Young Leaders - Carers
- DAD Darlington Parent Carer Forum—Meeting with CAMHS (7)
- Foundation Housing - Young Parents & families
- DISC - Young Carers
- DISC - Family Information Event (6)
- BME Focus Groups - Parent, CYP, 121's, Surveys
- Parent Carer Forum
- Queen Elizabeth College - Make a Difference Event
- Darlington College - The Gateway Room
- Home Hospital Teaching Service (HHTS) (12)
- Top Deck Youth Club (20)
- Meadholme Residential Home (1:1)
- Stepping Stones (6)
- Rise Carr Youth Club (22)
- YMCA (Cooking night) (13)
- GADD Young Group (13-19 year olds) (7)
- Red Hall Youth Club (20)
- McNay Children's Centre - Young Mothers Group (5)
- Auton House Residential Home (St Cuthbert's Care) (3)
- Rise Carr College - Head of pastoral
- Café JJ (3)
- Carmel College - Head of Pastoral
- Jewish Congregation members
- Baha'i Community members
- One Stop Shop
- Family Help
- Muslim Community Members
- Learning & Skills Centre
- Sikh Gurudwara Temple members
- Children Centres
- Bondgate Church (Drop in for QE Students) DACYM
- KeyRing Support (Learning Support Group for Disabilities)
- Foundation (Support Young Mothers)
- N.E. Sikh Services - Cloud Singh
- Healthwatch Darlington Newsletters
- Darlington Organisations Together (DOT) Network members
- Darlington Learning Impairment Network
- Darlington Ageing Well Network
- Darlington Mental Health Network

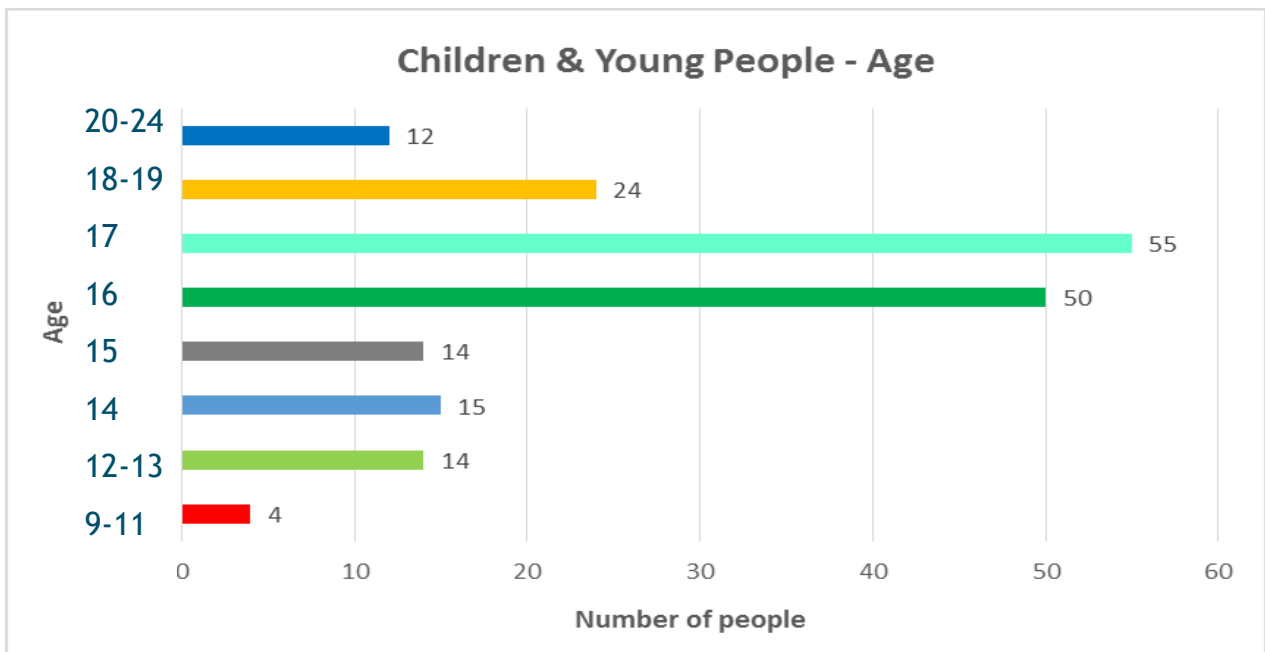
# EQUAL OPPORTUNITIES BREAKDOWN

## Ethnicity

Answered: 197 Skipped: 33

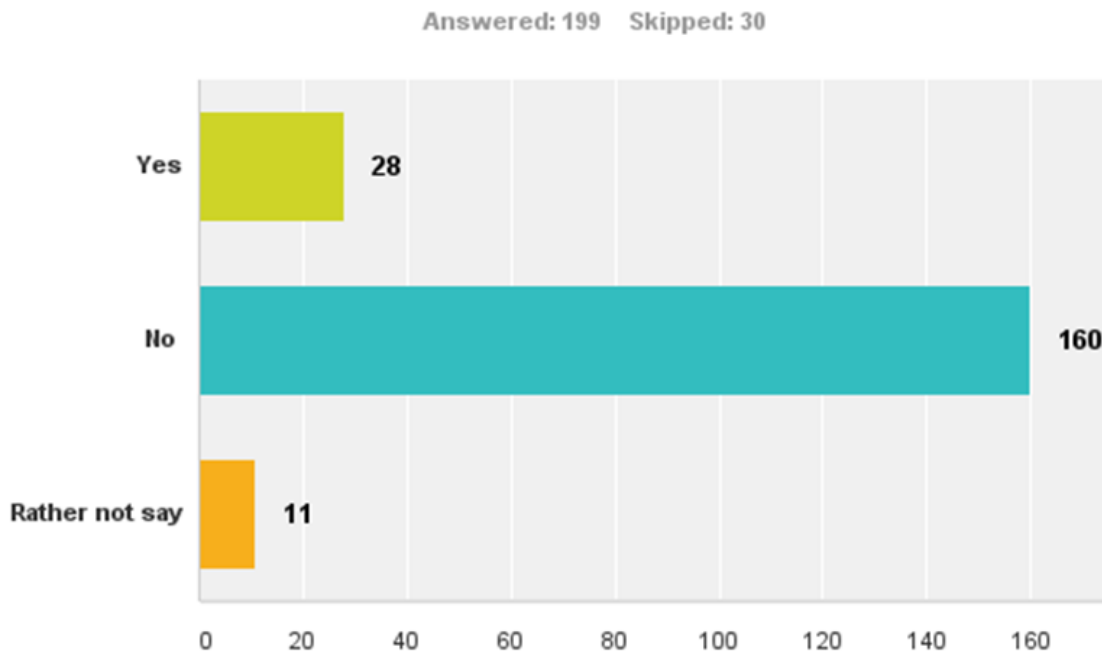


## Age Breakdown

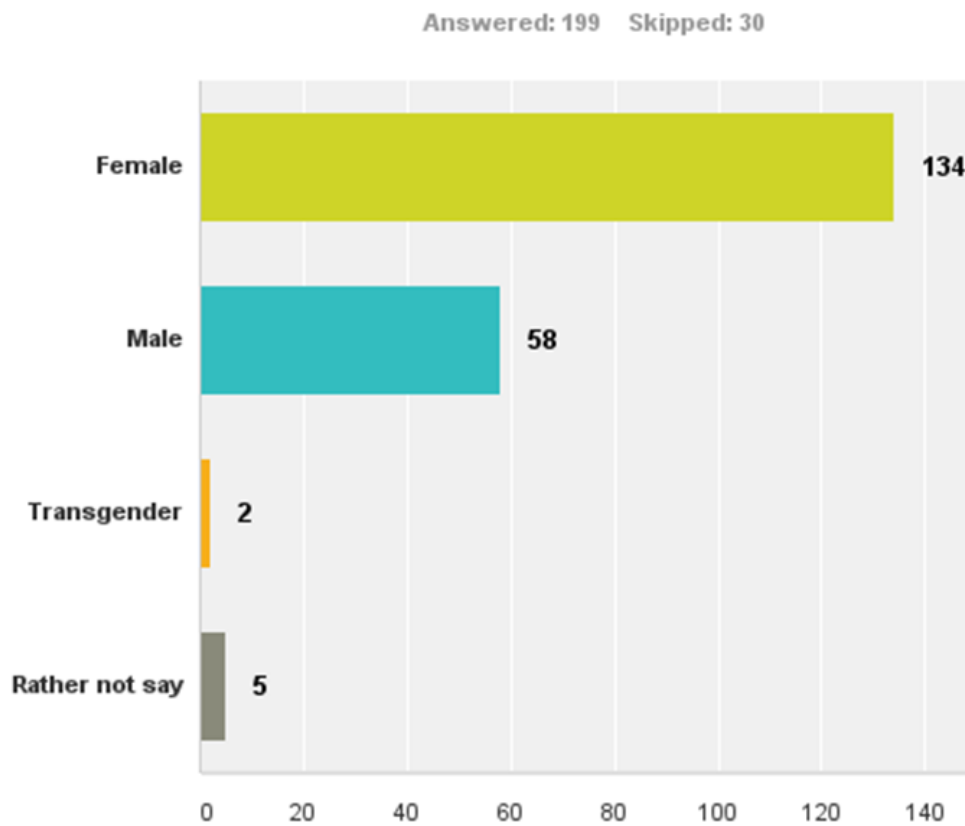




## Disability



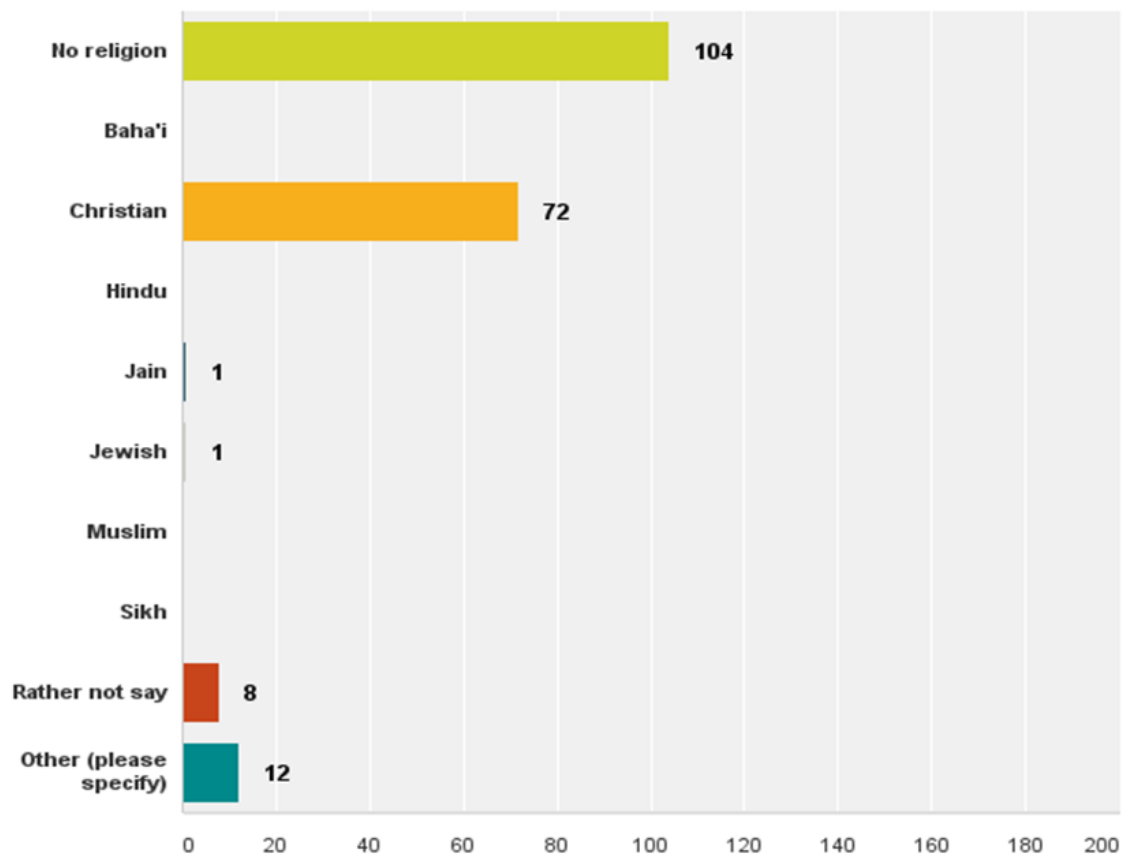
## Gender



# EQUAL OPPORTUNITIES BREAKDOWN

## Religion

Answered: 198 Skipped: 31



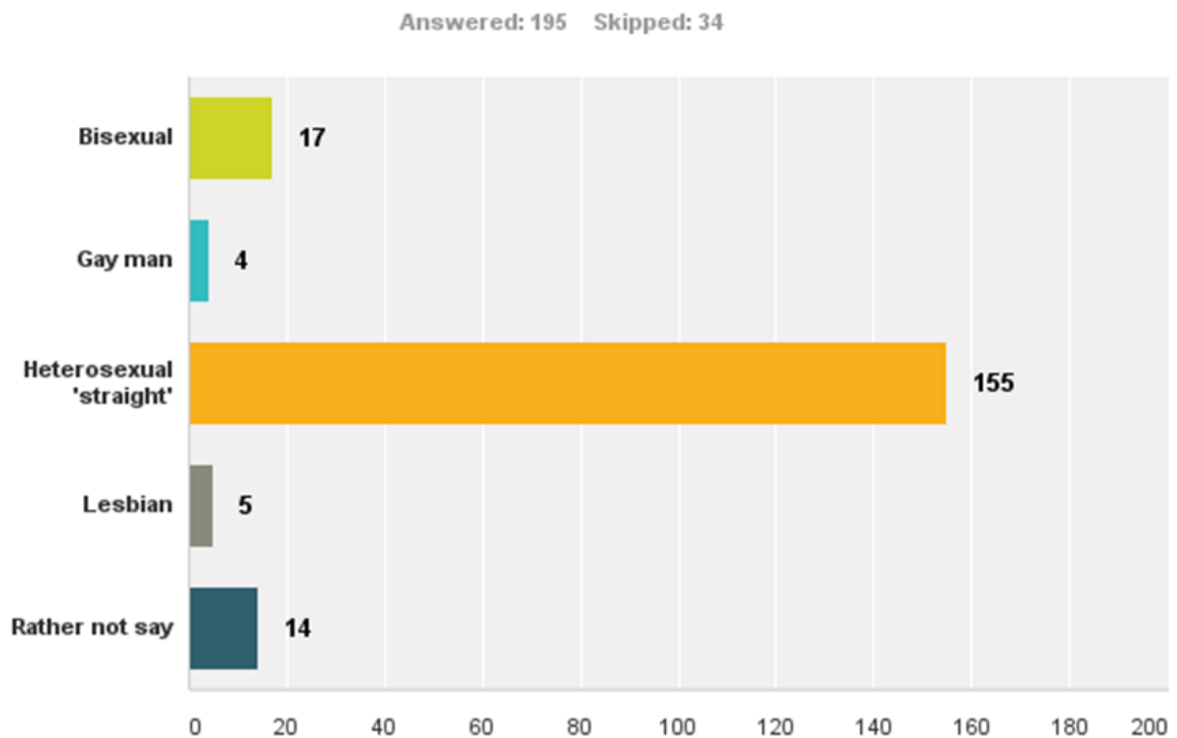
Other responses were:

Catholic - Satanist - Wiccan - Jedi - Theist - Pagan - Buddhist -  
Atheist - Mormon - None of them



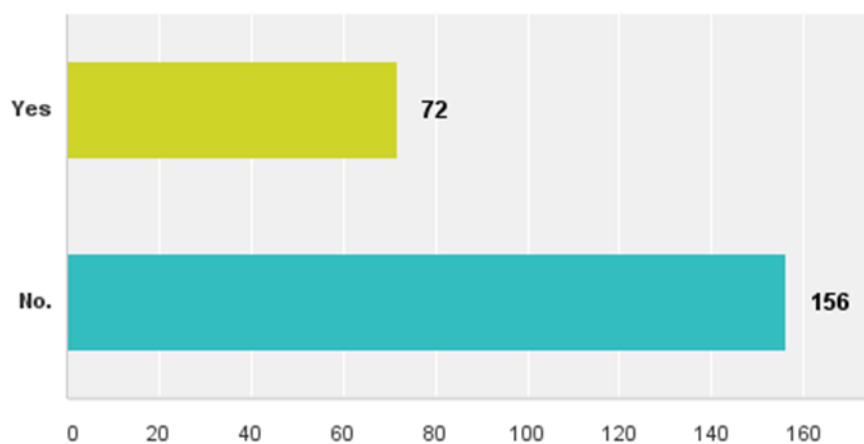


## Sexual Orientation



**227 Questionnaires were completed in total by Children and Young People between the ages of 9-24.**

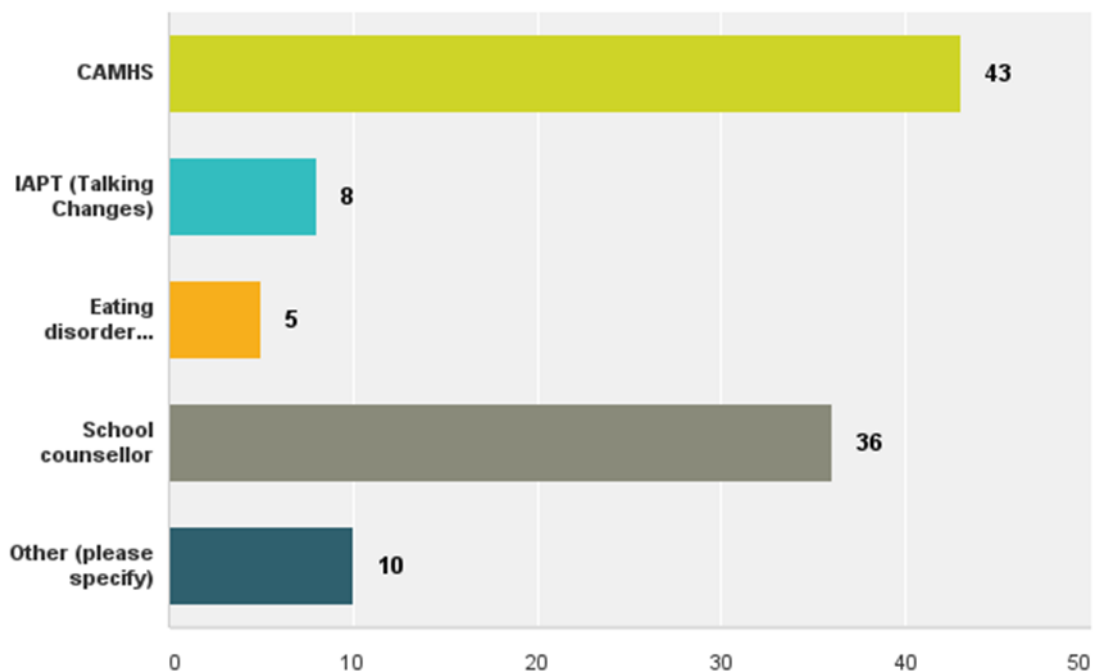
Of those young people who answered this question, 72 were currently accessing mental health services and 156 were not.



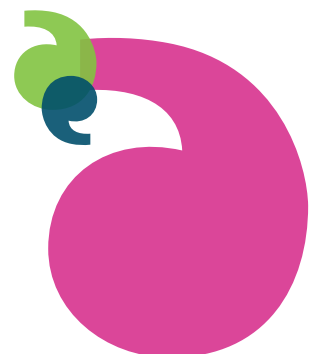
# CYP FEEDBACK

## What services were young people using?

Answered: 76 Skipped: 154



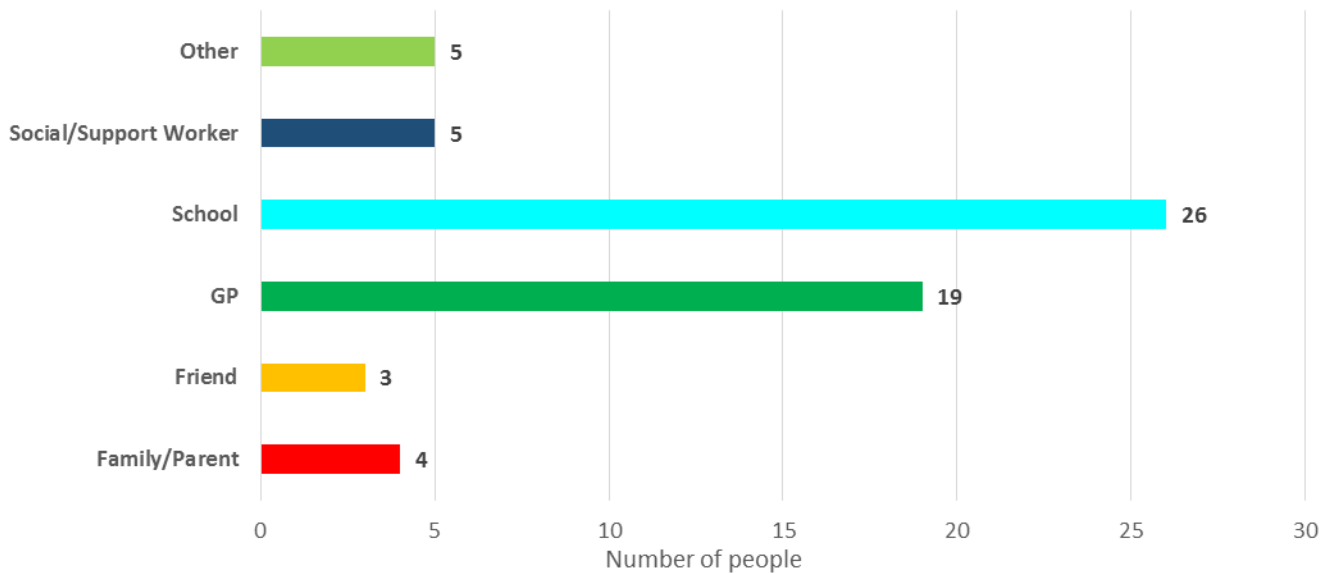
Other services being accessed were Community Nursing, Mind Exercise Nutrition (MEND), GP, Tavistock (Gender Reassignment), and Psychologist.





