



Your Voice Counts: Adult Mental Health

Phase Two Report: January - March 2017

Opportunity for people accessing Adult Mental Health services to have a voice

The Project

The project 'Your Voice Counts' is a project commissioned by North East Hampshire and Farnham Clinical Commissioning Group (CCG). The aim is to gather the public's experiences of using mental health services and look at the support that they receive and how it can be improved. The project achieves the CCG's objectives to involve mental health service users, carers, providers and voluntary and community organisations in providing feedback on services and developing the CCG, Local Authority and partners commissioning intentions.

The Wellbeing Implementation Network, run by Hampshire County Council, was set up to provide a forum for service users and stakeholders to contribute to local service design and delivery and learn about future service plans. In recent years, the number of service users and carers attending the quarterly meetings has been reducing and North-East Hampshire and Farnham CCG are keen to reinvigorate an approach putting service users and carers at the centre.

The "Your Voice Counts" project is focusing on four groups that access mental health services;

- Young people accessing CAMHS or that are/have transitioned to adult services
- People with dementia
- Learning disabilities and/or autism
- Adults with general mental health issues



The project consists of several different approaches including public engagement, focus groups, surveys and follow up conversations; all aimed at increasing knowledge of the needs of the local population and establishing a clear and effective way of ensuring that the voices of service users, carers and the public can genuinely influence commissioning decisions, and ultimately, inform service improvement for local people.

The final reports on engagement with the public will be submitted to the CCG at four periods of the year. The initial focus group work shows that the public are involved right from the start - helping to shape future engagement work as well as sharing their

experiences, ideas and recommendations about services. We will ensure that feedback is anonymous where necessary.

These reports and their recommendations will also be shared with anyone who has taken part in the engagement. The final report, referring to all four categories and mental health services, is due at the end of September 2017.

Executive Summary

Healthwatch Hampshire team have carried out focus groups, conversations, and an engagement event in two localities; Hart and Rushmoor. These events led by Fiona Biggs, it was attended by individuals, carers, professionals and volunteers in the health and social care sector; Community Ambassadors also attended to support the event.



Our key findings included;

- The referral process- waiting for the referral to be processed when at crisis point, there is a need to look at options around preventive services and how this would be more sustainable if they are put in place. Some even suggested that if this is done, they would not be at crisis point.
- Resources- Alternative contact or hub of information rather than through their GP, taking the pressure off GPs as they are the first point of contact however GPs felt that they are not confident in signposting to an appropriate mental health self-help groups or support.
- Information- to be made available from one point of contact
- Parents and carers are not supported enough for their mental health and wellbeing
- Lack of local services for mental health in their area- some are aware of the Wellbeing Centre in Aldershot and feel scared to travel to get the support they need when they are in crisis
- Nearly half of the GPs felt that they were not confident to do a Mental Capacity assessment on their patients and many individuals felt that GPs do not understand or knows enough about their needs
- Adult Mental Health services take on existing or previous service users who were accessing Children and Adolescent Mental Health Services when they are in a crisis



Background: Your Voice Counts Adult Mental Health

The theme for the second part of the project is “Your Voice Counts: Adult Mental Health Services”, continuing the theme of Mental Health issues. The focus themes were access to their GPs, hospitals, mental health services, local support available, and other opportunities.

“The NHS needs a far more proactive and preventative approach to reduce the long-term impact for people experiencing mental health problems and for their families, and to reduce costs for the NHS and emergency services”

(NHS England, 2016)

This part of the project was looking to gather feedback from people about their mental health and what services they do access, and to whether they were aware of what services are available and how well they have experienced these services, if they have accessed this. The questions have been created around the themes that developed and coproduced, through speaking to small focus groups in each locality from November 2016,

along with any individual conversations. This part of the project was carried out in the Hart and Rushmoor locality to see what is available; this covers Fleet, Yateley, Farnborough, Aldershot and Farnham. This was done to get a better understanding of each town's needs and services, as well as making it more opportunistic for people to talk to us.

For more information on Your Voice Counts, please email fiona.biggs@healthwatchhampshire.co.uk



Aims & Objectives

We asked open questions such as;

- "What mental health services did you access to support your needs? And what was your experience like?"
- "Do you know where to go or who to ask if you need support around your mental health?"
- "Did your GP offer alternative support or information?"

The aim was to find out from individuals' perspective of how well supported they feel and whether they have information they could share with us.

Methodology: Focus Group

This 1-to-1 engagement took place alongside an informal session in one of the rooms at Rushmoor Voluntary Action building. The session was attended by 9 adults between the ages of 45 and 70 and 8 people gave feedback and shared experiences.

SUGS is service user led, set up by two gentlemen approximately 5 years ago, and is funded by Broadhurst Trust and has been funded by others such as The Lions and Richmond Fellowship. The group is reliant on information found within the group, volunteering to attend events, meetings, conferences when relevant to mental health services.

All attendees have had or currently received mental health support, and are welcomed into the group to discuss any issues if they wish. It is common for SUGS attendees to have mental health issues, varied from diagnosis.

SUGS' aims to support service users to...