## How were Children and Young People hearing about the services?

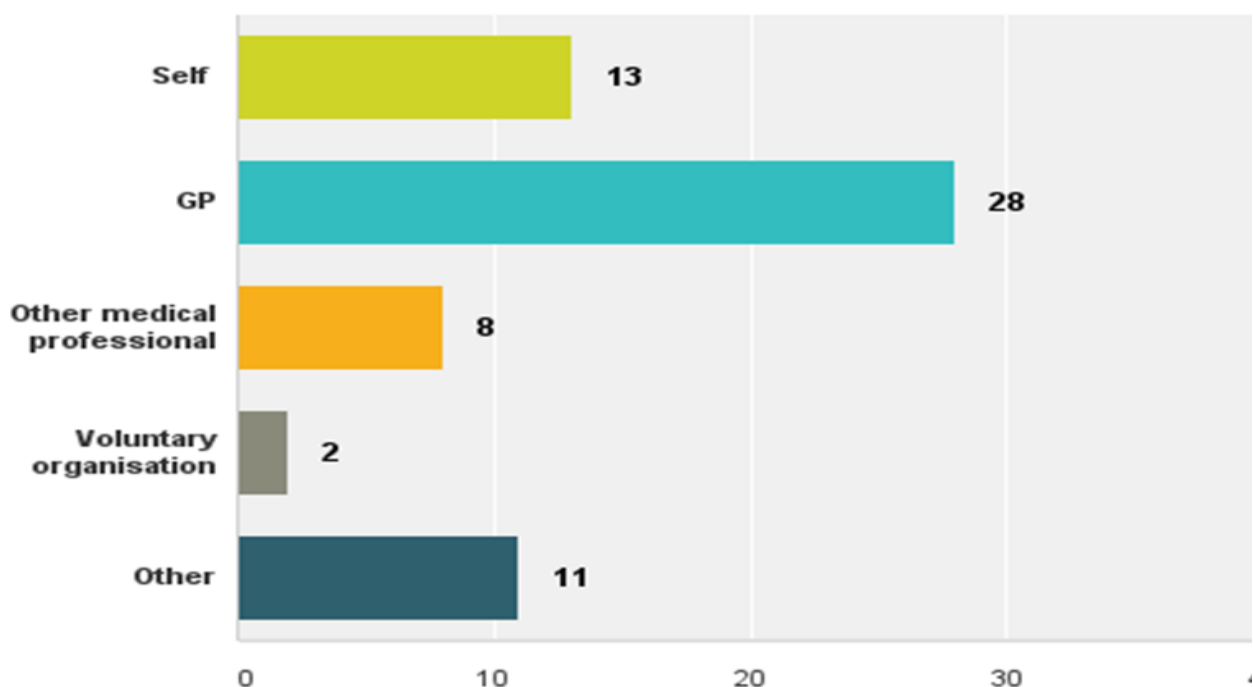
Answered: 62 Skipped: 168



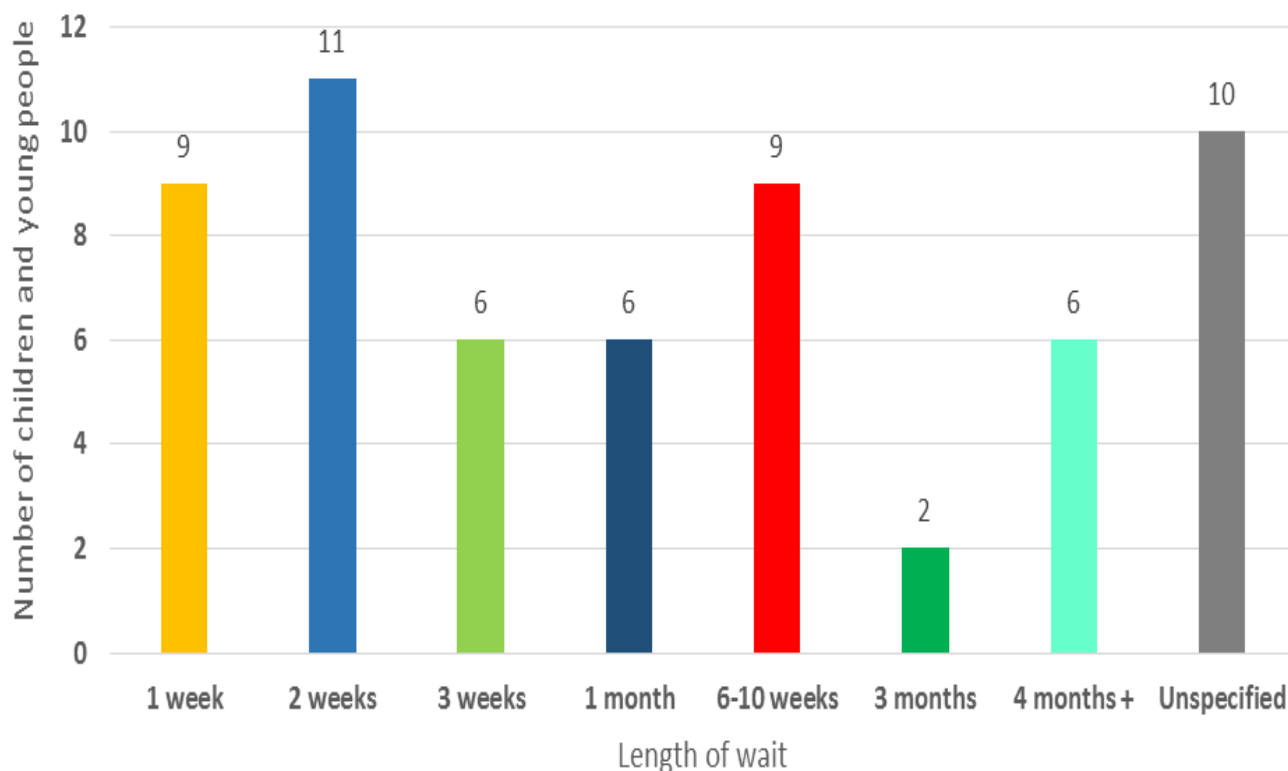
Other people described being told about the service but did not specify who they were told by, 1 person was told by the hospital and another had used google internet search engine.

## How were young people referred into the services?

Answered: 62 Skipped: 168



## Roughly how many weeks did you have to wait between referral to accessing the service?



“About a year until I was settled into the correct service”

CAMHS - Straight away

“I would have been waiting 6 weeks but I got an emergency appointment after 2.”

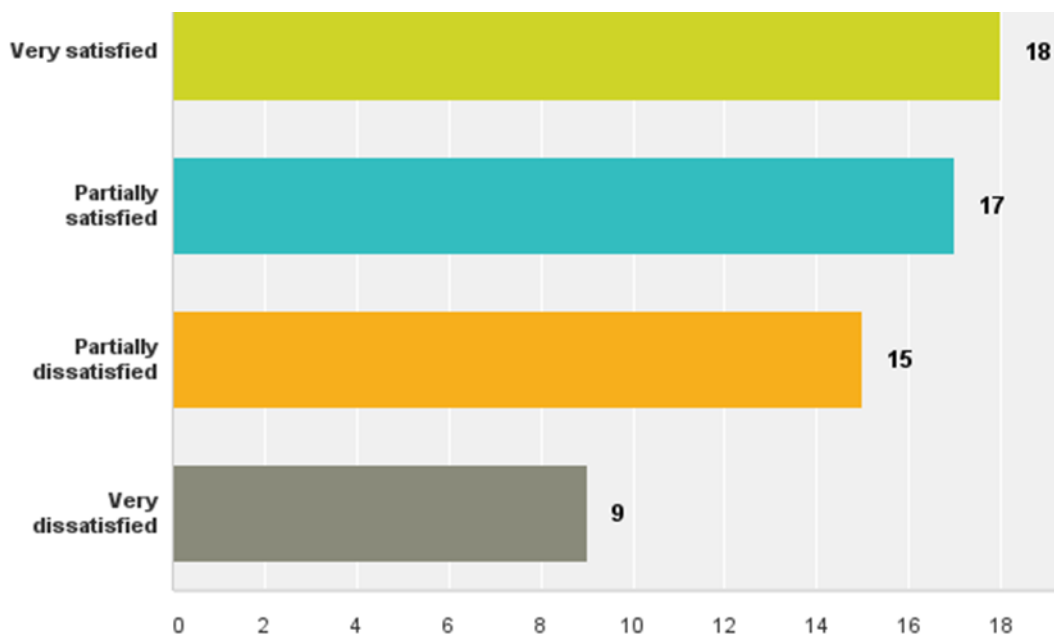


## In the time in between being referred and accessing the service how satisfied were you with the following?

Answered: 61 Skipped: 168

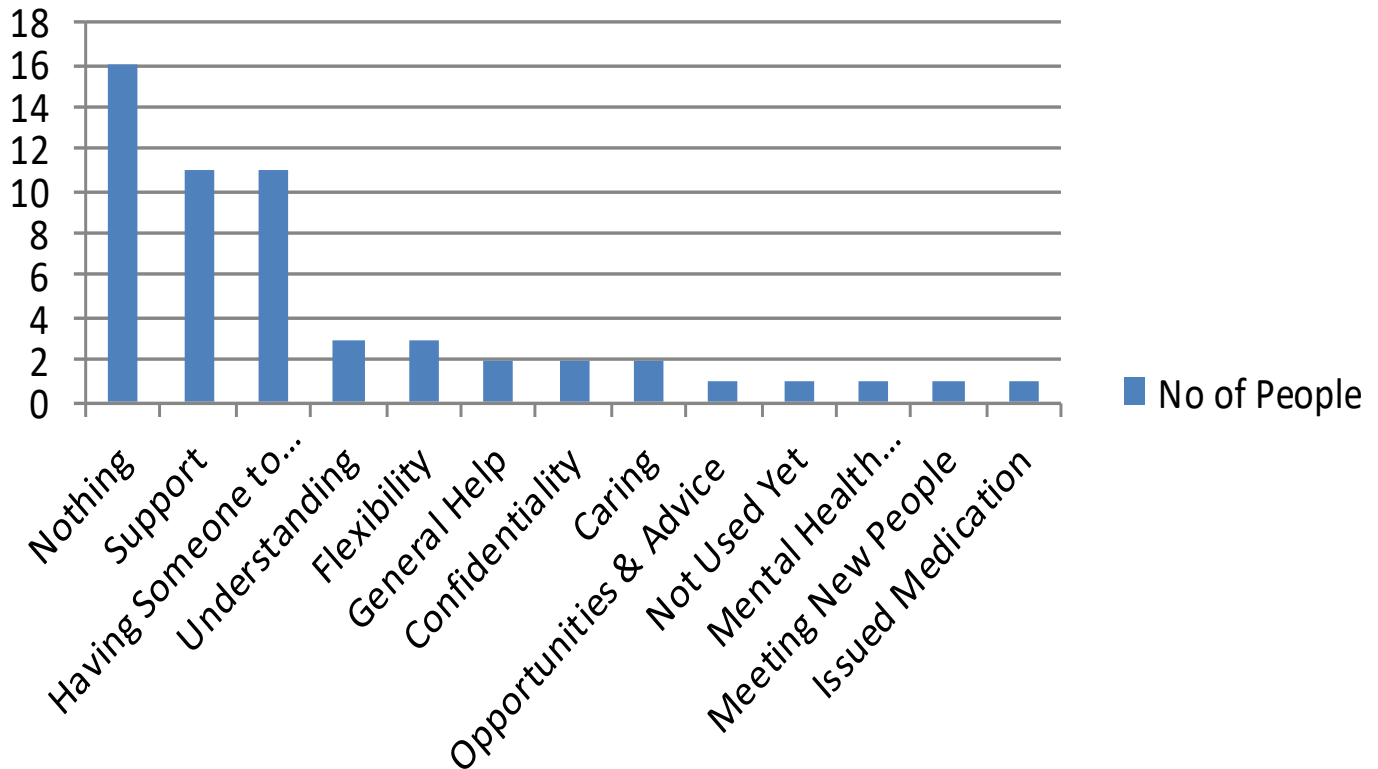


## While using the service how satisfied were you with how responsive the service was to your needs and circumstances?





## What was good about the service?



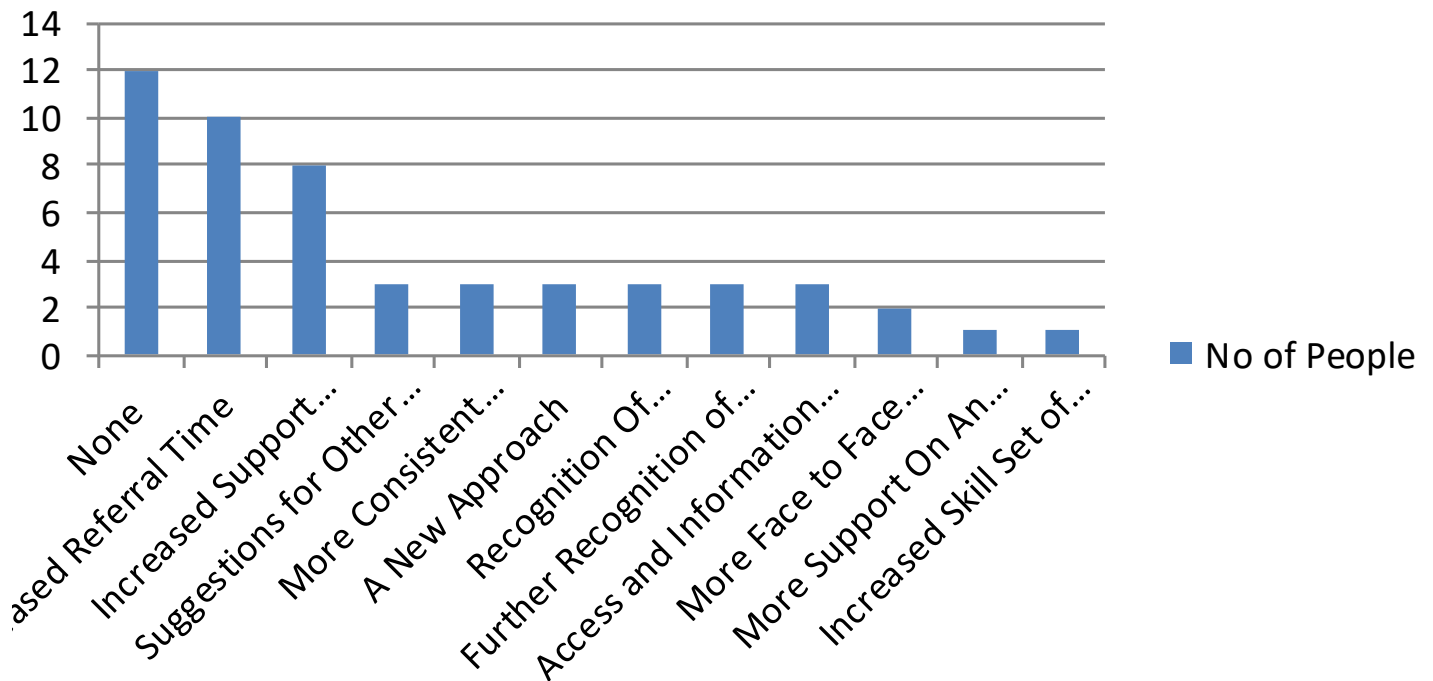
What was good about the service?	No of People
Nothing	16
Support	11
Having Someone to Listen	11
Understanding	3
Flexibility	3
General Help	2
Confidentiality	2
Caring	2
Opportunities & Advice	1
Not Used Yet	1
Mental Health Assessment	1
Meeting New People	1
Issued Medication	1







## Do you have any suggestions for improvements?

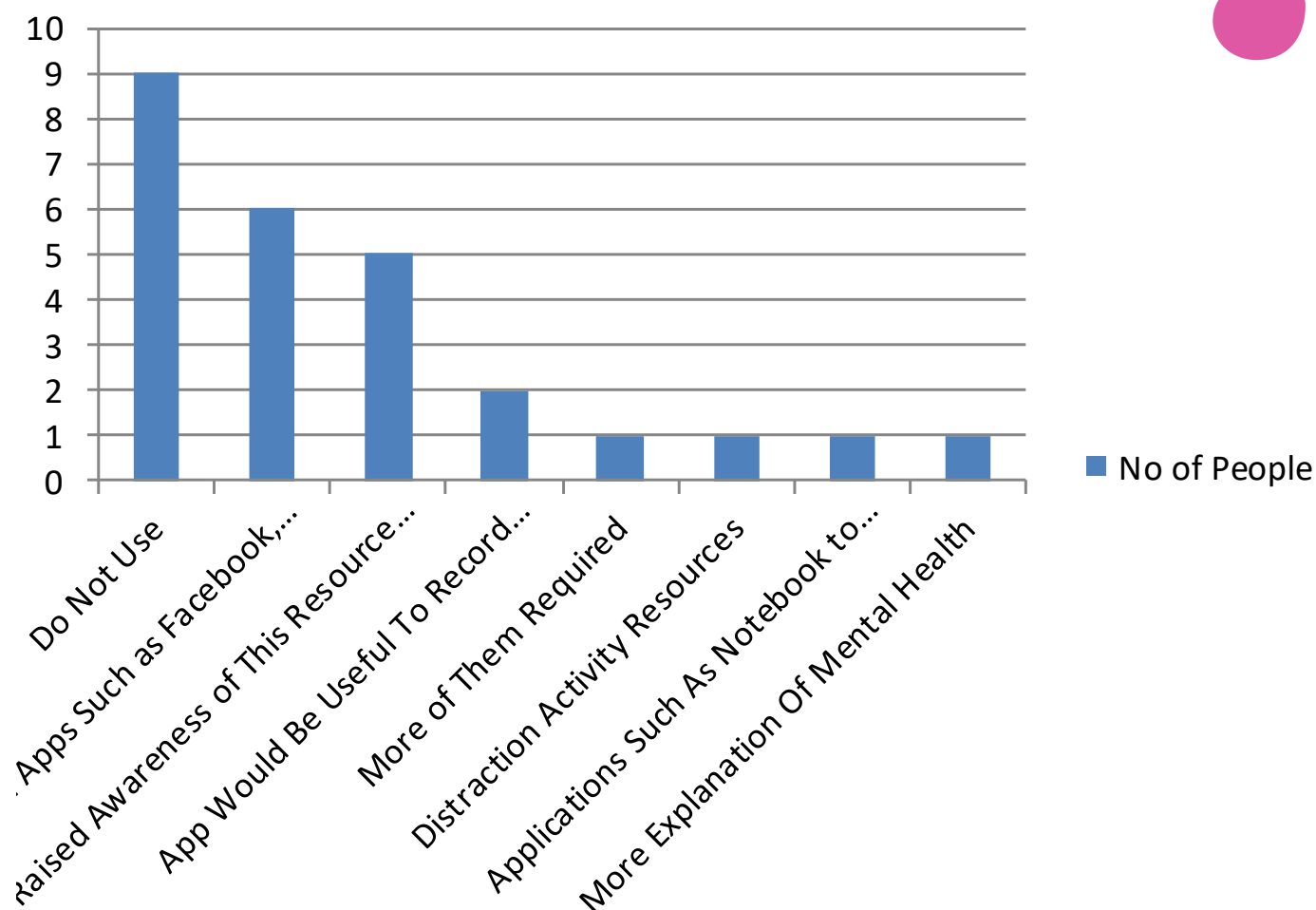


Suggestions for Improvements	No of People
None	12
Decreased Referral Time	10
Increased Support Outside of Sessions	8
Suggestions for Other Helpful Services	3
More Consistent Regular Appointment Scheme	3
A New Approach	3
Recognition Of Contributing Factors to Problems	3
Further Recognition of Issues Being Listened To	3
Access and Information on Self Help	3
More Face to Face Services	2
More Support On An Urgent Basis	1
Increased Skill Set of Staff	1