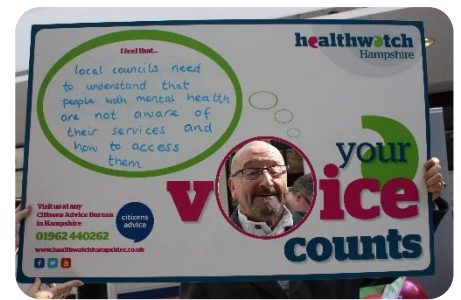
- Take more control of their lives by accessing local knowledge
- Share experiences with likeminded people
- Increase their self-esteem and self-confidence
- Become a successful part of their wider community

Key issues raised during the session

When engaging with the group, there were issues that arose repeatedly and could therefore be further explored during future engagement work.

7 people discussed having depression and mental health problems and were critical about;

The time that it takes to get support through the process of getting referred by their GPs to the adult mental health services, the lack of information when they have been discharged from the service, minimal guidance of how to get future support if there is a relapse and being unclear about the support was available in their locality and GPs being supportive but not being aware of their mental health needs to speed up referrals when patients are in crisis.



Several discussed 'waiting for crisis point' either because the waiting time is lengthy, in order to get a referral back into the mental health services they need, emergency services were not needed before crisis point, or the facilities they need and want to access are in a different town, which results in difficulty of travelling on public transport; not because of the transport options, but the capacity to travel when at crisis point. When asked how this affects the way they access the services they need, they discussed actively avoiding using public transport or travelling at all unless they are in crisis, thus using A&E rather than the more preventative services.

A breakdown of the issues discussed with each of the group that attended the session and spoke with the Healthwatch Engagement Officer on a one-to-one basis;

Case Study 1

Female, Age 56

- Location: unknown
- Not currently receiving any mental health support
- Volunteered at the Wellbeing Centre (Aldershot) last year for 8-9 months, I also accessed it as a service user as it was an ideal environment
- GP surgery: Hartley Corner

If you could improve services to better meet your needs, what would you change?

I found it difficult to access GP when waiting times are long, I go every fortnight or monthly, I attended Conifers which is now Hollies.

I have a lot of friends who have been discharged too early due to cutbacks rather than being based on need.

What would make it easier for you to access mental health services locally?

Transport- there are no direct buses from Fleet: Aldershot, Fleet:Frimley or Fleet:Yateley.

Case Study 2

Male, Age 68

- Location: Cove
- Receiving support from Adult Mental Health Team. Rather not say what mental health condition
- Has a daily support worker to medication for diabetes, heart and mental health. ACASA usually turns up for 30 minutes
- Had a GP visit this week as suffering from tiredness from medication and side effects
- Attends Branches for Art and music

If you could improve services to better meet your needs, what would you change?

Wellbeing café- I can't get there as I am based in Cove.

I don't have any support services in Cove other than the Methodist church for their general coffee morning. SUGS and Branches have been my lifeline though it is difficult to travel to.

Record the difficulties that you have experienced when accessing mental health services locally.

I have been discharged from Community Mental Health Team at Aldershot Centre for Health but I don't feel ready and I don't know why.

Wellbeing Café sounds like a social place to go for a sandwich, etc but I have not attended Safe Haven as I won't travel at night, there are drunks on the buses.

Case Study 3

Male

- Helped to set up SUGS in 2011

Please share your experiences of local mental health services.

I went through the Richmond Fellowship programme and created SUGS as everyone was in the same boat, there are now over 60+ members in the group and the group supports people as there are no false acts, pressure or anyone questioning you. I felt that Adult Mental Health has an agenda.

What would make it easier for you to access mental health services locally?

We need access to computers and printing but this needs funding.

It would help us find out more of what is in the community to share this with the group, rather than relying on word of mouth.

There are no substantial on-costs. Broadhurst Trust is currently funding SUGS.



Case Study 4

Male, Age 50

- Location: Between Frimley/Farnborough (Rural area)
- Receiving support from Adult Services
- Has paranoia schizophrenia

Please share your experiences of local mental health services.

I went to Cedars and Conifers for courses. I suffer from anxiety and Paranoia and they were really helpful.

They gave me methods to cope, I get used to them and then need more methods; some examples such as loud music to block out voices, counting and meditation.

I have had cognitive behaviour therapy but I have to go through the motions to get a repeat referral, this access is needed.

Record the difficulties that you have experienced when accessing mental health services locally.

It takes two buses as I am based between Frimley and Farnborough, to get to where I need to access support- it is a difficult journey as I have anxiety attacks.

I was dismissed from the services as I did not have a phone. I had to go back to my GP for help.

I have things in place to support me as a continuity but I keep getting discharged and it puts me off going if I need to start from scratch to get that support again.

I want to access the Wellbeing Centre but I am struggling.

Case Study 5

Male, Age 48

- Location: Unknown
- Currently not receiving any mental health support
- Has chronic anxiety and reactive depression

Record the difficulties that you have experienced when accessing mental health services locally.

I feel that when everything is going ok with the support in place, you are suddenly dismissed and you do not know why. Everything snowballs afterwards with debt, housing, benefits, TV license, council tax, bank charges and accessing services. I have to go back to my GP at crisis point for medication and then I end up getting sectioned.

If you could improve services to better meet your needs, what would you change?

I need a contact for the snowball phrase. I get to a point where I couldn't face people and I need to text or someone to talk to.

A general support worker to help with everything would work.

Mental Health seems to be stereotyped as a "dirty disease" and people are scared of it, or feel it is contagious, you trying to get out of work and it is very stigmatised.

Case Study 6

Male

- Location: Church Crookham

Record the difficulties that you have experienced when accessing mental health services locally.

Has accessed Conifers service, it is two buses away and I have had panic attacks, resulting in missed appointments.

I am based in Church Crookham and the last bus is at 7pm, I cannot access Safe Haven and they do not offer support for transport.

I have tried to travel when the buses are empty but this is often not possible, I get freaked out by the crowds.

What would make it easier for you to access mental health services locally?

A minibus system- I am happy to financially contribute.

A medical hub in Farnborough.

Case Study 7

Male

- Location: Aldershot
- Set up SUGS as he came out of coma after an accident. He was treated at Aldershot Centre for Health, Hospital Hill
- Also accessed a Mental Health service and came home after 18 months after evidencing improvement
- SUGS was set up with no funding and he fought for funding, successfully achieving this after 12 months of none. It is still funded by Broadhurst Trust and have been by Richmond and Lions in the past
- Had anxiety and depression since he was a child

Record the difficulties that you have experienced when accessing mental health services locally.

Mental Health services are difficult to access when you don't know what kind of support you need. It doesn't tell you about it on any billboards.

Aldershot have all the services they need, it is not in other towns so it makes it difficult to access it.

What would make it easier for you to access mental health services locally?

Posters on billboards to say "Help" and with a contact number to talk to someone and they can signpost to the right direction to specialist services available- all just from one telephone number or email address. Perhaps like a hub of information point, should be done in each town so people who are new to the area would know what to do. This should be on GP billboards, railways, bus stations, hospitals and even schools. Schools should have teachers and assistants gaining simple training (Not excessive) to recognise symptoms of when a child needs help. It is a taboo subject that needs diminishing so people feel that they can talk about mental health.

There needs to be some sort of “yellow pages” of mental health services available in each area, and if there is, why isn’t it known? The services should be accessible in any format whether it is online, or a booklet.

Farnborough is more central than Aldershot. SUGS is based there for that reason though I live in Aldershot. It is easier for a lot of people to get to.

Case Study 8

Female

- Location: Farnborough
- Signposted to SUGS through Richmond
- Was attending Beech House downstairs but now has changed to Wellbeing Centre in Aldershot

Record the difficulties that you have experienced when accessing mental health services locally.

The Wellbeing Centre is difficult to get to because of the transport issues and takes a long time to get there. It used to be easy in Beech House as everything was downstairs and now very difficult with the narrow, steep stairs. What about those who are in a wheelchair?

The location is also difficult as I have family at home that I look after so the time travelling to and from takes up precious time when I need to be back to cook dinner and sort out bedtimes.

I went to my GP and they signposted me to Inclusion (Addiction rehabilitation) for smoking cannabis and they were not very helpful. I didn’t feel supported as they didn’t see smoking cannabis was a problem and I felt it was, and I wanted to quit. They suggested giving me information about a group to attend and they never did this. I never went back.

What would make it easier for you to access mental health services locally?

It would be easier accessing a Wellbeing Centre or similar if there is one in Farnborough, I would go to it. Also for it to be held downstairs or have access to a lift.

I would suggest a support hub where all information from the area is given to this place and it would be accessible for the public to make a decision of which services they would like to access.

Children should also have support and where to go or access help for their parents. Sometimes the parents are not in the right frame of mind to admit help but the children recognise this. My daughter was a young carer and was calling for help from social services but no one came. Years ago, it got so bad that a nurse gave my children electricity money for the meter and donuts. There should be a number that they could ring and say “help”.



SUGS feedback

- + No obligation to come
- + Good up to date information about local services
- + Everyone helps each other
- + Good that it is service user led
- + Good locality for majority of the group
- Word of mouth information, service users had to ensure they had enough information to share

The recommendations were made for future engagement with this group

- The informal setting in the social group works well for this group because it allows them to approach us without feeling pressured. Setting up a focus group within this group means that they incur no travel costs and is accessible for any newcomers.
- There are service users with experience who can signpost to the appropriate support or disclose to VAS who are based in the building in case of a need for emotional support.

- Being able to discuss experiences in a confidential 1-to-1 way is really important because many of them have personal issues, medication and diagnosis' that they might not want to address in front of their peers but are happy to discuss when they understand that feedback is anonymised. There is an opportunity to do this, otherwise this setting is in a group format where individuals share their thoughts with others, which provides meaningful support.

Focus Group: In Summary...

The key issues for this group is getting access to mental health services. Not necessarily the access point but the alternative ways of accessing those services, such as having an information hub where service users could make the decision of which services they would like to access rather than waiting until crisis point to be referred via GP support. Some service users in the group were already aware of the services available but cannot access this unless they have been referred by their GP, and felt that there could be a quicker way of getting this support ahead of relapse or crisis point. Despite the Wellbeing Centre and Haven Café being available, service users find it difficult to travel, particularly those who experience anxiety or panic attacks and public transport is not available after certain hours, ending in some locations at 7pm- Safe Haven is open 6pm - 11pm. Offering community support travel or local facilities might prove to be more welcoming and thus be better attended, as well as having a hub of resources and mental health services information.

Methodology: Engagement Events

Healthwatch Hampshire decided to pursue the general public, with polls, in two events in the week of Mental Health awareness, as well as providing information of where they are able to access support. These were done in the two major shopping centres in the locality;

Rushmoor: Mental Health Awareness Day

Starting conversations: Which do you feel is the most important to you when looking after your mental health and wellbeing?
Monday 10th October 2016

Executive Summary

Fiona Biggs and Rachel Bullock carried out a poll at the World Mental Health Awareness Event in Princes Mead Shopping Centre in Farnborough. This event was led by Rushmoor's Mental Health Forum, it was well attended by professionals and volunteers in the health and social care sector; North-East Hampshire and Farnham Recovery College, Alzheimer's Society, MCCH, TalkPlus, Connect to Support, 121 Youth Counselling, Branches and other organisations, respectively.