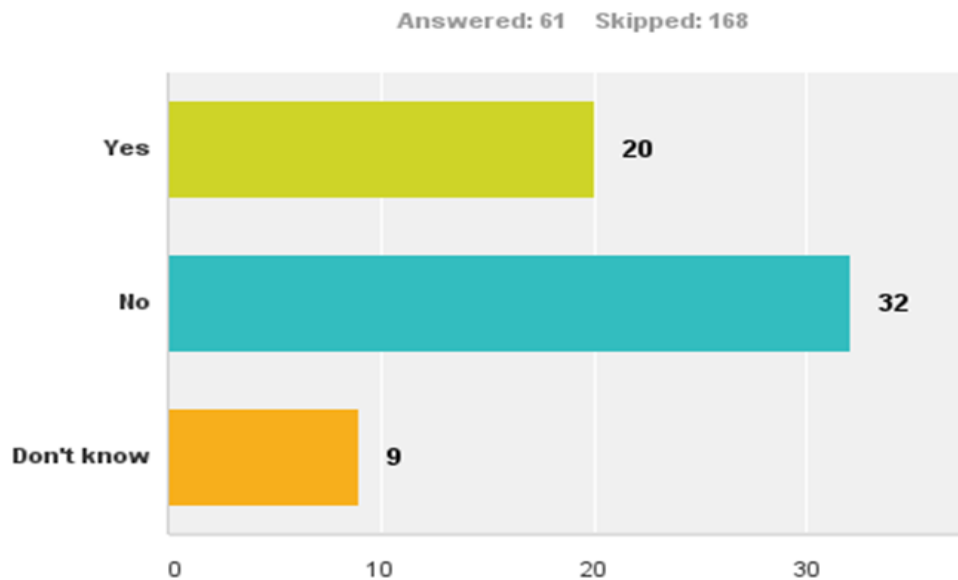




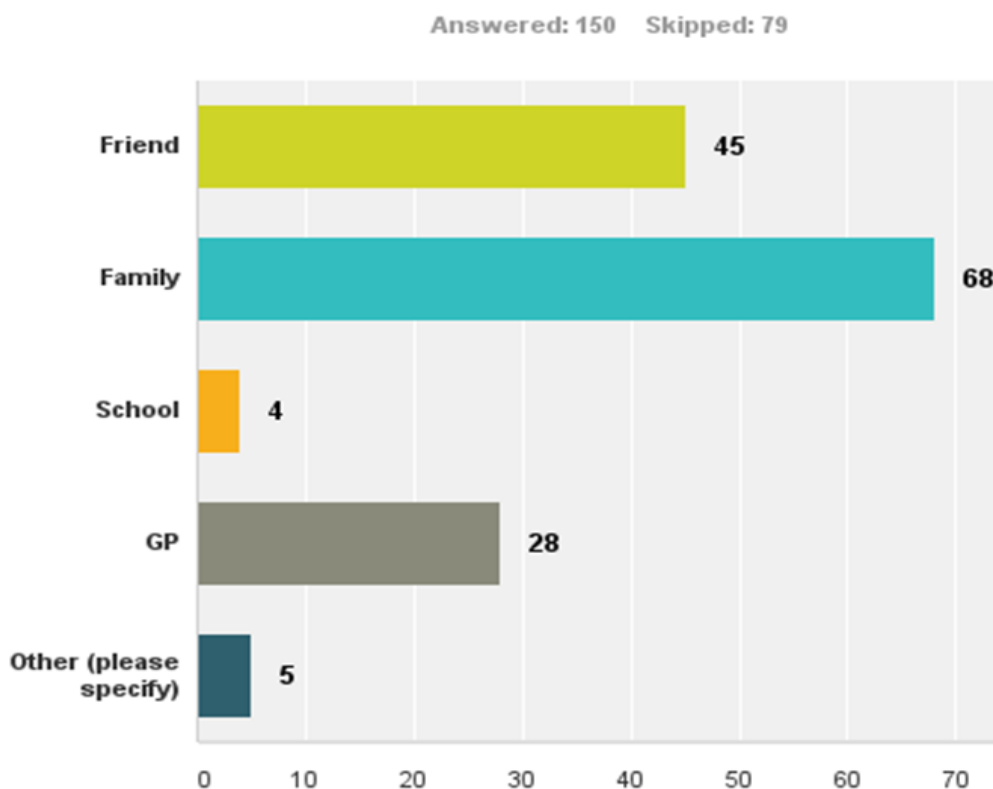
Do you Currently Use Apps or Social media to Support or Improve Your Mental Health? If So What is Missing?	No of People
Do Not Use	9
General Apps Such as Facebook, Instagram and Youtube as Distraction	6
Raised Awareness of This Resource Required	5
App Would Be Useful To Record mood	2
More of Them Required	1
Distraction Activity Resources	1
Applications Such As Notebook to Vent	1
More Explanation Of Mental Health	1



## Do you think there is enough support and information on mental health in schools and colleges?



## If you needed some advice on mental health, who would you ask?

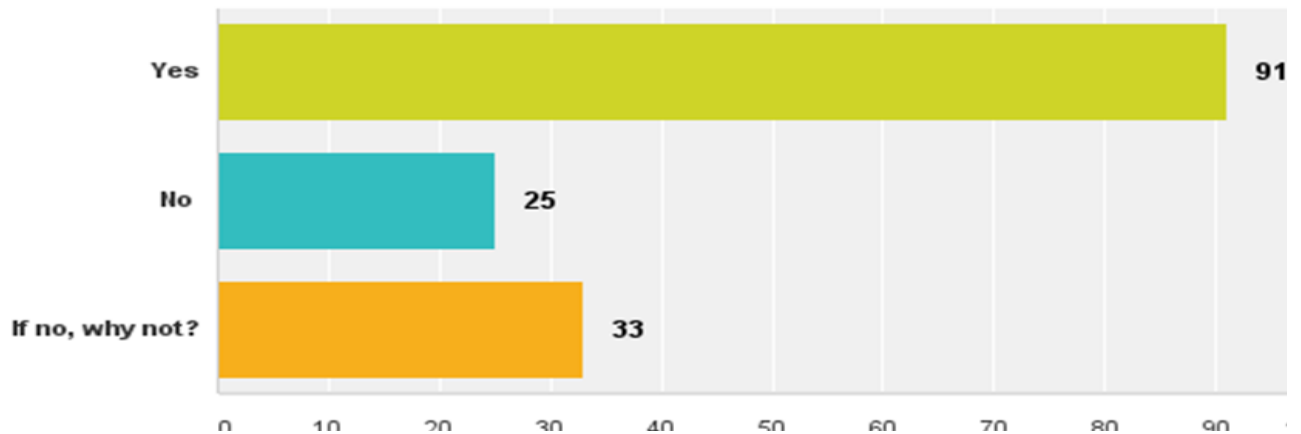






# Would you feel comfortable telling people you were using mental health services?

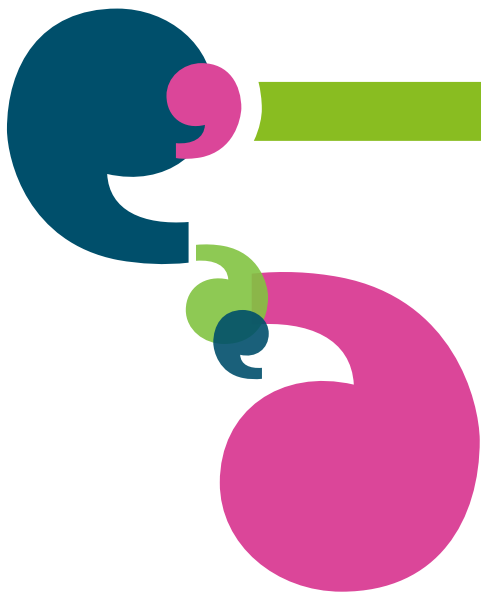
Answered: 149 Skipped: 80



If no, why not?



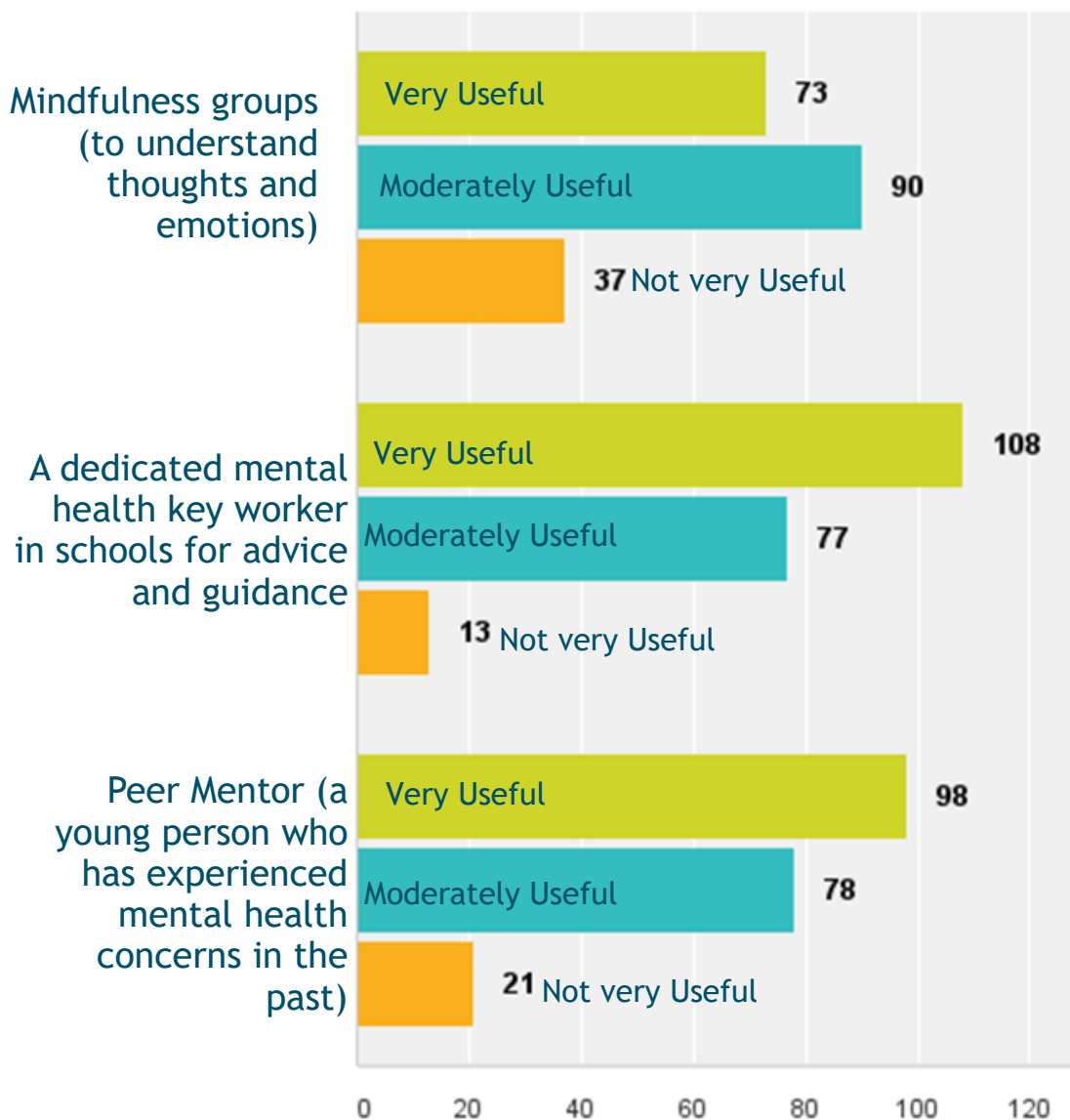
Would You Feel Comfortable Telling People You Were Using Mental Health Services, If No Why?	No of People
Lack of Understanding or Judgement	9
Fear of Bullying	4
Insecurities	4
Embarassment	3
It is Personal	3
Negative Stigma Around Mental Health	3
Don't Want to Share With People	3
Lack of Trust In Others	2
Would Share if I Felt More Comfortable	1

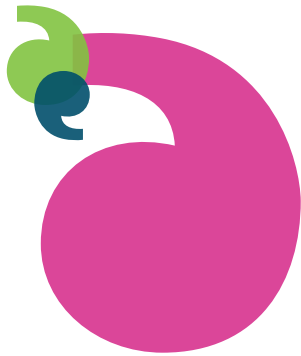


# CYP FINDINGS

How useful would the following things be in supporting your mental health in school or college?

Answered: 200 Skipped: 27

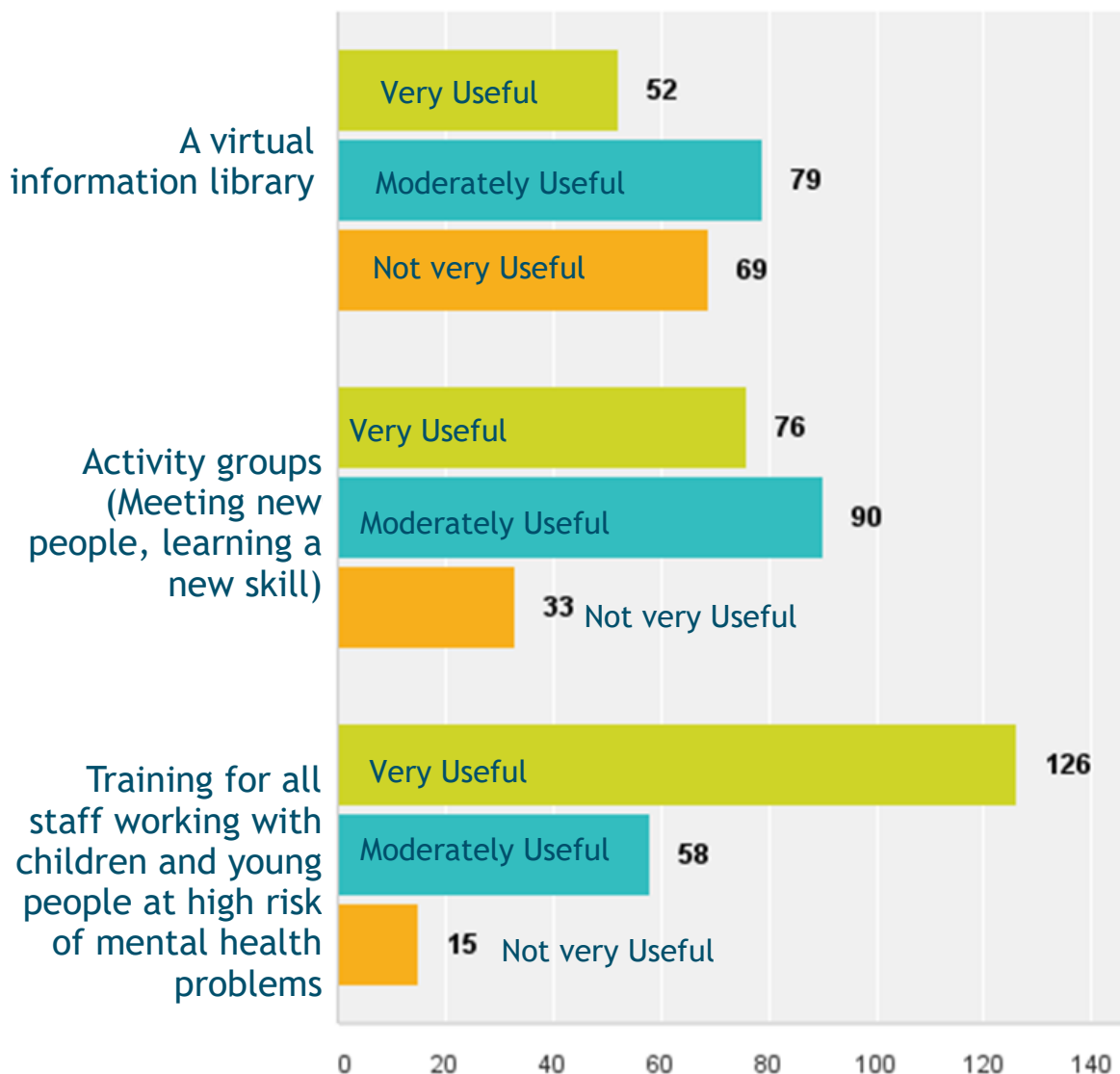




# MENTAL HEALTH SUPPORT

How useful would the following in supporting and improving your mental health?

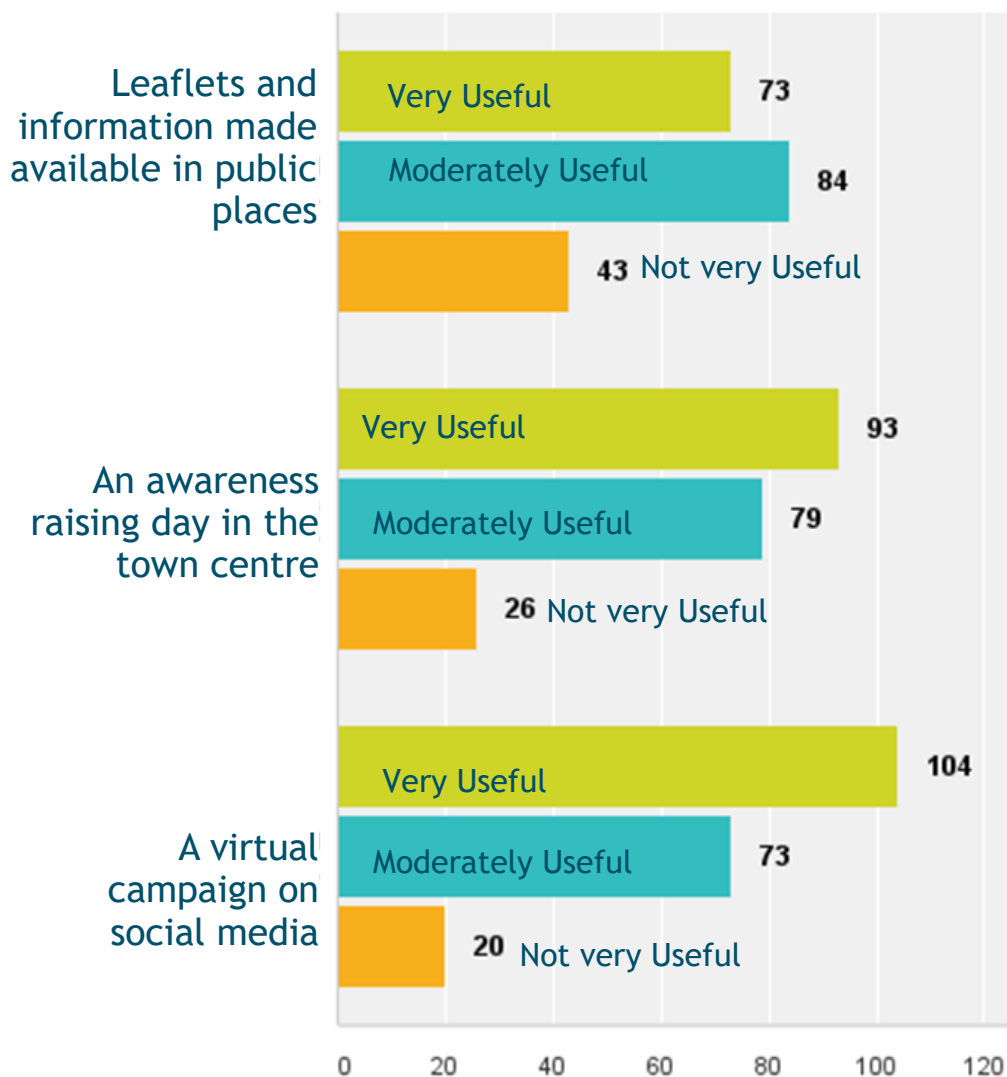
Answered: 201 Skipped: 26





## How useful would these options be in reducing negative attitudes towards individuals and groups with mental health problems?

Answered: 200 Skipped: 27



“Giving young people options around their support. I didn't want my Mam in the room when I was speaking but they said they had to stay in the room. I felt embarrassed talking about my ordeal and couldn't really tell everything as it upset me and didn't want to upset my mam. I also asked for a female but never got one.”

**Do you have any other suggestions on how we can improve and support good mental health for children and young people in Darlington?**



Improve CAMHS services!

Awareness.

You could have more mental health sessions in schools and colleges. for example sessions talking about what the signs are of mental health and talk about what it is.

people in Darlington could be made more aware of mental health so they might know what they can do to help someone who could have mental health issues.

Someone to talk to when I am upset and lonely.

Do more eating disorder groups as it is now based in Aycliffe and is harder to get too. More raising awareness. I don't want people

to think differently of me and think I'm not capable.

Making the people known as ill rather than dodgy because of their MH. People tend to think its weird and treat you differently - campaigns would be good!

PEOPLE.

Someone there 24hrs a day to talk to.

More support groups.

Let people know it is fine to have mental health.

More information because I have not got a clue about mental health.

More peer mentors to relate to. They would listen to them more.

More people to realise what anxiety is!

More awareness.

Make people more aware of different mental health issues.



Make CAHMS more welcoming!!

Give people more options in what they want to access/ not access.

More support whilst waiting to be seen.

Be less rubbish.

Taught in school.

Giving young people options around their support. I didn't want my Mam in the room when I was speaking but they said they had to stay in the room. I felt embarrassed talking about my ordeal and couldn't really tell everything as it upset me and didn't want to upset my mam. I also asked for a female but never got one.

Deal with the problems which are causing poor mental health; home environment, school pressures and social media.

By making it more well known to reduce stigma, such as compulsory lessons in schools etc.

Educate them.

Simply to tell people there is help available. Many people do not know there are services such as CAMHS, that are there to help.

More services for young people with or at risk of mental health and more advertisement of these services, I don't know about any service available for people with mental health and if I don't it may be the fact they don't either.

More information available on how to deal with mental health and education/information on mental health issues.

More information

More awareness around MH

Everyone might have a mental illness at one point in their life. Do not Judge!!

Teach idiots that mental health problems DO exist

Don't keep it hidden/out of sight!

Let them be aware its normal to have mental health issues. More awareness in schools. Teach it as part as curriculum.

Why have long waiting times, people need to see them sooner

**MORE AWARENESS!**

I think more info everywhere to make people realize more of it

Don't know as haven't had to

A landline you can ring, anytime to talk for advice.

There is nothing out there for kids. More activities would help my child but there is nothing about that would get him out of the bedroom. I feel helpless. We need more support. To see your child like this is heart-breaking, more needs to be done for someone with mental health.

I have been bullied for my problems.



## SUGGESTIONS FOR IMPROVEMENTS

Other people just don't understand.  
Needs more awareness!!

Explain what MH is to people so they understand.

Get a group of people and talk about the issue, especially in schools.

I have seen my friend get bullied and its awful. They need teaching about feelings of other people. Raise awareness so they don't get bullied.

Have people from mental health groups come into schools to talk to children!

Having more groups where people in the same situation can be themselves without people laughing at them for being different. I feel like there is nothing.

Teachers more knowledge.

A couple of my friends have mental health issues and I hear them say they are always waiting to see people for support. They don't rate their services very good!

Talk more openly with people. (MH Service)

I haven't seen any information/ leaflets, so more of them.

Mental Health awareness days.

Letting people know what's out there for people.

One to one counselling.

Needs to be more understanding of different illnesses and ways to cope with them.

More help and information to help me realize what it is I have.

I haven't needed support but mates have. I think there is no information for them. I haven't seen any around school.

Waiting times.

More awareness - Facebook advertising.

More awareness.

Setting up for events to support mental health for children and advertising around more.

Learn more about it in schools.

I'm not really sure but you need something to grab teens attention , most don't really pay attention about things as such .

Extra support in school/awareness.

Link in with other groups.





# PARENT/CARER FINDINGS





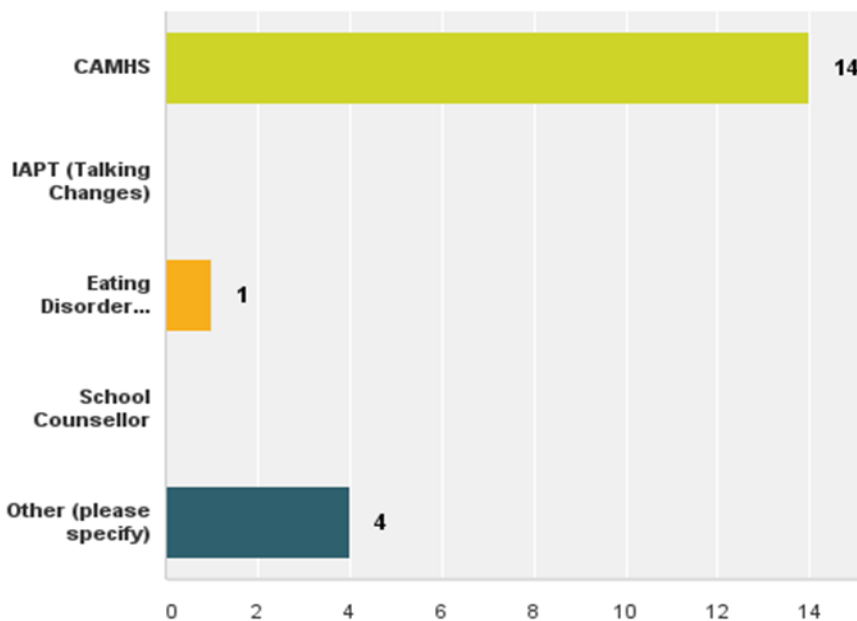
# PARENT/CARER FEEDBACK

34 Questionnaires were completed by parents/carers of a young person in Darlington.

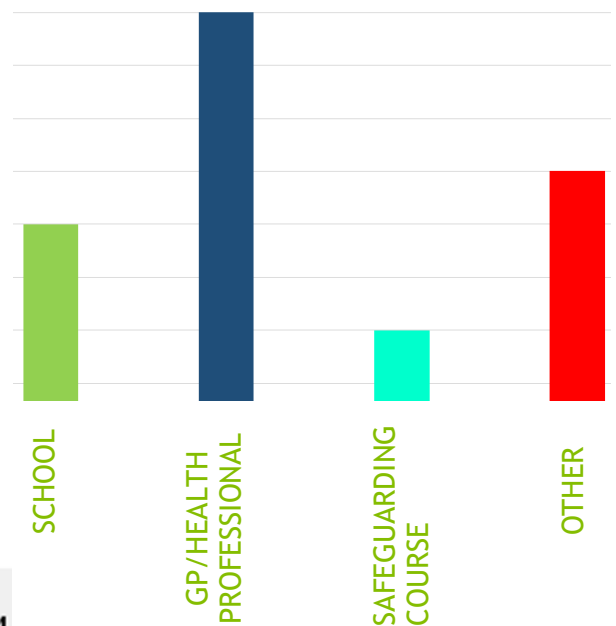
Of those parents/carers 25 people are or have been supporting a young person accessing mental health services.

## Which services have they used?

Answered: 19 Skipped: 16



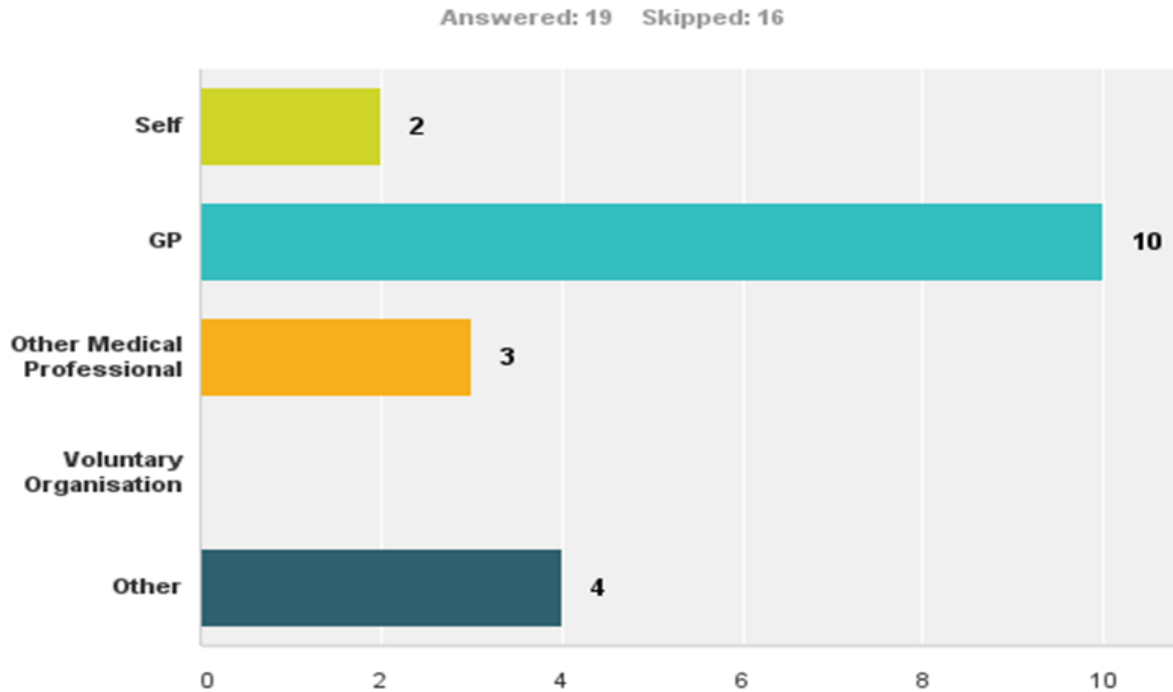
## How did you first find out about the service?



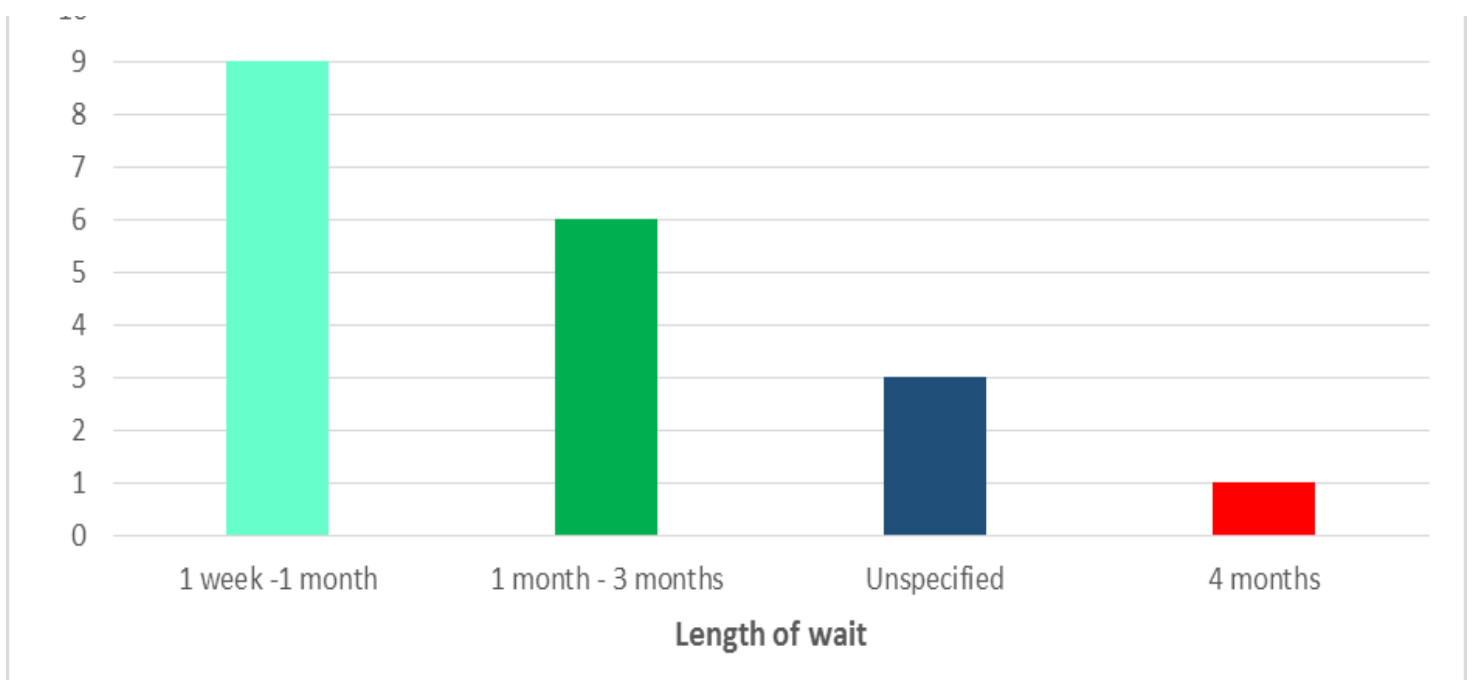
Other options stated were ongoing issues, paid consultant, adoption preparation training and referred via CAMHS.



## How was the child/young person referred into the service?

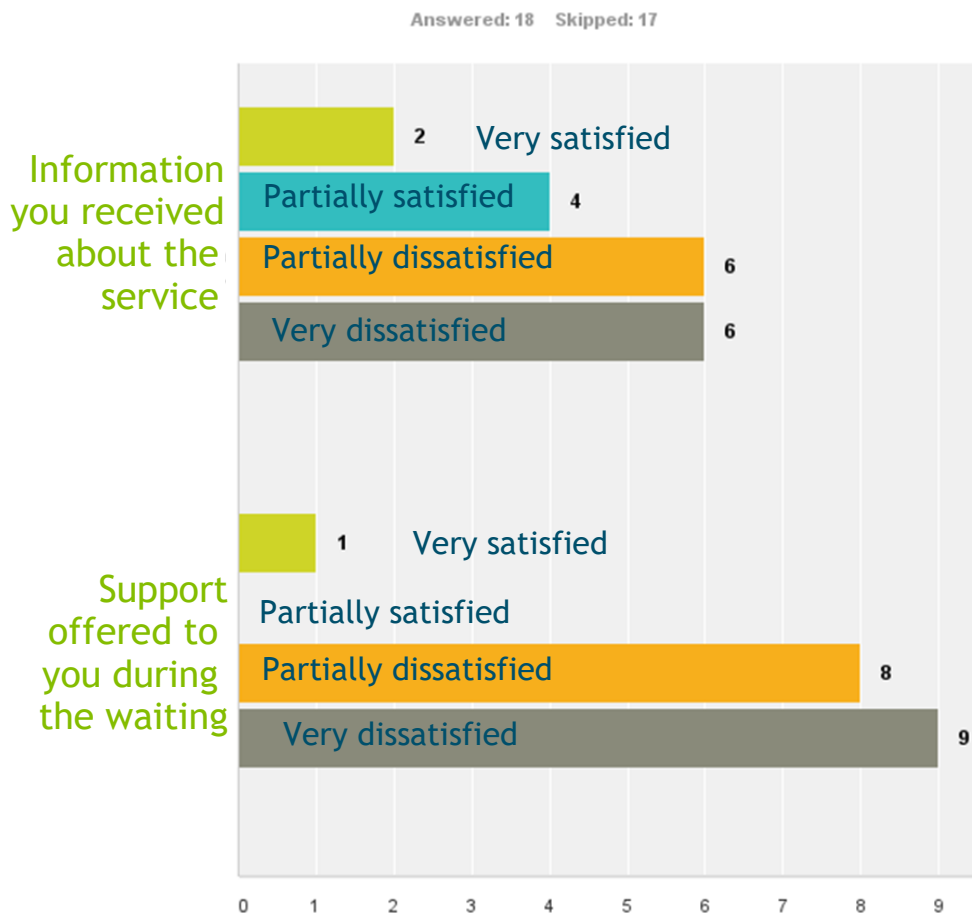


## Roughly how many weeks did they wait between being referred and accessing the service?

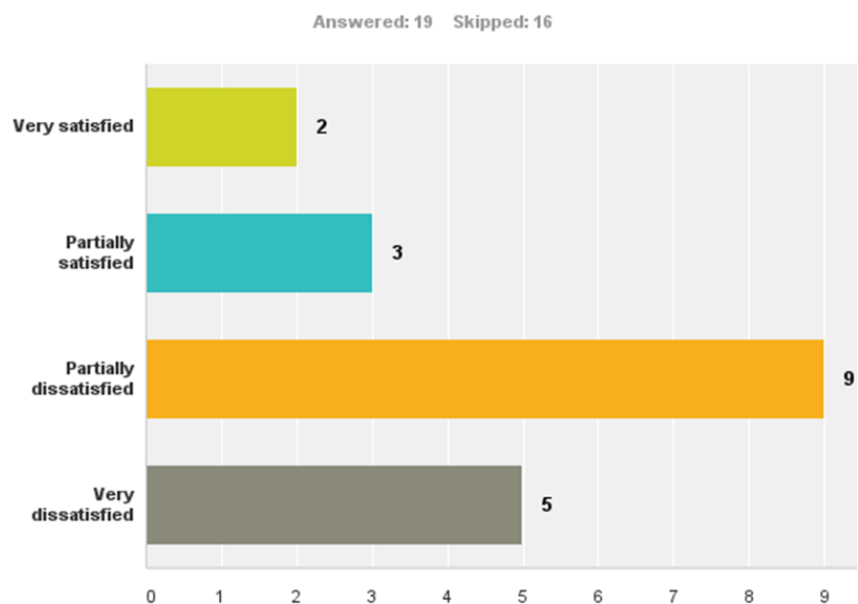




## In the time in between being referred and accessing the service how satisfied were you with the following?



## While using the service how satisfied were you with how responsive the service was to your needs and circumstances?

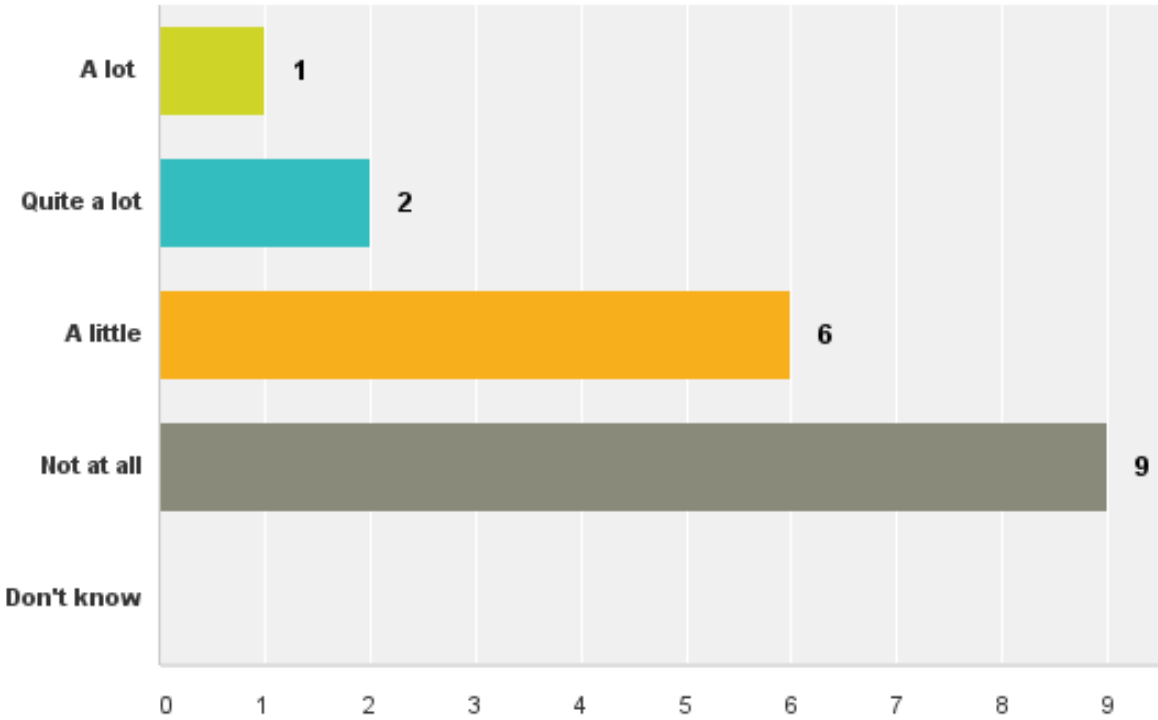




# DID IT HELP?

Do you feel the service has helped the young person?

Answered: 18 Skipped: 17



The majority of parents/carers felt like the services they had experience of, had not helped the young person they care for.



## What was good about the service?

“They tried all they could to meet our needs”



“My son felt comfortable accessing the appointments himself, they have worked hard to fit appointments around college which has helped prevent increases in anxiety. The CAMHS support worker was also very helpful and responsive at listening to parental input without us feeling like we were meddling or being over bearing!”