Background

The theme for the whole event is "World Mental Health Awareness", in providing awareness around Mental Health issues and the focus themes were around local support available, opportunities, and signposting support.

For more information about Rushmoor's Mental Wellbeing support, please go to <http://www.mcch.org.uk/wellbeing/index.aspx>

HealthWatch Hampshire were invited to promote on one of the tables on the day, to gather feedback from the attendees. Each table had information and support, and could discuss with a representative.

Aims & Objectives

We asked the question "Which do you feel is the most important to you when looking after your mental health and wellbeing?"

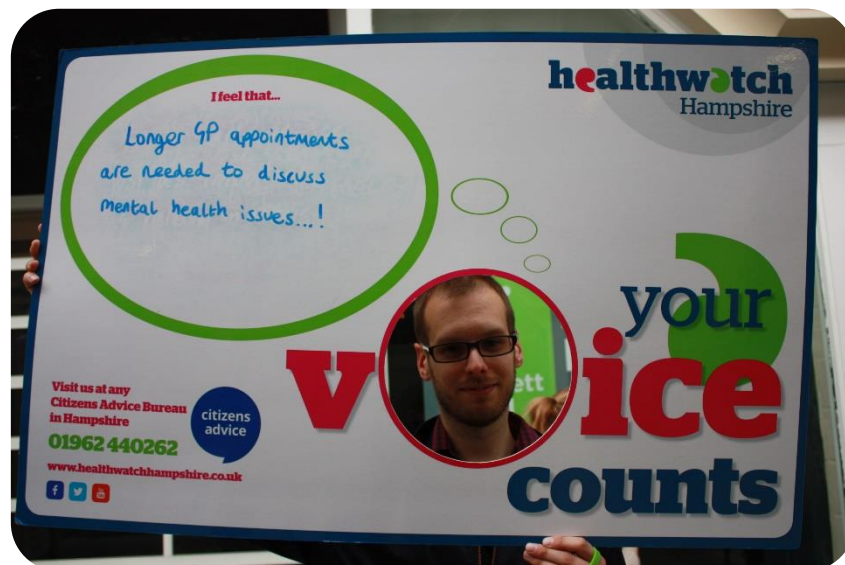
To answer a poll-

- Ability to access social groups and information
- Quicker response time when in crisis
- Your GP understanding your mental health issues
- Access to mental health services locally
- Alternative referral process rather than through your GP

And other sub questions-

- "What mental health services did you access to support your needs? And what was your experience like?"
- "Do you know where to go or who to ask if you need support around your mental health?"
- "Did your GP offer alternative support or information?"

The aim was to find out from the general public's perspective of how well supported they feel and whether they have information they could share with us.

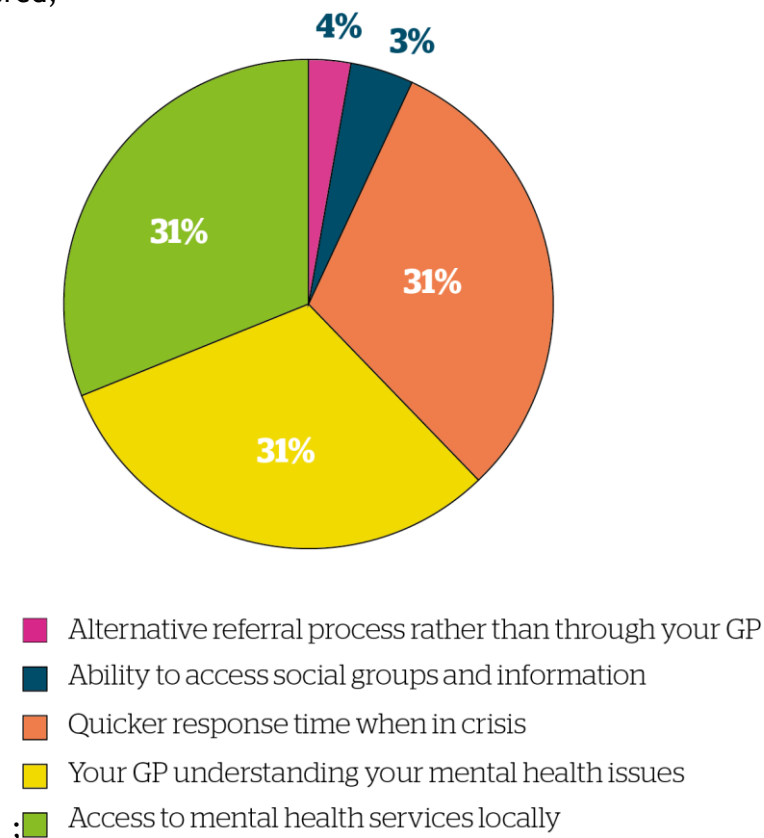


Feedback & Findings

These are the findings from the event, answering the question;

"Which do you feel is the most important to you when looking after your mental health and wellbeing?"