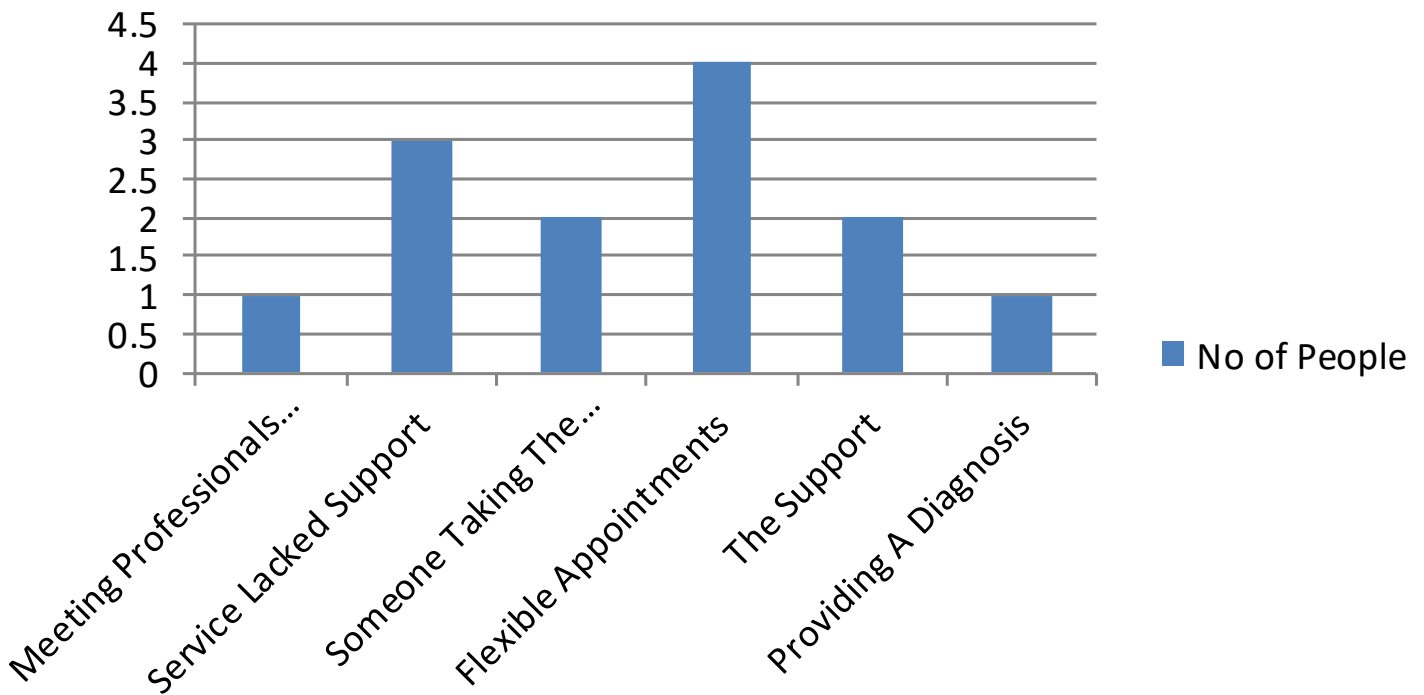




## What was good about the service? (Continued)



### What Was Good About The Service



What was good about the service?	No of People
Meeting Professionals To Help	1
Service Lacked Support	3
Someone Taking The Time To Listen	2
Flexible Appointments	4
The Support	2
Providing A Diagnosis	1

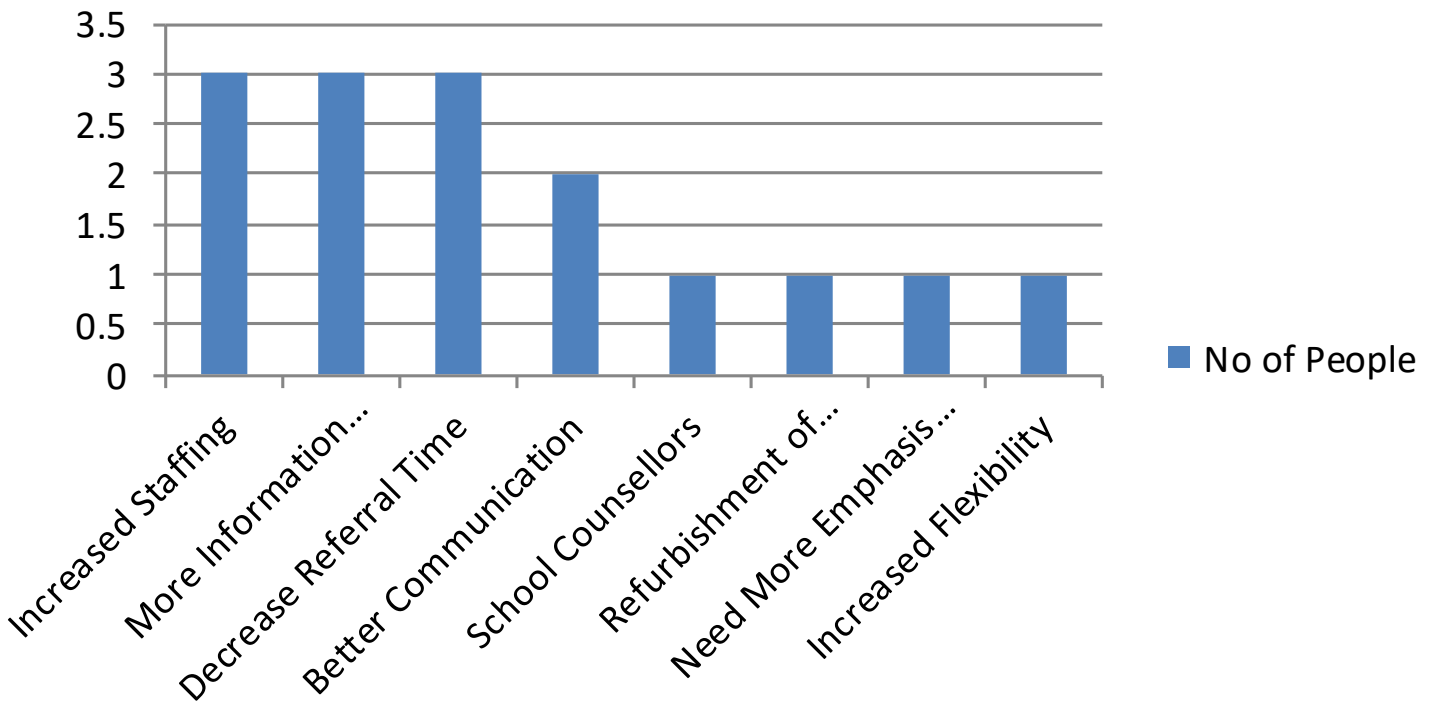






## Do you have any suggestions on how it can be improved? (Continued)

### Suggestions For Improvement



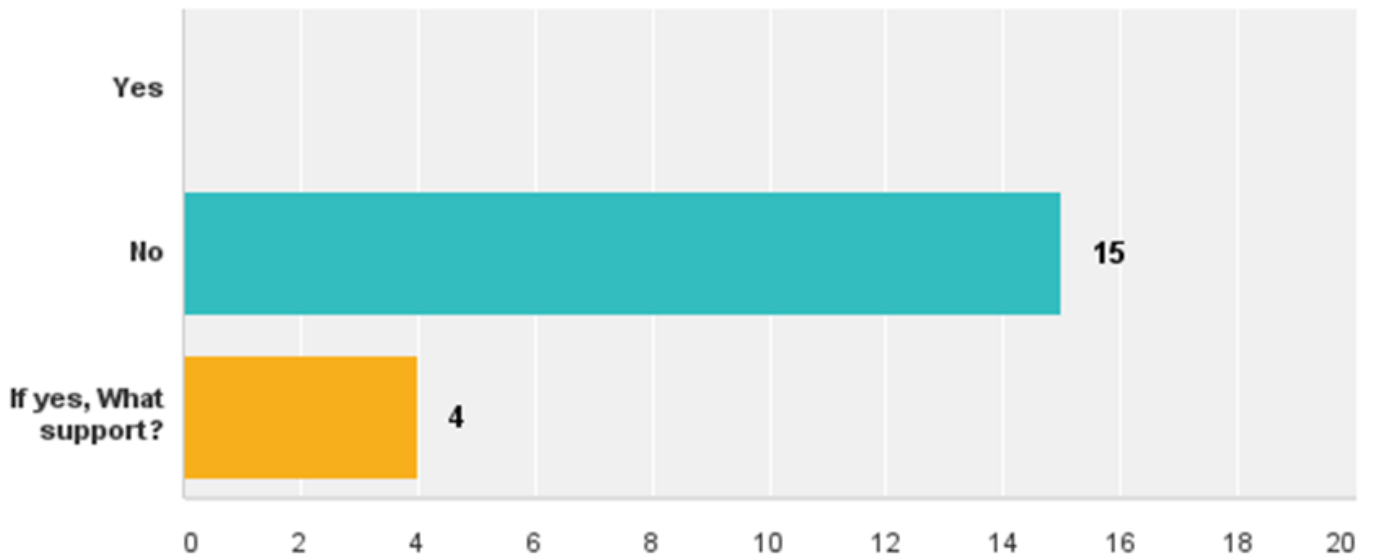
Do you have any suggestions on how it can be improved?	No of People
Increased Staffing	3
More Information Issued About Support	3
Decrease Referral Time	3
Better Communication	2
School Counsellors	1
Refurbishment of Buildings	1
Need More Emphasis on Mental Health Not Physical	1
Increased Flexibility	1



## Were you offered support for yourself during this period?

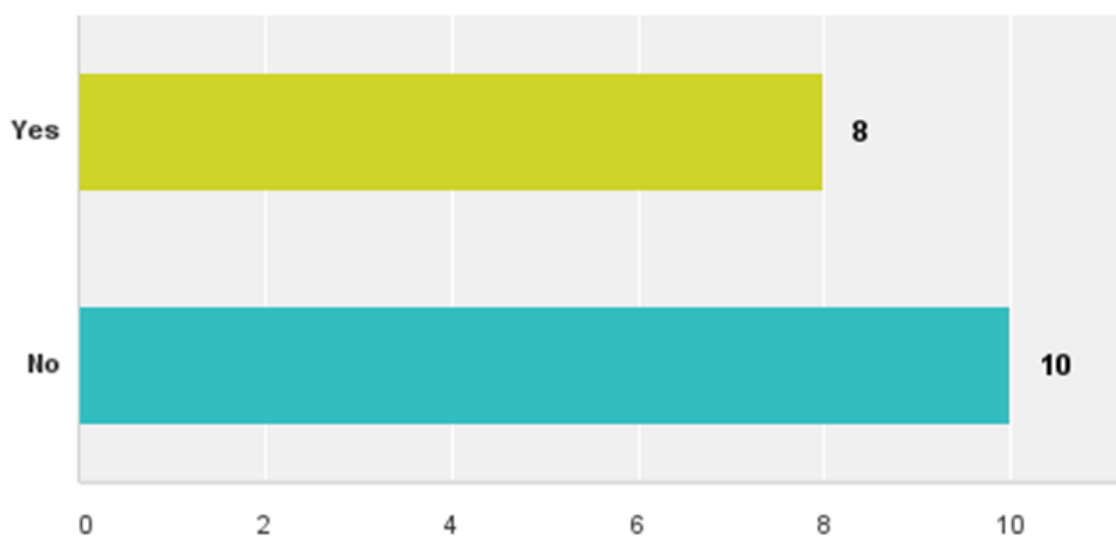


Answered: 19 Skipped: 16



## Do you recommend using apps or social media to support or improve the young persons mental health?

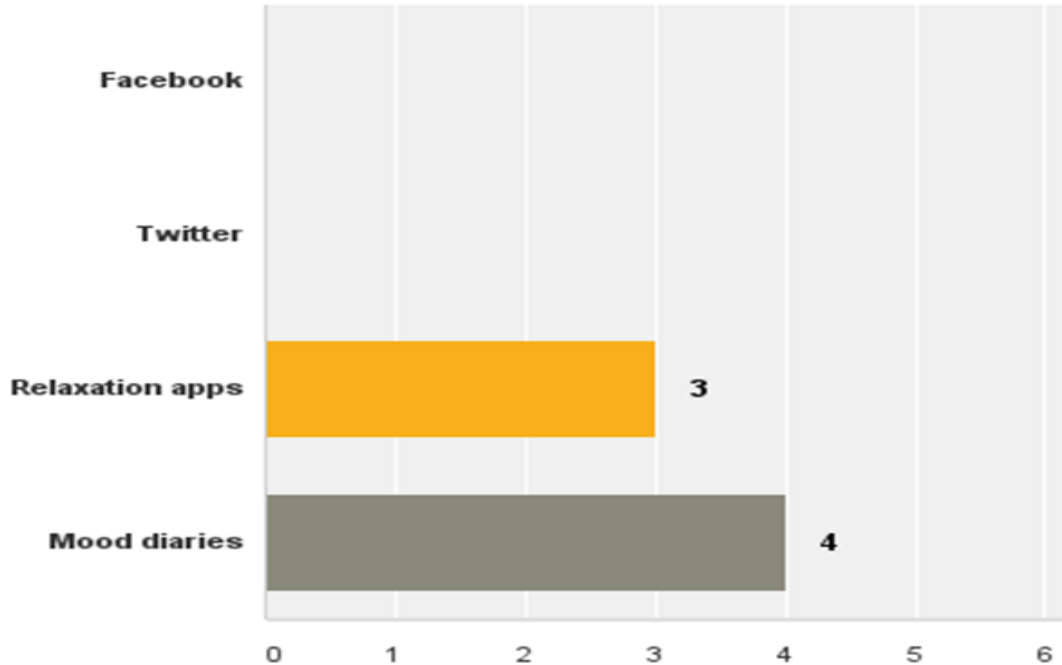
Answered: 18 Skipped: 17





## If yes, which ones?

Answered: 7 Skipped: 28



## Is there anything missing from the apps, you would like to see?

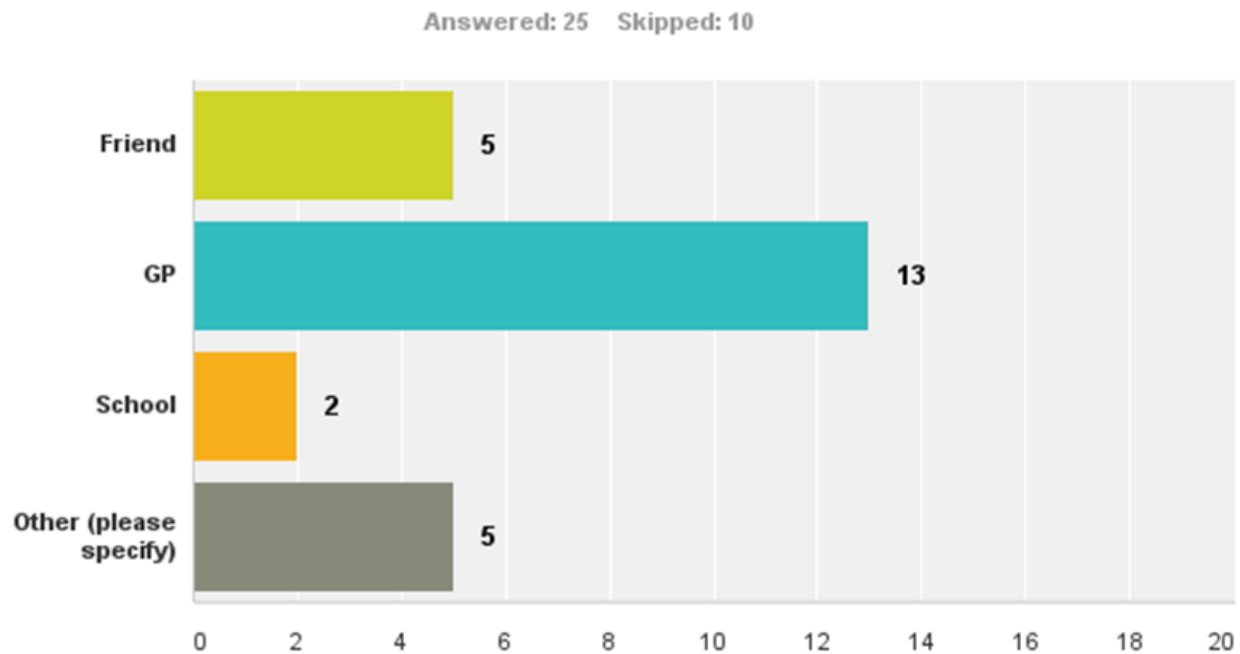
Apps are useless. I haven't got time for them. What if people are not good with phones, it would be useless

Our son hasn't used social media or apps in this way and we haven't signposted to any of these sort of apps so cant really comment either way though we have used websites. As a parent who is linked in with other health professionals I have utilised twitter to be signposted to other good quality websites and literature

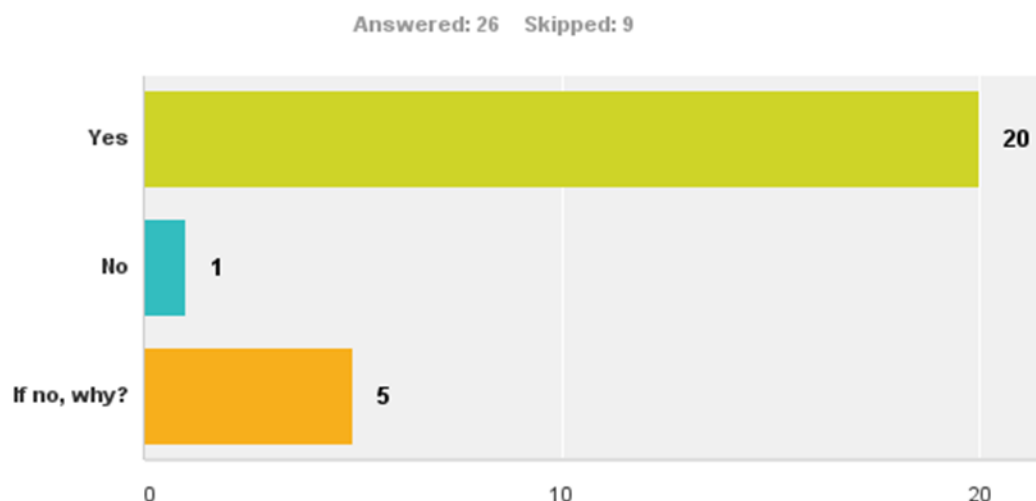
You can't automate the need for human contact that many of these children are desperate for.



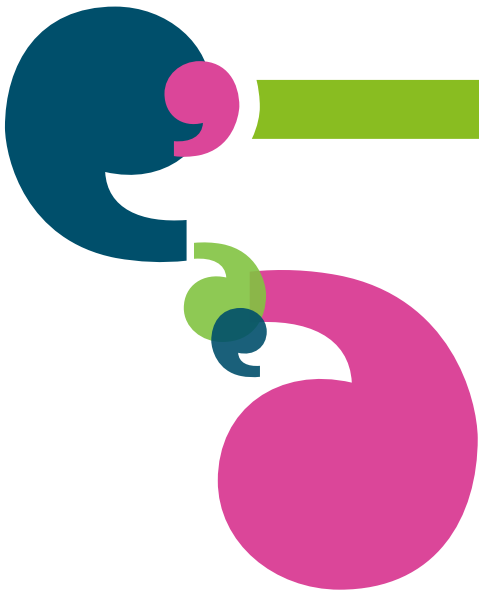
## If you needed advice on mental health, for someone you cared for, who would you ask first?



## Would you feel comfortable telling other people your child was using mental health services?



- \* “My child may not feel comfortable”
- \* “Due to peoples negative attitudes and lack of knowledge”
- \* “Yes and no, I am happy to be open that my son is using mental health services and it has been useful as many people have been in similar positions and been hugely supportive and practically



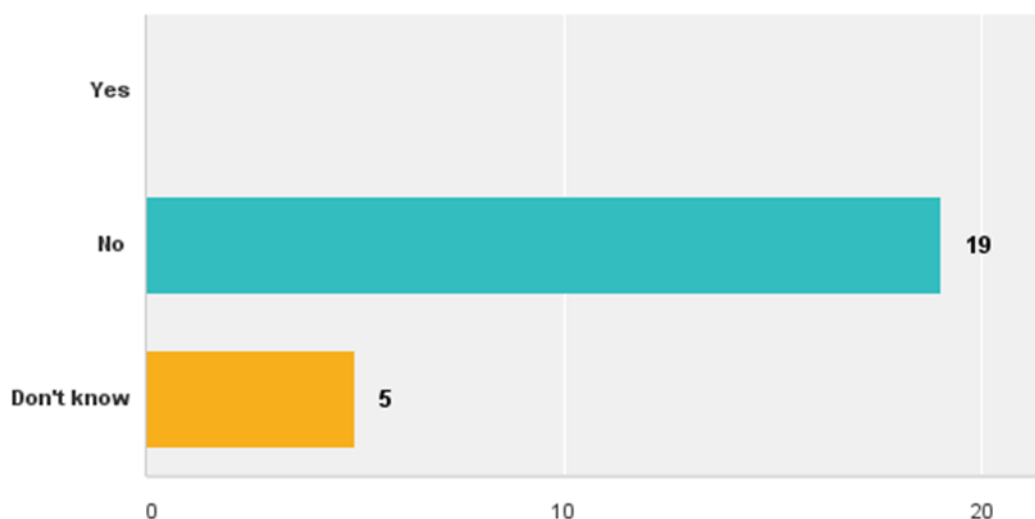
## INFORMATION (CONT)

helpful. However, I feel it is a very fine line as my son is a very private person so careful to not discuss with people he would feel uncomfortable about knowing which is generally those people closer to us i.e. grandparents, close family friends etc.”