55 people answered;



Others choose to elaborate on their experience alternatively to the poll;

"Accessed GPs but there's no mental health services available"

"I had four overdoses to tell professionals I need help"

"I've tried Safe Haven, TalkPlus and it does not work for me"

"My therapist told me I can get back to them if I needed it after discharge, turns out that this cannot be done. I can't get back in for help"

"I don't know what services are available"

"It all comes down to the human connection- it's the best support"

"I have been waiting nearly 6 months for an appointment- we need better access to services and better communication between services"

"I get no help"

“Communication is key. I’m not confidence in asking my GP questions related to my medication. They also do not communicate effectively to ensure tests are not duplicated by another GP”

“I got sectioned twice and it is the best thing that has happened to me. I was in danger of hurting myself. The support there are brilliant, there needs to be long term support out in the community like this”

Hart: Mental Health Awareness Day

Same focus as Rushmoor: Mental Health Awareness Day with the same questions asked Friday 14th October 2016

Executive Summary

Fiona Biggs and Lizzie Parkes carried out a poll at the World Mental Health Awareness Event in Hart Shopping Centre in Fleet. This event was led by Hart District Council, it was well attended by professionals and volunteers in the health and social care sector; North-East Hampshire and Farnham Recovery College, Alzheimer's Society, Vax Choir, MCCH, TalkPlus, Connect to Support, Fleet OCD & BDD Support Group, 121 Youth Counselling, Branches and other organisations, respectively.

Background

For more information about Hart Mental Wellbeing support, please go to

<http://www.hart.gov.uk/the-council/news/mental-wellbeing-and-dementia-support-hart>

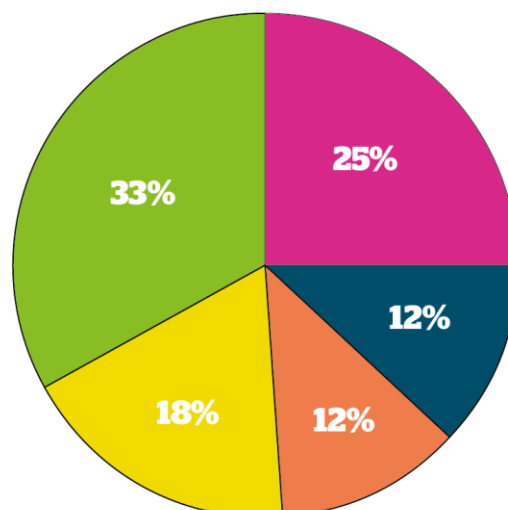
HealthWatch Hampshire were invited to promote on one of the tables on the day, to gather feedback from the attendees. Each table had information and support, and were able to discuss with a representative.

Feedback & Findings

These are the findings from the event, answering the question;

“Which do you feel is the most important to you when looking after your mental health and wellbeing?”

60 people answered;



- Alternative referral process rather than through your GP
- Ability to access social groups and information
- Quicker response time when in crisis
- Your GP understanding your mental health issues
- Access to mental health services locally

Others choose to elaborate on their experience alternatively to the poll;

"I have severe mental health issues and I felt my GP was dismissive of my needs, they did not give alternative support- only my meds. I feel isolated, it's too late for me at my age."

"My GP at Fleet Medical Centre, is brilliant with my mental health issues, I also have a support group which is helpful"

"I had my baby granddaughter staying with me for the last 6 months with her mother, my local GP will not treat her when she was poorly. My daughter has PND and has not been able to access support and I have ended up paying for private care"

"Helping early is just as important as helping in a crisis"

"My GP is fantastic, but getting support for mental health after my referral is really hard- I received a letter after my assessment and I was not supported at all"

"My husband is bi-polar and he waited 8 months to be seen. There are no preventative services available and A&E sent him home. He had an assessment by his GP which took 3 hours and he was sent home with just medication and no alternative support. He wants direct contact with mental health services without going through GP or A&E services"

"My husband had to wait until he was at crisis point to have any support that was appropriate for him. He had to also wait 8 weeks for this"

"We need to harness the support of people in our community before 'popping the pike'"

"I feel that music is medicine & singing releases stress, anxiety & depression"

"Longer GP appointments are needed to discuss mental health issues"

Summary

The three key themes that are shown are;

- Referral Process
 - A few have said that when they are at crisis point, they have to wait for their referral to be processed. They have expressed that there should be preventative services in place to support them while waiting for the support and suggested that if this was already in place, they would not reach crisis point.
 - It was also noted that having an alternative contact to mental health services, they would access this rather than going through their GP, and having more time with the said service. Many have said "Wouldn't it help taking the pressure off GPs?"
- Resources
 - Many have said there is either too little resources or gaps
- Mental Health
 - This was a key theme through discussions and felt they needed more support and understanding through their GP, to be trained further to

support people in need of mental health support or communicating effectively

- A few people have said that they would like access to mental health services in Fleet locality, as they felt there was no appropriate resources available or not known

Your Voice Counts Focused: Engagement Events for Adults accessing/accessed Mental Health Services

The Your Voice Counts engagement events were held in two localities. This was done from the feedback of having an opportunity to access these events locally.



We organised a series of activities using polls, target boards, voting boards, cupcakes, and offered filming and photography. This method was used to ensure the questions were broken down to make it a more of an informal setting, with fun interactive ways as well as being able to communicate in several ways too. This enabled people to have an opportunity to tell us in their own way what their experience was like.



North East Hampshire and Farnham were interested in finding out specific feedback from individuals of their experience with Surrey and Borders Partnership Community Mental Health team, and how they deal with mental health issues at crisis point- if they had alternative support in the community.

The questions through the activities were also tried and tested with volunteers, to ensure the use of language was simple enough to be understood.