- \* “Massive stigma and lack of understanding into mental health needs in children”
- \* “It violates the child's privacy. It is up to the individual child to make the choice to disclose (or otherwise) their medical history or treatment that they may be having. This would be the same for 'physical' illness or treatments such as contraceptive pills or mental health or psychological treatments such as counselling or CAMHS”

**Do you think there is enough information and support on mental health in schools and/or colleges?**

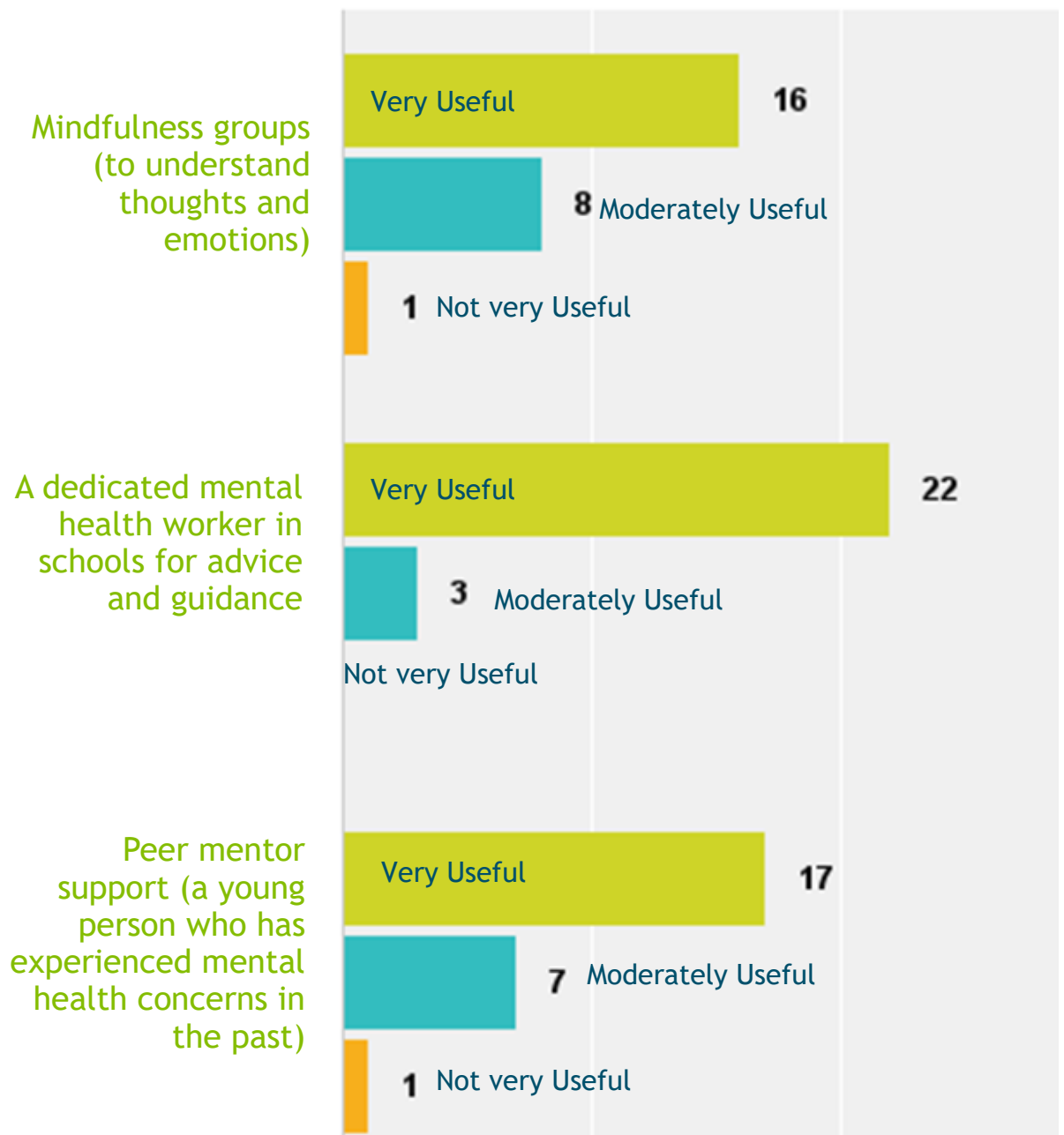
Answered: 24 Skipped: 11





## How useful would the following things be in supporting and improving children and young peoples mental health at school or college?

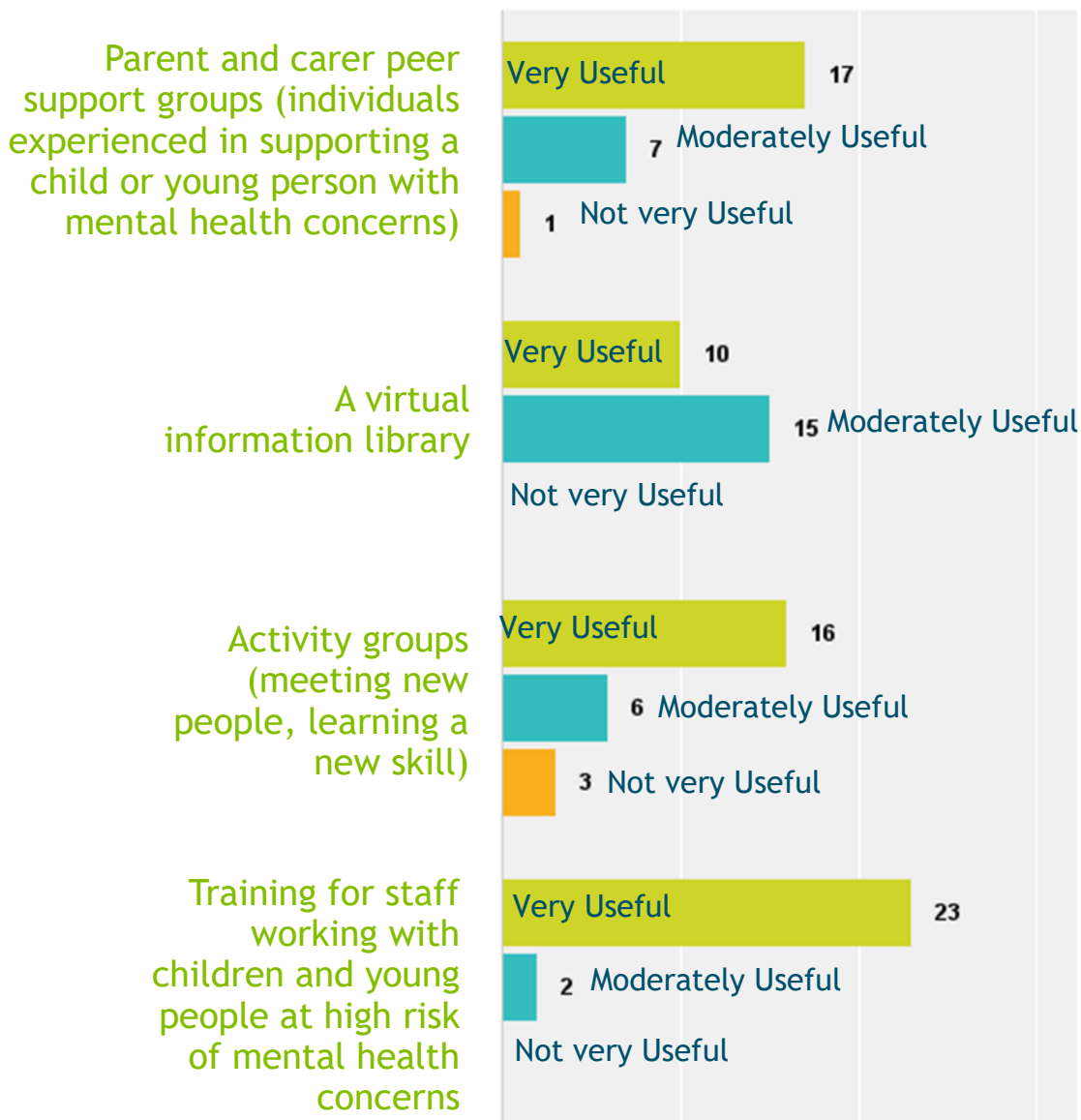
Answered: 25 Skipped: 10





## How useful would the following options be in supporting and improving parents and carers and/or the young person you care for mental health?

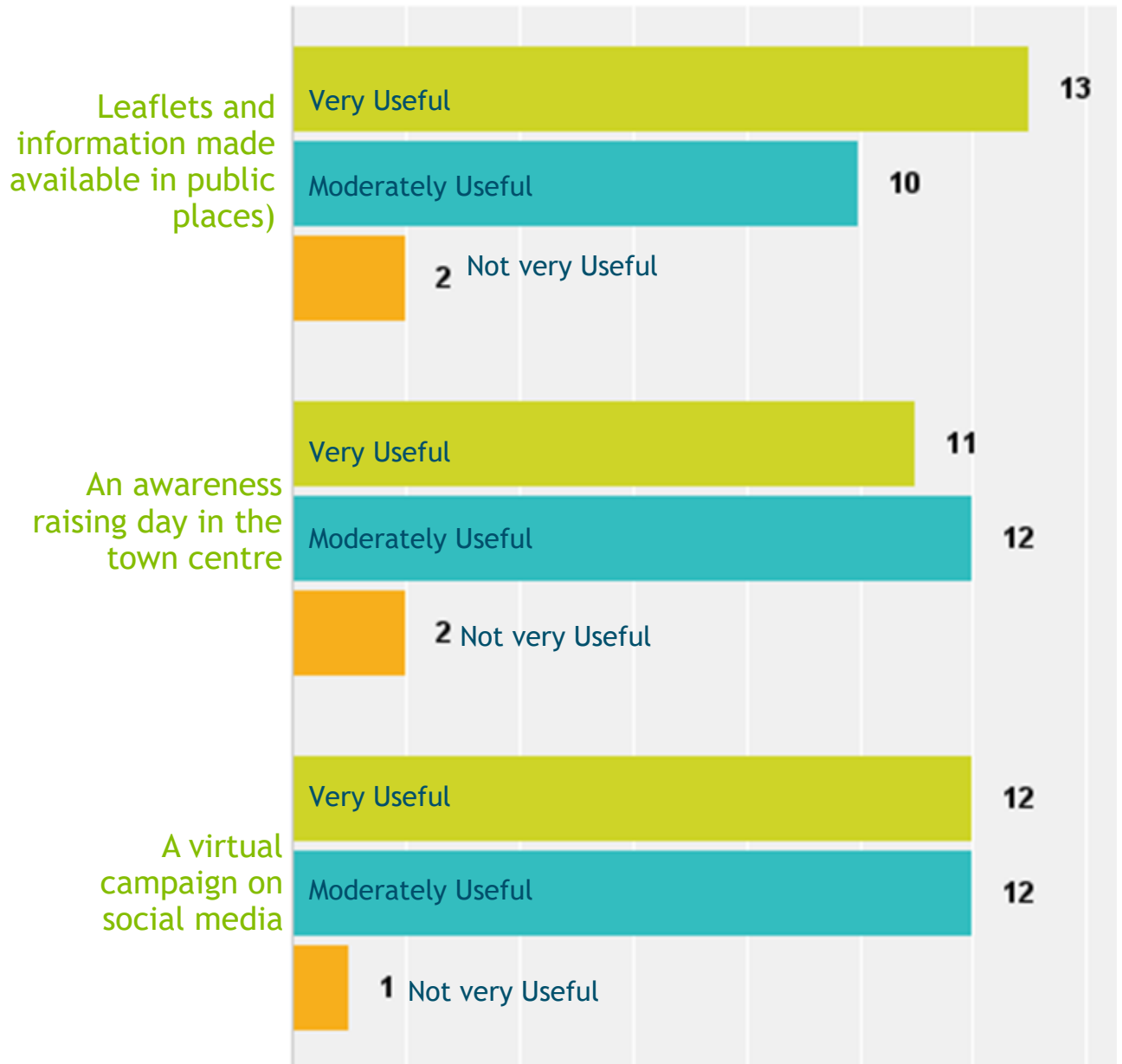
Answered: 25 Skipped: 10





# How useful would the following things be in increasing understanding and reducing negative attitudes towards individual and groups with mental health problems?

Answered: 25 Skipped: 10





## Do you have any other suggestions on how we can improve and support good mental health for children and young people in Darlington?

Have regular groups stop leaving people isolated in their own homes.

More training for secondary school teachers.

Get rid of CAHMS! Have more activities available and peer support groups, that's where young people can really talk and express how they feel, not a professional who doesn't understand a young person.

I have not seen anything on mental health, although I don't need a service, i have saw nothing regarding mental health so more awareness raising.

More information and help on line for kids and parents.

More awareness in schools and information.

More awareness available.

More awareness in schools (primary and secondary)

Work needs to take place around removing the stigma of receiving mental health support, it needs to be viewed as a positive, proactive

resource to use not a referral because you're struggling. It needs to be normalised as well, so that having mental health needs is seen as just a part of growing up, something that most young people will experience at some point or another.

There is such a big link between child mental health and the home environment that resources are needed (real people) to work intensively with families (starting before birth by linking to hospital maternity services) to support them to meet the needs of their children as a preventative measure rather than wait until the damage has already been done. While this kind of intervention would be expensive, it would be a lot less that the costs of providing ongoing mental health care throughout an entire life for children who have been severely failed within their first few years.

Improve waiting times

focus on resilience building within the support mechanisms that are available

Information and awareness raising needs to be ongoing and strong. There needs to be more information available in health service waiting rooms, pharmacies, schools & colleges. Training and awareness courses available for parents/carers in local health centres and community centres. All staff who work with children to be trained in mental health or at least be trained to a point so that they know the signs of mental health problems.







# STAKEHOLDER FEEDBACK

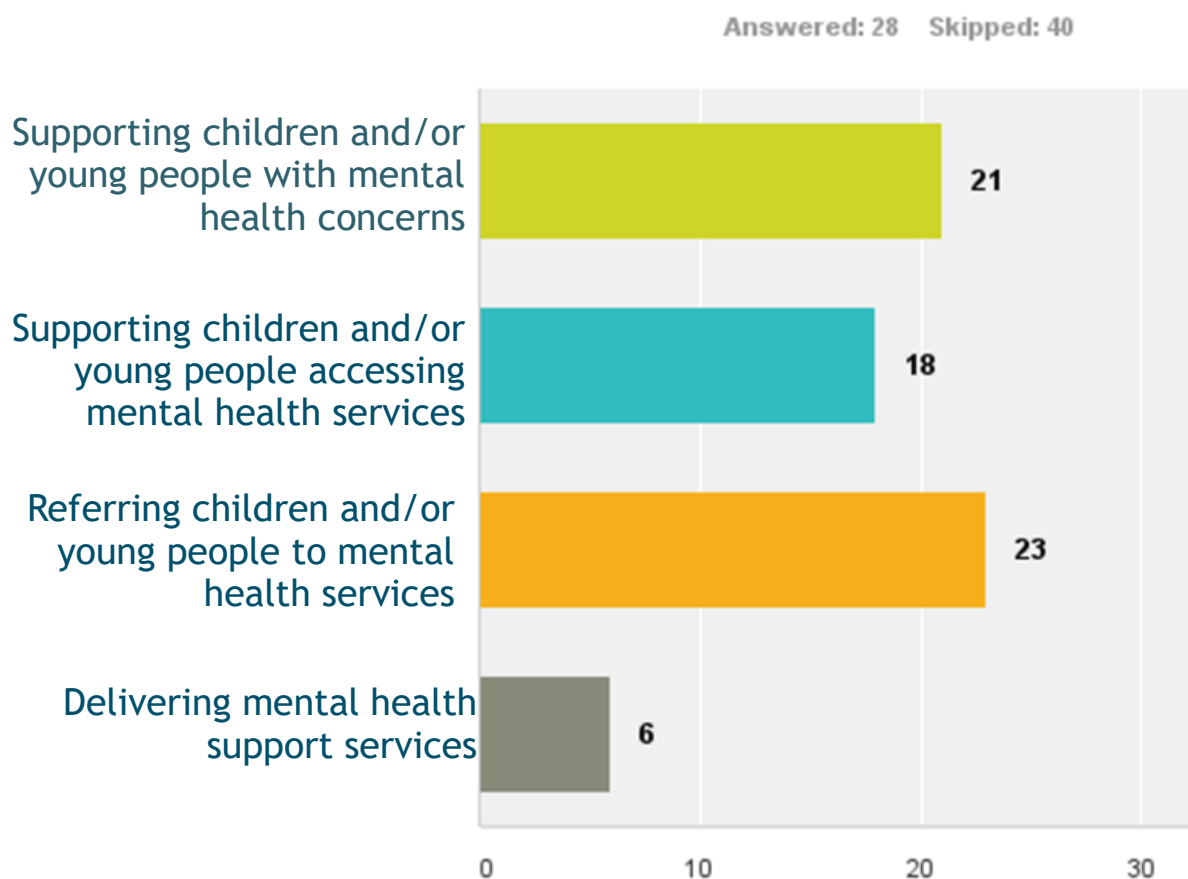


## WHAT STAKEHOLDERS TOLD US

68 Questionnaires were completed by stakeholders with an interest in children and young peoples mental health.

Of those 58 of the people worked for an organisation that supported children and young people.

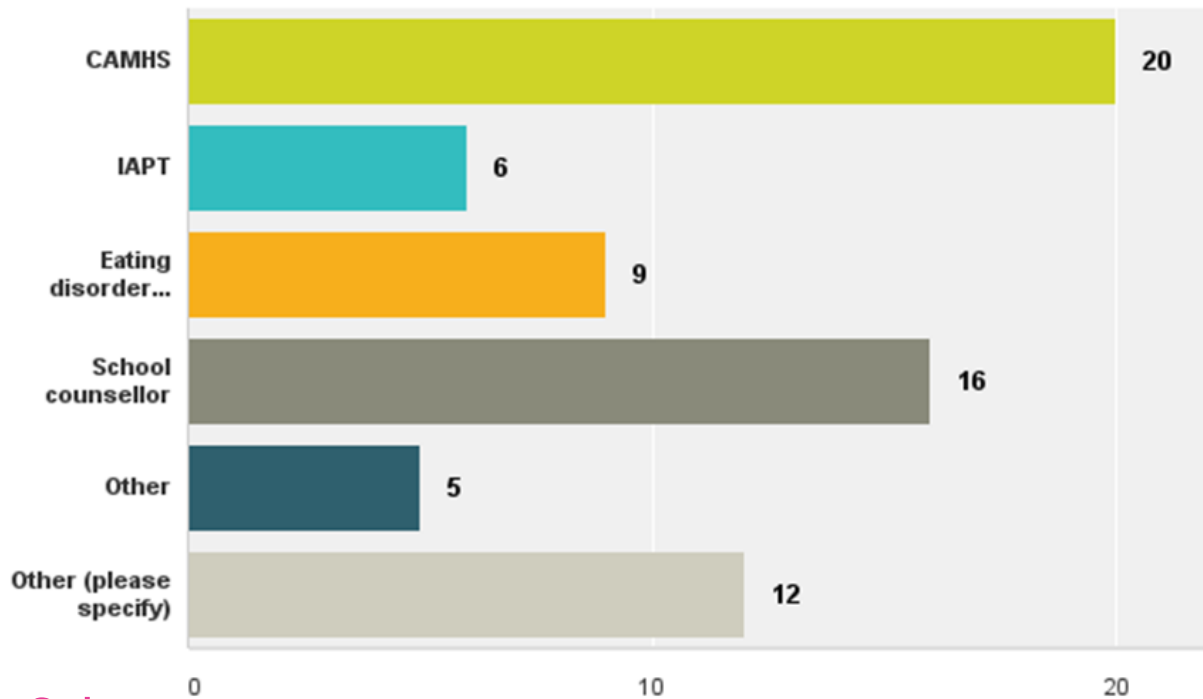
Which of the following roles are most appropriate to those organisations?





## Which services are you most likely to refer to?

Answered: 26 Skipped: 42

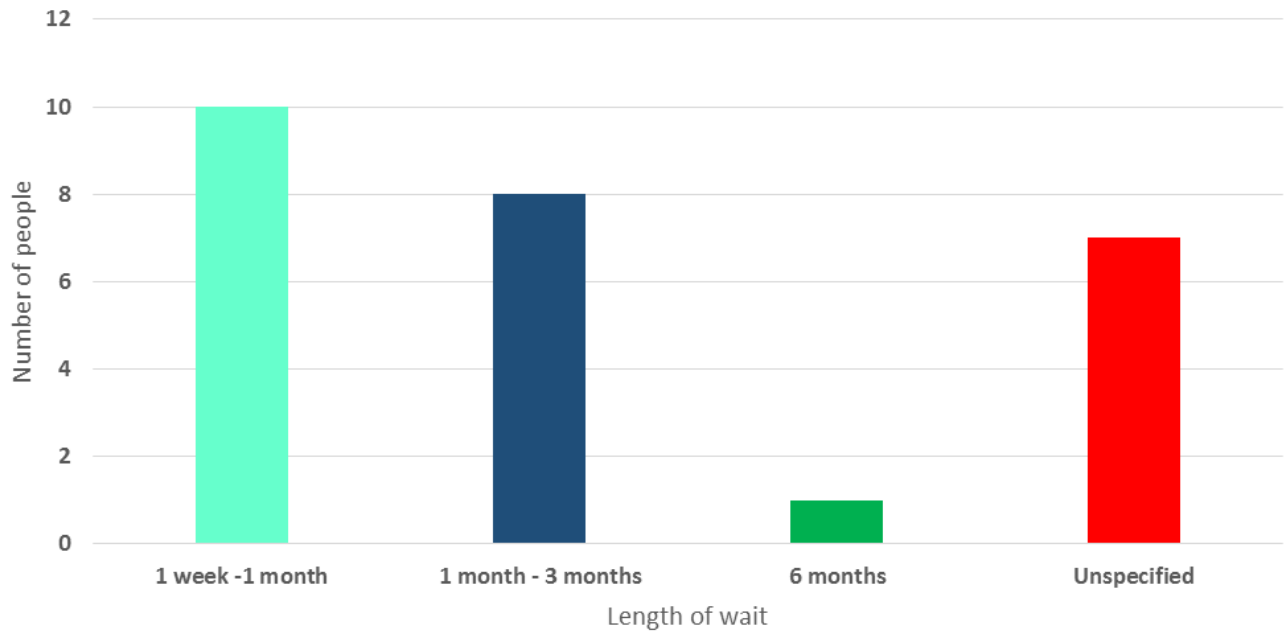


### Other:

- Early intervention psychosis, FIT, Family support, Rape crisis, Switch, Lifeline, Autism outreach
- Any service required by family including social services
- any which may be required
- Lifestages
- Gender identity clinic
- Sexual health clinics
- Behavior support
- Westpark
- Mental health Hospital, Talking changings
- College counsellor Student Support advisors
- Student Support Advisors
- ADHA