Questions

- Signposting
 - Where do you hear/find services that you need?
 - How would you like to find out about what services are available?
- SABP Community Services
 - Have you used these services previously?
 - Did you see anyone from the Community Mental Health team? What was your experience like?
 - How accessible was this service? Did you have to get through a referral process?
 - How were you discharged? Could it be done differently?
- GPs
 - How easy do you find your conversation with your GP when discussing mental health?
 - How could your experience of your GP appointment be improved?
 - Have you spoken to your GP about how you feel?
 - Did you feel your GP understood your needs?
 - My doctor understands what I need/ does not understand what I need
 - Do you feel your GP know enough about you to help with how you are feeling?
 - How would you feel with direct access to a mental health professional within a GP surgery and booking them through the receptionist?
- Generic
 - Who do you ask for help when you feel anxious or depressed?
 - Is anyone dependent on you?
 - Have you used Safe Haven in Aldershot?
 - Did you find this good/bad? Why?
 - In regards to your mental health, do you feel involved in your care?
 - What is important to you in order for you to stay healthy?
 - Why is it important to be listened to?
 - Do you have any new ideas you would like to share with us to make health services and mental health services better for you?
 - Do you have any other support from other services? Please state who, how and where they are based?
 - Mental Health services are planned on the New Models of Care- if there is an urgent care centre, how far are you prepared to travel?
- Crisis
 - What happens when you are at crisis point?
 - Who helps you?
 - Where did you try and get help? Did they help and how?
 - Do you know where to go in a crisis?
 - How do you prevent yourself reaching crisis point?
- The most important to you to the least important to you
 - I want to get more information to help me and go to social groups
 - I want someone to help me quickly when I really need it
 - I want my doctor to understand my mental health issues (Feeling low, anxious or depressed)
 - I want to access to mental health services near to where I live
 - I want to be referred by someone else instead of through my doctor

42.86% feel they are involved in their care, when it comes to their mental health.

Other conversations

The project also gives people the opportunity to tell us individually, in a comfortable environment, telling us about their experience with the services they have accessed.

"I had a mental health issue when I was young. When I joined the army, I felt ok (Was not in combat) but now feels low again. GP has not referred me to other services- only prescribed medication. He is based at Giffard Drive GP Surgery- no Nepali Doctors, but they have Nepali staff.

Rushmoor Healthy Living Nepali team were trained in mental health, but there are some problems- it's not working well, and not friendly enough for the Nepali community, not accessible. People not able to get the mental health support. Rushmoor Mental Health is great for physical activity, but not for healing mental health."

"Yes - I was involved in change of medication but I was not involved in my discharge process"

(Hart)

"I want more involvement. At the moment, there's a pyramid structure when it comes to designing services. But it should be more like a see-saw where we (service-users) are much more involved in the design of these services"

(Rushmoor)

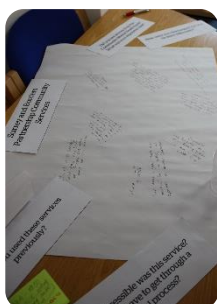
"I understand that we all need to move on at some point, but we should be the ones to make the decision of when we are ready to move on" (Rushmoor)

"Hampshire carers had a care co-ordinator (via Hampshire County Council) to support carers and this is no longer... Surrey has them. The care co-ordinator was under pressure with the number of service users" (Hart)

"Yes, I'm able to self- manage at the moment" (Hart)

"No, I don't feel involved in care- and if we are, no one actually listens to what we are saying" (Hart)

"No- we don't have a carers support worker. We didn't have involvement in the new model- the support worker was supposed to be replaced and that never happened" (Hart)



"Absolutely not. Funding gets cut. No consultancy meetings. We don't get told that groups are being cut- at meetings, providers vaguely tell us that these groups are cut" (Rushmoor)

"I feel involved in my care" (Rushmoor)

"I'm not consulted on changes - mixed messages given"

(Rushmoor)

Why is it important to be listened to: The Key

When Healthwatch Hampshire engaged with the public, they felt it was important to ask the key question of why it is important to be listened to. This question produces a view and findings to influence how services can be shaped and improved with their ideas and thoughts.

"I'd like the MH team to listen rather than turn round and say there's nothing more they can do. I'd like to understand why I'm the way I am." (CA Survey)

"He explained he felt "rejected". He said "why can't they give you the benefit of the doubt, I rang as it was an emergency, why in that phone call could they not have just given me the benefit of the doubt. It is like the doctors when you are trying to get an emergency appointment, they make you feel like you are lying" (CA Survey)

"I often feel frightened to ask for help." (CA survey)

Do you have any new ideas you would like to share with us to make health services and mental health services better for you?

"A discharge process. After discharge there is still a need for someone to be available" (Hart)

"In a crisis, there is CMHRS team 9am to 5pm, Safe Haven 6pm to 11pm. After 11pm? Nothing except A&E" (Rushmoor)



"Home Treatment team should do visits after 9pm" (Rushmoor)

"Safe Haven in Farnborough please" (Hart)

"I'm worried about discharge from CMHT, don't know what's going to happen, what services are available. Sometimes I can see if I'm struggling, it could be in my GP surgery- I need to chat to someone to keep me healthy" (Hart)

"Longer appointment times so I don't feel rushed and flustered."(Rushmoor)

"Never any fore planning for mental health services" (Rushmoor)

"Creative outlook. For me, drama groups help. Others like art. There needs to be these outlet services available. Group funding is getting cut" (Rushmoor)

"Need fluidity" (Rushmoor)

"How about more money to be able to better services. Neurologists should go on a course on how to speak to patients. Do you work? Why not? You don't look depressed" (Rushmoor)

“More understanding of the different types of mental health illness, such as OCD. Welfare benefits do not include enough help for mental health (PIP/DLA)” (Hart)

“More support around bereavement- I was given only sleeping tablets and that doesn’t work. I still have the problem when I wake up” (Rushmoor)

“To have someone to talk to me” (Carer, Hart)

“CMHRS team to listen when I’m struggling and not dismiss my worries” (Hart)

“Someone to contact who validates my feelings” (Hart)



“Reminding me to see my GP now and again for health checks” (Carer, Hart)

We also attended other events to give us an idea of what issues were happening either locally and nationally. This gave us an opportunity to access other information that may be of relevance to the project;

- SHIP TCP: Hampshire- planning Year 2 on the successes and changes
- Mental Health Future Workforce Event
- Blue Local Implementation Group
- Voice- Rushmoor
- Better Local Care
- Patient and Public Engagement Group
- North East Hampshire & Farnham and Surrey Heath Mental Health Forum
- Carers Hub: Yateley, Farnborough, Fleet and FoCus
- Link Light Mental Health Forum
- Innovation Conference
- FitFest (Parents and Carers Event: PACE)

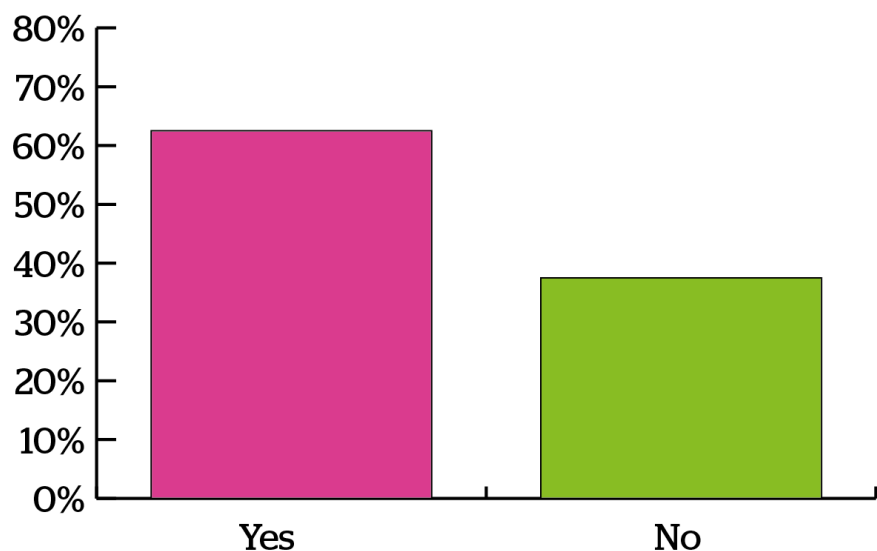
Feedback Analysis

These are the presented findings throughout the engagement;

Physical health affects our mental health, and vice versa. (DWP)

“GP is supportive and will always get back to my daughter when she makes contact” (CA Survey)

Have you spoken to your GP about how you feel?



“Has a good relationship with Doctor and normally gets a same day appointment” (CA Survey)

“Doctor very very supportive and see every 4 weeks which is enough” (CA Survey)

“Apart from one GP, all the GPs I've seen in Aldershot have been helpful and supportive. I'm only staying in Aldershot because of the support I'm getting” (CA Survey)

“The diagnostic questionnaire that my second GP used to diagnose a mental health condition only took 10 minutes but was very accurate” (CA Survey).

“My GP has been very good and I can't fault him” (CA Survey).

“I feel very well supported by my GP at the Salisbury Road practice. I can talk to them about anything.” (CA Survey)

“My only support now comes from the GPs I see at Victoria practice and they're all very good, they listen to me and understand me.” (CA Survey)

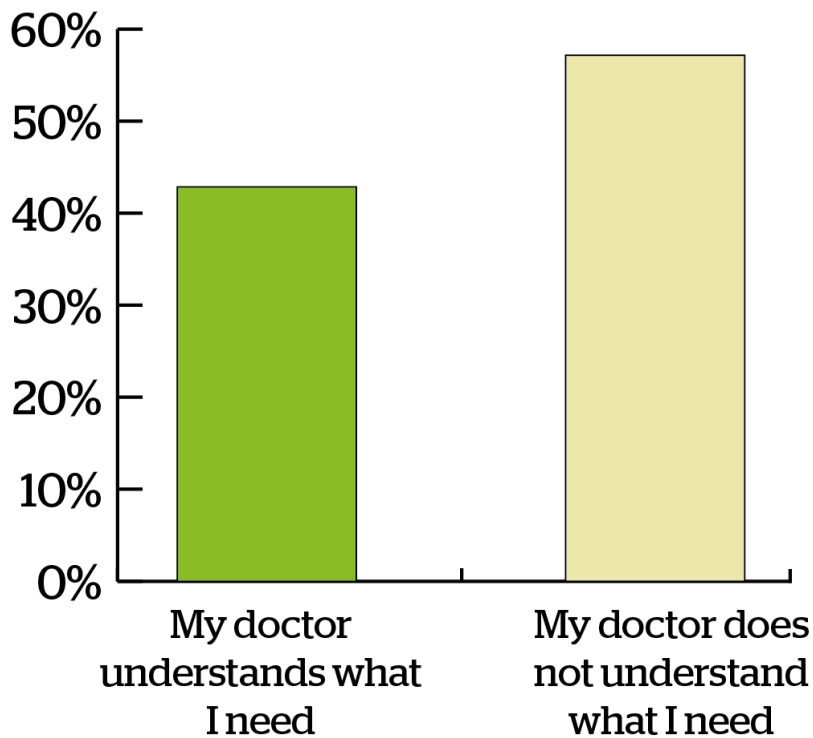
“I have a very good GP who diagnosed me with Post Natal Depression. Her name is Dr Paine at Princes Garden Surgery. She has been very supportive, and is always there for me, she will phone me back if not immediately available. She has time for me and takes me seriously.” (CA Survey)