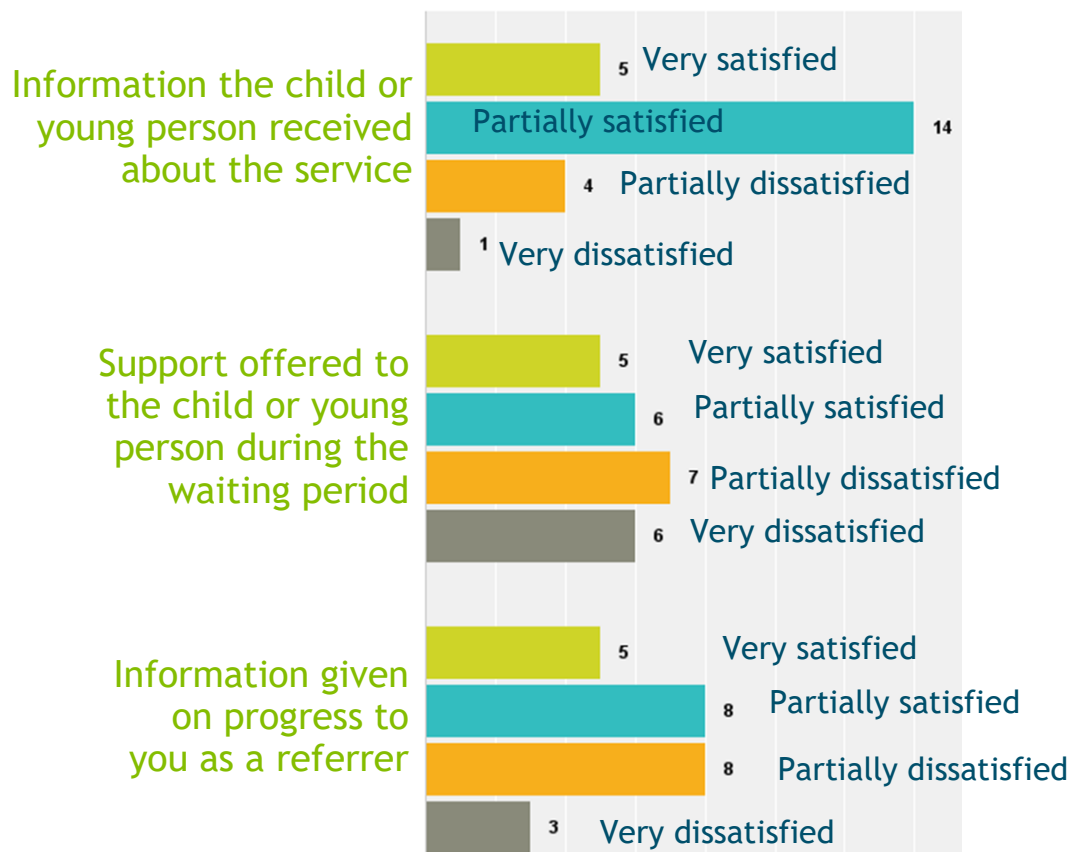


## Roughly how many weeks do they wait between being referred and accessing the service?



## In the time between being referred and accessing the service, how satisfied were you with.....?

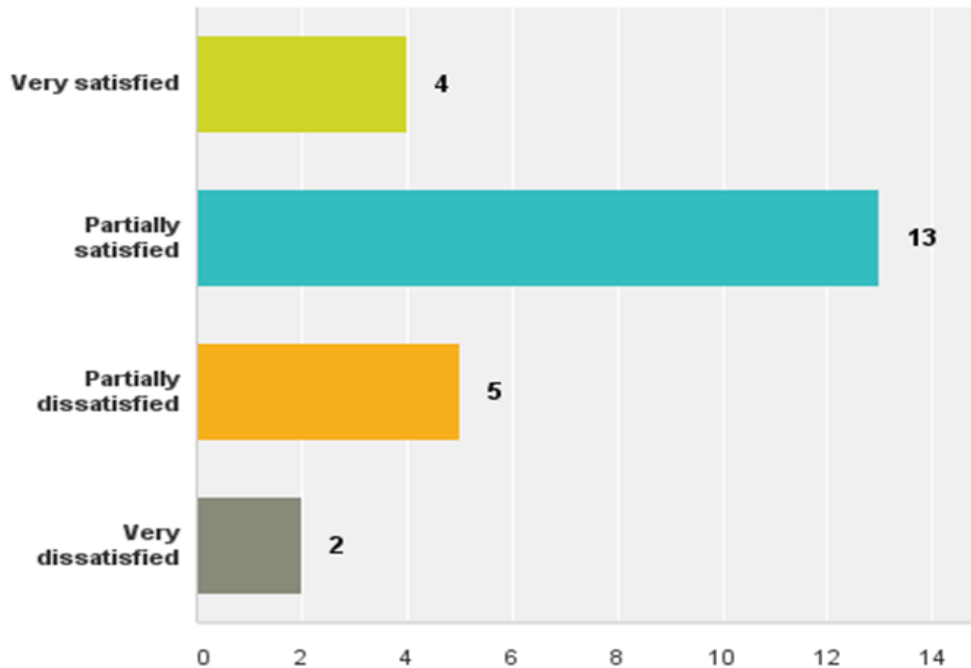
Answered: 24 Skipped: 44





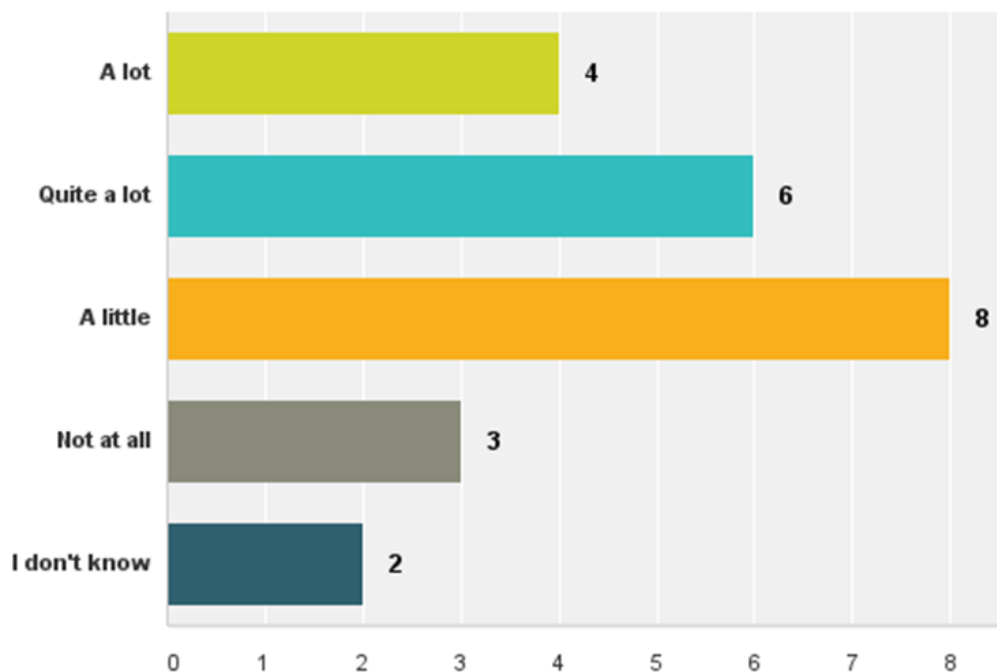
Whilst using the service, how satisfied were you with how responsive it was to the child or young persons own needs and circumstances?

Answered: 24 Skipped: 44



Do you feel the service has helped the child or young person?

Answered: 23 Skipped: 45







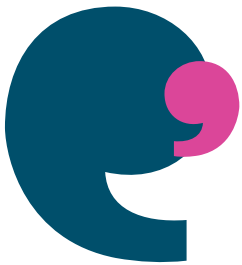
Do you have any suggestions on how it could have been improved?

Quicker referrals

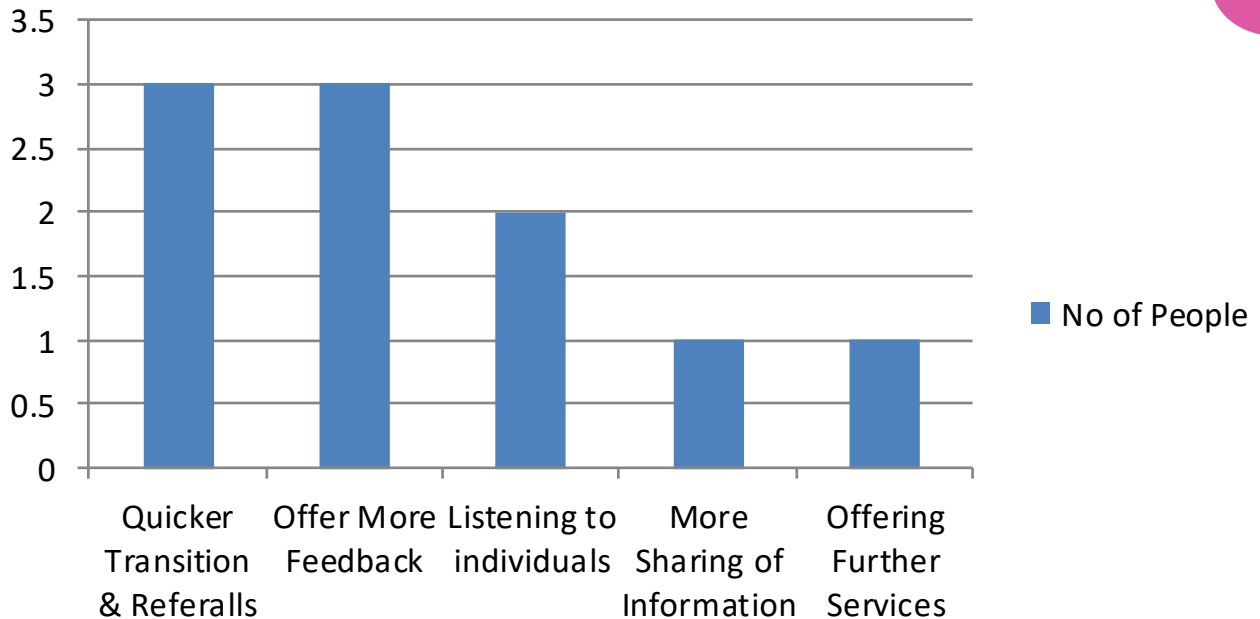
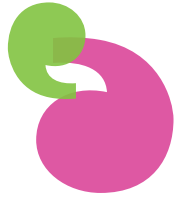
“To feedback concerns and therapies to services working with the children to alert them to the problems and appropriate support for them. For severe cases possibly on a weekly basis”







## Suggestions for Improvement (CONT)



More sharing of information

Smoother and quicker transition - child and adult CAHMS

To feedback concerns and therapies to services working with the children to alert them to the problems and appropriate support for them. For severe cases possibly on a weekly basis

1/ Up to date information on services available as changes constantly, so keeping it relevant to date 2/ Less discharging, If child fails to engage the services should try harder - maybe come to the child?

Workers could not even let us know what type of work they are doing, describing only as 'overall emotional well being', leading to lack of understanding about how they are supported and repeated work!

They need to listen to the child or young person

Quicker referrals

Crisis team - Not very helpful when rang for advice about a young person I support. Staff should talk to young people with respect! They have no faith in this service

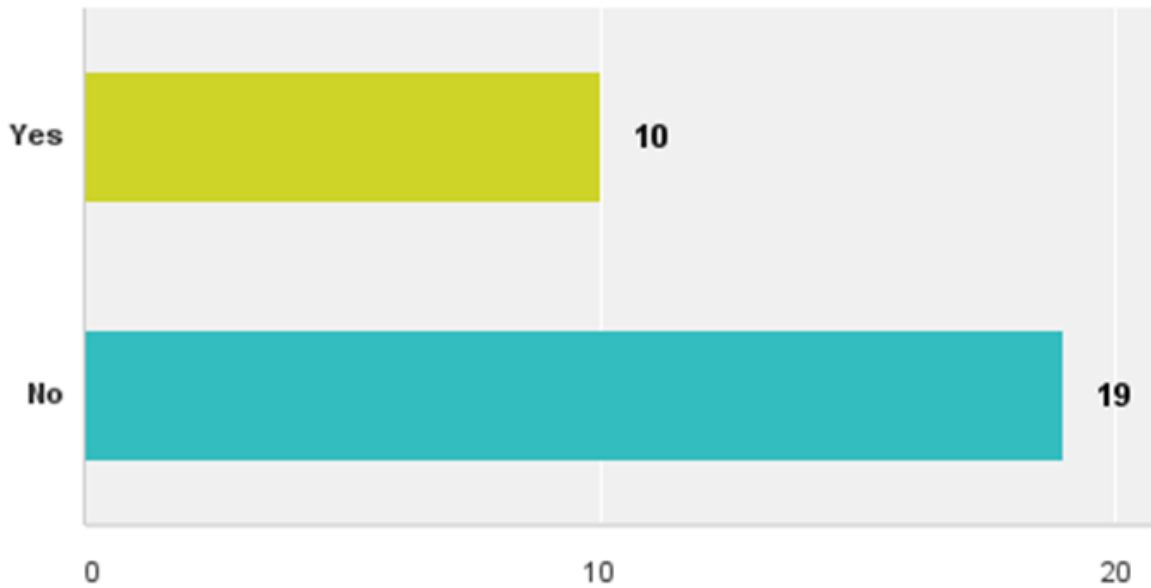
better quality assessments  
alternative commissioning  
arrangements

I am an early years practitioner and I feel that there is so much more we could do. Organise support for these families whilst waiting for appointments and diagnosis. e.g. looking at the diet and supporting boundaries and routines. Parenting Programmes are of great benefit to these people.

Have you experienced a situation where no service was appropriate for the needs of the child or young person?

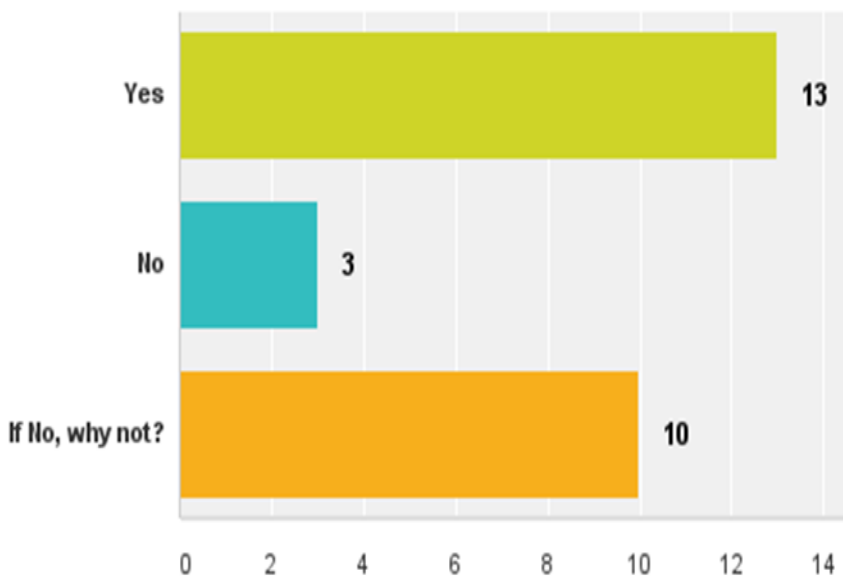


Answered: 29 Skipped: 39



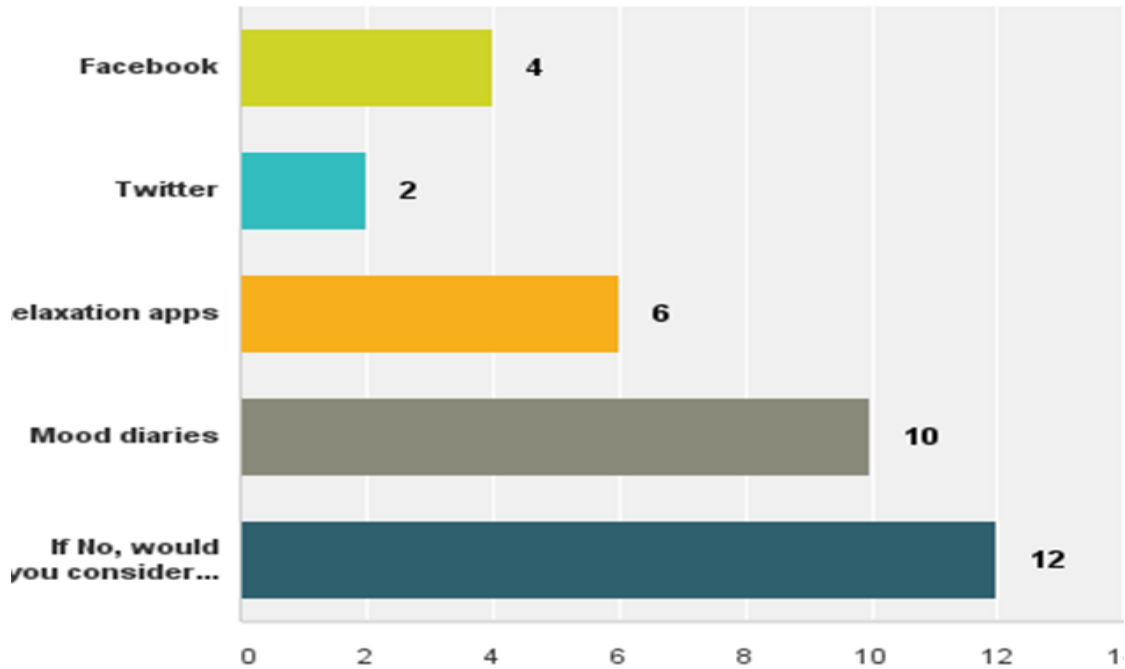
In your experience are children and young people comfortable telling other people they are using mental health services??

Answered: 26 Skipped: 42





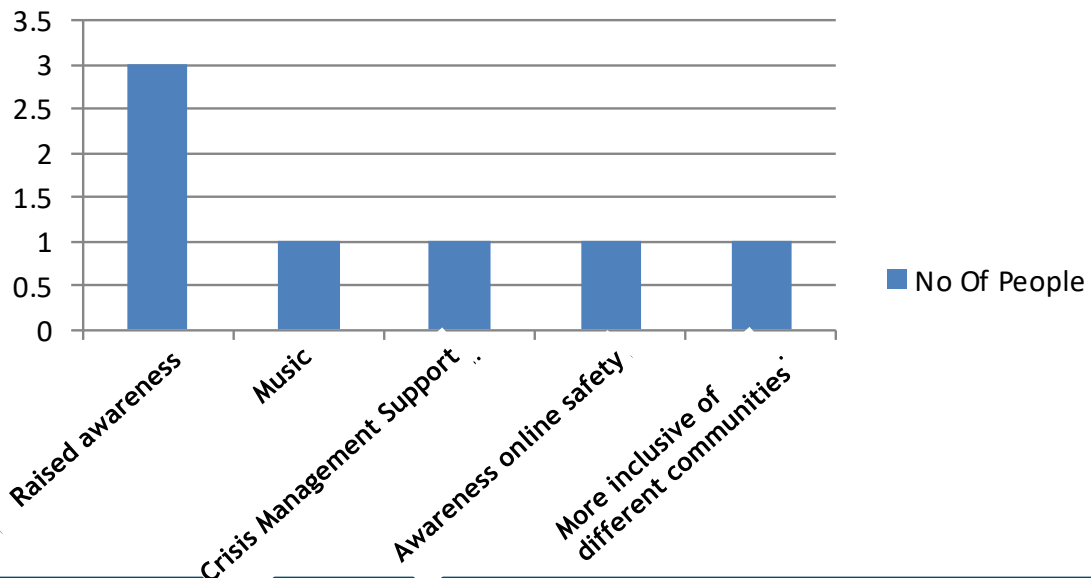
## Do you currently recommend the use of apps or social media to children and young people to support or improve their mental health? Which ones?



### If no, would you consider this in future?

5 people said YES, 4 people said NO, 1 person said they would need to know more about what is available.

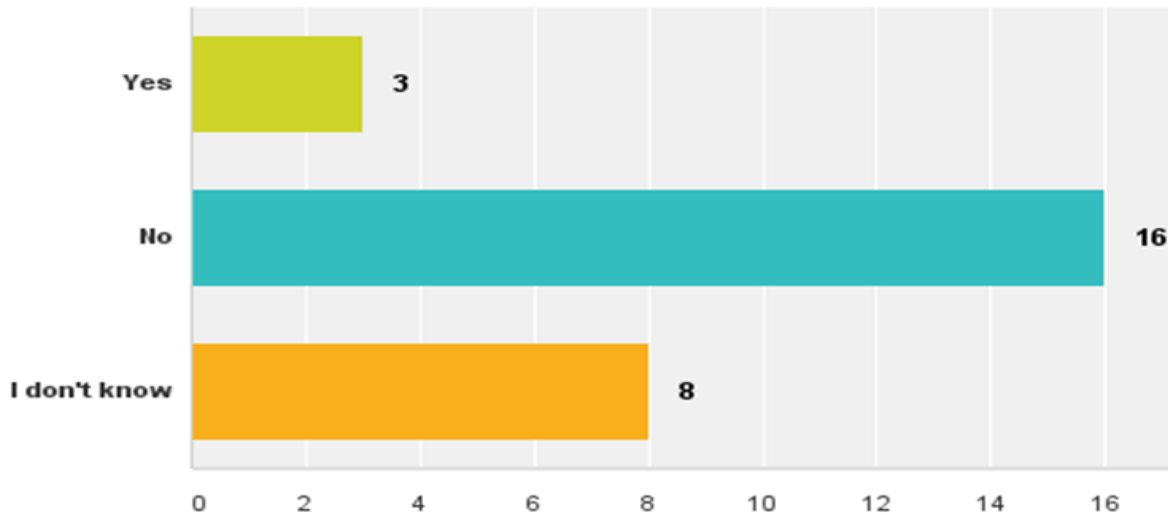
## Is there anything missing from these apps, that you would like to see?





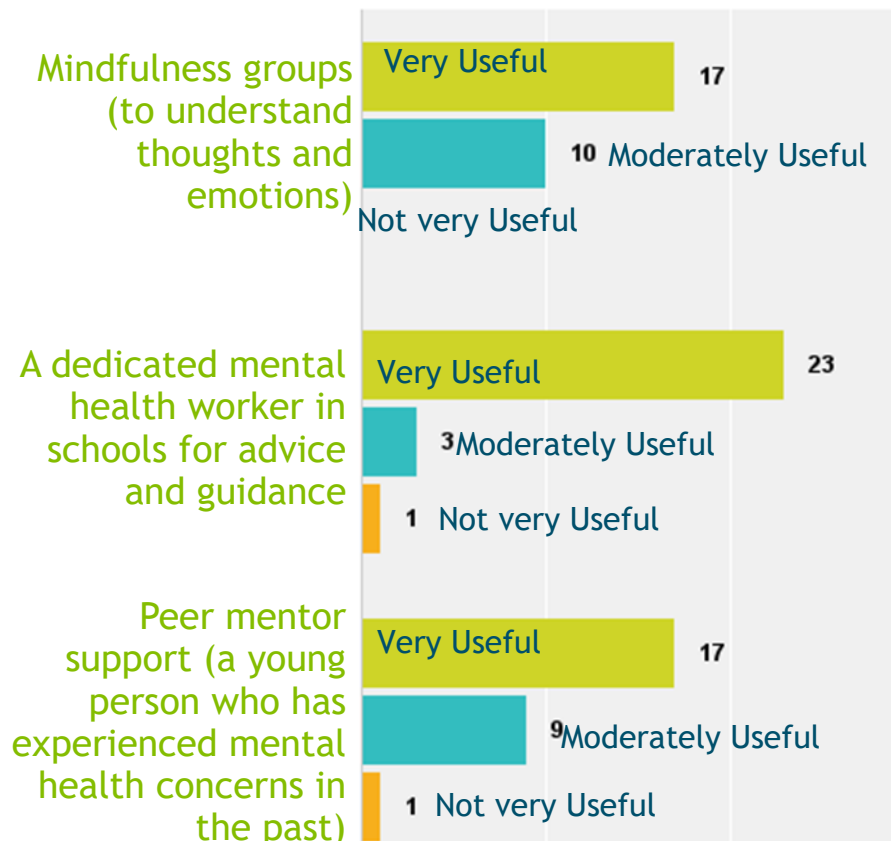
## Do you think there is enough information and support on mental health in schools and/or colleges?

Answered: 27 Skipped: 41



## How useful would the following things be in supporting and improving children and young peoples mental health at school or college?

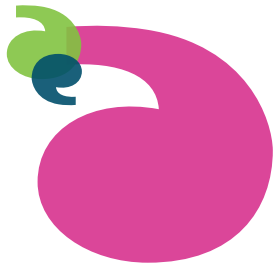
Answered: 27 Skipped: 41



# How useful would the following options be in supporting and improving parents and carers and/or the young person you care for mental health?

Answered: 27 Skipped: 41

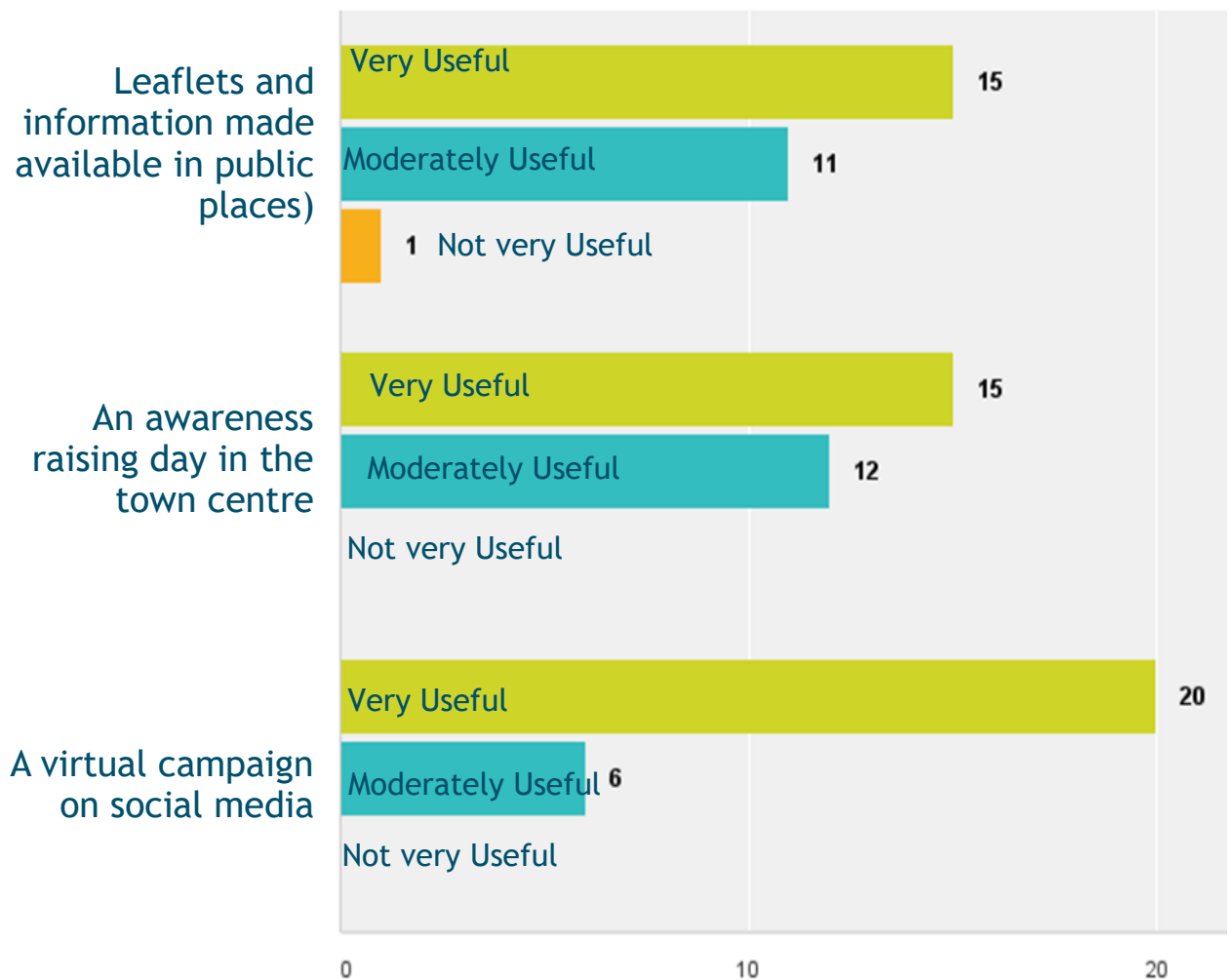




## IMPROVING MENTAL HEALTH

How useful would the following things be in increasing understanding and reducing negative attitudes towards individual and groups with mental health problems?

Answered: 27 Skipped: 41

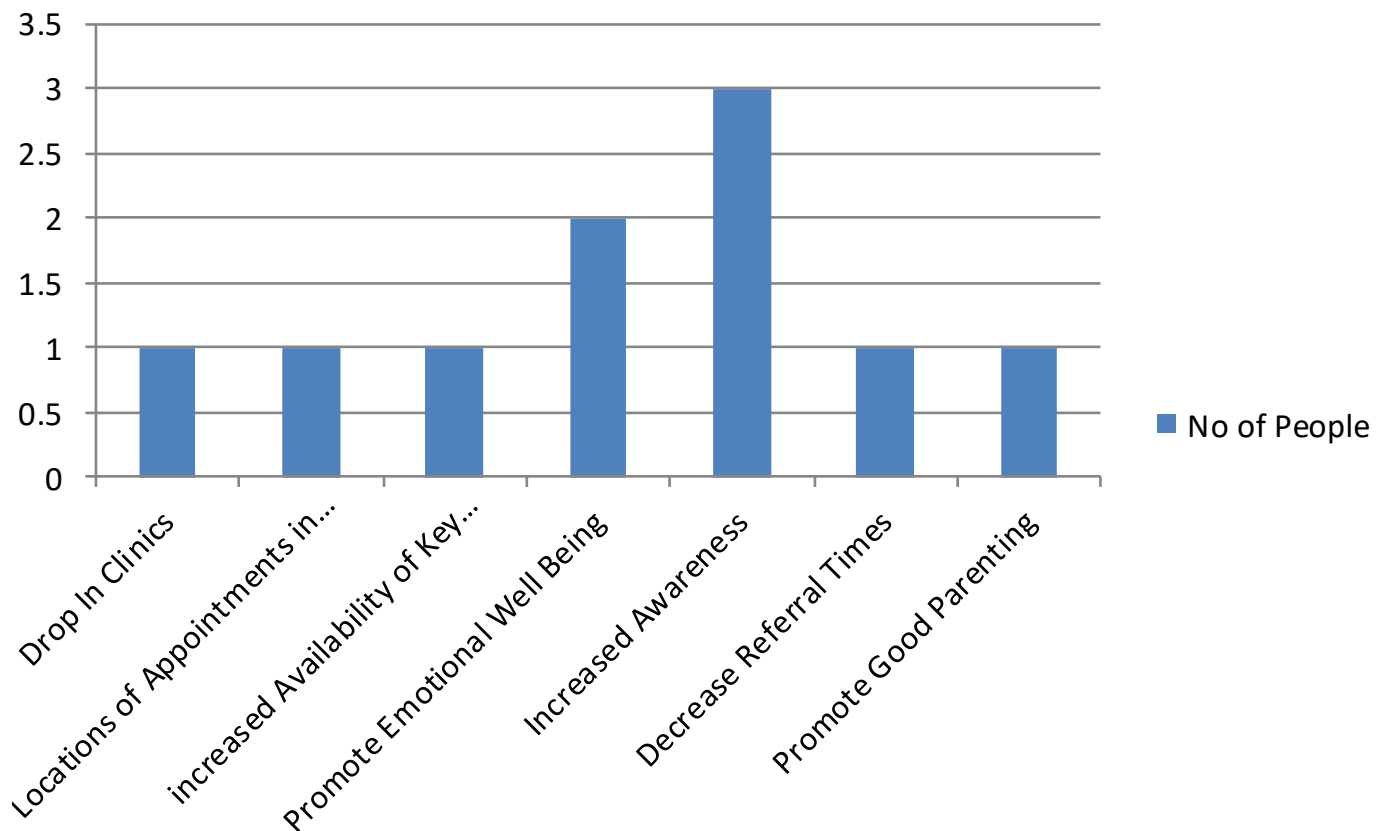








## Suggestions For Improvement Across Darlington



Drop In Clinics	1
Locations of Appointments in Familiar /	1
increased Availability of Key Workers	1
Promote Emotional Well Being	2
Increased Awareness	3
Decrease Referral Times	1
Promote Good Parenting	1



### Activity: Face to face meeting with Parent of 12 year old with issues - Child is 12 years old



Please note the image is used for illustration purposes only.

I first noticed my daughter's deteriorating behaviour when she moved into her last year in primary school. I attended a meeting with her class teacher, who had also noticed the change in the behaviour. The teacher agreed to ask for an external assessment for her. **The school had no counsellor to deal with any issues regarding mental health.**

Throughout my daughters last year I rang the school numerous times for an update but they just kept saying she had challenging behaviour in her class and they didn't think she needed to see a specialist but will forward it on. Throughout the year my daughter's school got in touch with me informing me she was disrupting the class and not doing well with her work. Once again I asked if she could be seen by specialist but the school just stated there is a waiting list.

They thought she was just being awkward

By this time her work was way behind.

My daughter finally saw a specialist 6 weeks before she started secondary school and I do believe this was sorted by them rather than the primary school. They said she may have to attend a specialist school after year 7 as her grades were so low, but we were not given much more information about it. My daughter was feeling frustrated and quite depressed at this time.

As a parent I felt really helpless. I would have appreciated some advice on ways of helping my child but was given nothing and I don't actually think my daughter's primary school knew how to deal with it either.

My daughter finally moved up to secondary school and after a couple of weeks her form teacher suggested I take her to her GP. Her GP referred her to CAMHS. **It took 4 weeks to get an appointment at CAHMS.** After her assessment they suggested my daughter just had very low social skills and mild anxiety. This is what was causing her behaviour and she needs extra support at school. They did not feel she had a major mental health issue, although I can tell my daughter was very down at the time and not socializing with her





friends. They suggested she should make an appointment with her school counsellor. Again, I was given no information or leaflets or told where I could access any information to support her.

It has been nearly a year since my daughter had an appointment with CAMHS and we are still waiting to see her school counsellor.

The school just keep saying, there is a waiting list and will be seen as soon as there is a space. I think this is disgraceful! My daughter might not have major mental health issues but as a mother I know she needs some support. I know other parents, whose children also attend my daughters school and they also feel frustrated with the lack of information in schools regarding support for issues around mental health. The system is all wrong.

I know there are young people who do need help and need to be seen quickly but the young people who are classed as having low level anxieties are just left with nothing

There is a Nurture Group my daughter attends. This is a place where she can have time out and gives her a chance to discuss issues. This really helps her and it has built up her confidence and has met some nice friends but students can only go whilst in year 7. I can

definitely see a difference but now fear about what will happen when she moves up to year 8. There needs to be more of these in schools where young people can just have someone to chat to and get problems off their chest at any age not just the new starters.

With the lack of information around anxiety, I found a “Yoga Calm Down App” on line. My daughter downloaded it on her phone and does it on a night. She says it does help her and enjoys doing it with her friend. I did not know about Apps as a way to help support young people as I was not told of any but I think there great. I think there should be more advertised towards young people. There is some for parents but have not personally used them.

There definitely needs to more awareness raising around mental health starting in primary schools. There should be a dedicated worker in every school on hand to support not only the child but the whole family as it can be a very stressful, frustrating time seeking support and advice for something that I believe, should be whole family approach. I feel sorry for staff as I don't think they know what to do as they are not trained in this area and it is only going to get worse.





### Activity: Residential home for young people with complex needs - Face-to-face Interview - Young Woman (YW) aged 17



Please note the image is used for illustration purposes only.

YW started having mental health issues aged 15, and now lives in a residential home for young people with complex needs, including autism, learning disabilities, and mental health issues. Having panic attacks, she relies heavily on her support worker.

**I just hope this information helps someone else get better services**

YW was struggling to engage when we first began to chat but after gaining an understanding of what the consultation was about, she was eager to share her views on her services.

The mental health services she has used are CAMHS, a Psychologist and a Psychiatrist. Her school counsellor referred her to CAMHS, but she waited 6 months to be seen. In that time she felt she had no support, no information about mental health and felt that she was not given any choices around her care and support. YW explained there were no leaflets or posters around her school regarding mental health.

YW felt her teachers discriminated against her for her awkward behaviour

**If there was more awareness in my school so people could understand I probably would not have ended up in hospital!**

but they did not understand it was because of her mental health illness. She slowly lost her friends as they too did not understand her illness.

When YW moved to the home over a year ago it took several weeks to get an appointment with CAMHS. She thought CAMHS were very judgemental and never really listened to her.

YW explained her sessions with her Psychologist and Psychiatrist has really helped explain her illness and have been very supportive.





YW showed me her Mindfulness box. This is a box with things that make her happy. It consisted of books, letters, photos, movies and chocolate. When she feels down she explained these things really help her. YW has in the past used apps but is not a fan. Having a great relationship with her support worker also helped her illness.

**Ways of raising awareness** - YW suggested mental health should be taught in schools as young as primary school. It should be part of the curriculum (PHSE). Having mental health scenarios played out in these sessions around different types of stresses such as family life, arguments with friends and boyfriends, young people getting stressed over exams, being brought up in a household with abusive or alcohol dependent parents and dealing with death. These could give an insight into why your friends, class mates are feeling the way they do. Only raising awareness will stop any stigma!

YW thinks having all teachers trained in mental health is essential in all schools. Having a dedicated worker there for advice and guidance would

help. Mindfulness sessions in schools can be very valuable also as they really helped her understand her illness.



**I think everybody should learn mindfulness as a way of coping with everyday stresses**





## CONCLUSION

Healthwatch Darlington were asked to aim to speak to and gather information from at least 100 children, young people, parents, carers and stakeholders.

**In total we gathered feedback from 330 people.**

We spoke to vulnerable children, young people and adults at venues across the town. We attended a peer led support group for Mothers with postnatal depression to gather perinatal feedback, and spoke to young Mothers at McNay Street Children's Centre.

We completed questionnaires with current or potential service users, with parents and carers of current or potential service users and held focus groups with current or potential service users including those from vulnerable and most at risk populations. e.g. looked after children, disabled children, youth offenders. We also held focus groups with parents and carers of current or potential service users and spoke to local Stakeholders and service providers e.g. YMCA, DAD, CAMHS, Mind, GADD and DISC.

Throughout the consultation, **waiting times** to access a service were raised with negative feedback from children, young people, their parents and carers

and professionals; with **some young people waiting up to 6 months for an appointment to see a specialist**. Whilst waiting for support there were concerns regarding a **lack of information regarding mental health, especially in secondary schools and no information at all in primary schools**. It's not until young people start college, that they feel there is more information, peer support, awareness regarding mental health and overall acceptance of mental health issues.

Both parents and young people, expressed a need to see **more information, starting from primary age and having a Trained Mental Health Worker (TMHW) in schools**, to easily access advice and to explain the different types of support and services. This would benefit both young people and parents, as not knowing can effectively bring on more stress. Young people also suggested having a peer mentor drop in service in their school or college, to upload their troubles and chat to. Young people might just need a quick chat regarding any issues they have, as they think this would give them time out and feel this would reduce the strain on appointments to see their school counsellor.

**Parents and carers feel helpless with the lack of knowledge and understanding of their child's mental health and this leads to their own anxieties and stresses. Some parents attend peer support groups and would**



like to see more of these as well as setting up an online chat room to talk to other parents who are going through the same anxieties. They said these groups would really contribute to their own wellbeing.

Using Apps as a coping tool was rated very low from service users. The majority of young people who receive support from services were not told of any apps. However people who have used them find they have helped and do contribute to their wellbeing. Some parents have also used them to support their anxieties. It was quite surprising how many people have never heard of these and it was suggested more awareness of the different types of Apps available to help support a person's mental health issue would be beneficial.

When young people finally attend their appointments at CAMHS, they commented on not being involved in their own support or not given any options regarding different treatments they think they would like. Young people stated **not everyone is the same**. When attending their appointments, **young people raised their frustrations about not seeing the same person and having to repeat their situation at a time when speaking up is very difficult for them**. Having more outreach support would definitely make young people feel more comfortable.

We found woman who have had a mental health issue before, during and after a pregnancy find attending a support group beneficial and

greatly improve their wellbeing. The group we attended was currently peer led by a former member, as the previous funding had stopped. Group members explained they would find it really hard if it was not there and said there needs to be more of these groups as they found their anxieties can be worse whilst pregnant.

Professionals who work with young people on a day to day basis would like services to feedback on therapies, and to keep them updated with any issues and concerns so they can help towards support packages. It was suggested that severe cases could be fed back on on a weekly basis. In addition, better communications between organisations will have positive outcomes for young people and their families including providing all professionals' with mental health training which would contribute towards better support for young people.

Throughout the consultation from young people, parents and professionals, **more mental health awareness raising, was a top priority**. The lack of knowledge and understanding has led to many young people still feeling stigmatized. It was suggested teaching mental health in PSHE lessons and holding awareness days in schools would be a good way of educating children and young people and discovering ways in how best to support not only themselves, but others who may be experiencing issues.





# RECOMMENDATIONS

## Recommendation 1.

Darlington Borough Council and Darlington Clinical Commissioning Group should adopt the findings of this report and use the feedback from children, young people, parents, carers and stakeholders to contribute to the development of future mental health provision in Darlington.

## Recommendation 2.

More information should be provided in schools including primary schools and secondary to help support mental health.

## Recommendation 3.

Staff working in schools, colleges and other professions that come into contact with children and young people who may be at risk of poor mental health should be given more training and support.

## Recommendation 4.

A multidisciplinary, multiagency approach should be taken to tackle mental health stigma.

## Recommendation 5.

A multidisciplinary, multiagency approach should be taken to share information and signpost to the best and most appropriate service for children and young peoples mental health.

## Recommendation 6.

Increase mental health awareness across the Borough of Darlington.

## Recommendation 7.

Where possible there should be some professional mental health worker presence in schools, and in the community.



### **Recommendation 8.**

Mindfulness training should be offered more widely in many venues and to a wide selection of people including those who care for children and young people.

### **Recommendation 9.**

Some resource needs to be put into providing a lower level service for when CAMHS is not the right choice of intervention for children and young people.

### **Recommendation 10.**

Increase the number of support groups around the Borough with a mental health focus, including perinatal.

### **Recommendation 11.**

Mental health should be taught in schools as part of the curriculum, educating children and young people in

day to day situations such as family life, arguments, exam stresses and being brought up in a potentially destructive household.

### **Recommendation 12.**

Raise awareness of apps that can support and improve mental health and wellbeing.

# healthwatch

Darlington



## Healthwatch Darlington

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