“My GP is brilliant, not judgemental and very supportive with my medication” (CA Survey)

“Have a fantastic GP” (CA Survey)

“Feel well taken care of - GP looks after me” (CA Survey)

“My GP gives me as much time as I need, she is caring and sees the person not just the illness. I feel she has saved my life, and her availability is massively reassuring for me.” (CA Survey)

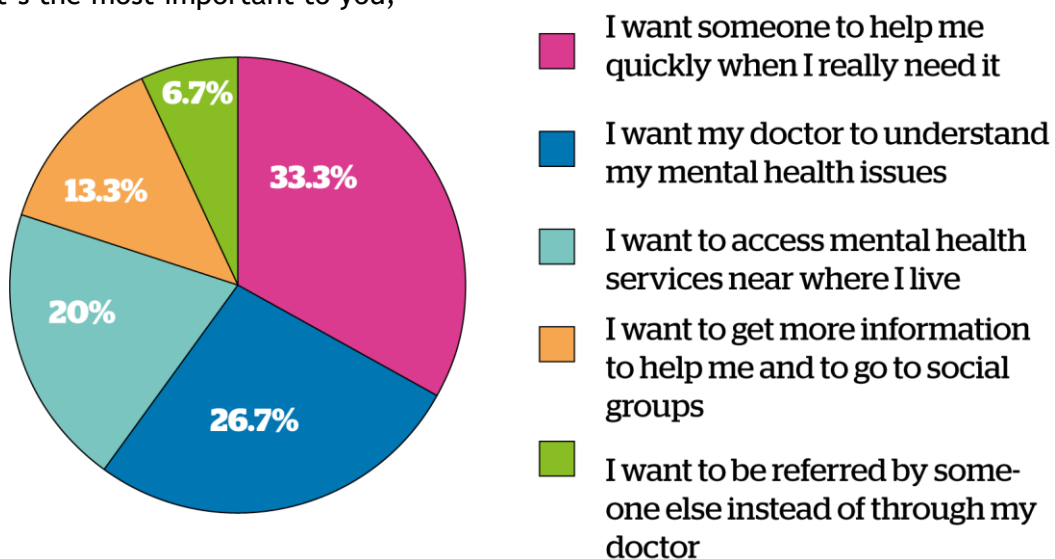


“I do not feel that my GP understands my mental health problems properly, so I sometimes struggle to get him to understand and I feel like he is not really interested.” (CA Survey)

“Feel neglected by GP, did not look at her sickness and feelings.” (CA Survey)

“Felt deflated after seeing GP - depression and arthritis - just said she was 'too fat' - wasn't helpful with how to lose weight. Advocated exercise but can't due to arthritis and food tips suggested egg whites but don't eat eggs.” (CA Survey)

What's the most important to you;



● **How easy do you find your conversation with your GP when discussing mental health?**

“Very difficult. They didn’t understand- or really try to understand” (Rushmoor)

“Need to be more structured in the way they signpost” (Hart)

“Focused on medical issues not mental health- I was conscious of limited time” (Rushmoor)

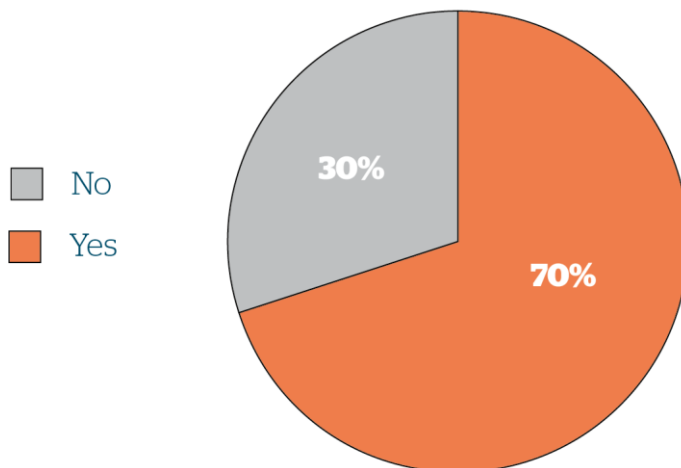
“Very difficult, my GP is there for my bodily functions but not my MH. My GP didn’t want to talk to me about MH but sent me back to the MH community team. It was not really what I wanted” (Hart)

“Fairly easily, my GP explains when I don’t understand” (Hart)

“Just because I’m not crying doesn’t mean I’m alright. GP doesn’t help much” (Rushmoor)

“Most people have been great. However, his GP difficult - infamous for lack of understanding, made client fear him” (CA Survey)

Do you feel your GP know enough about you to help with how you are feeling?



● **How could your experience of your GP appointment be improved?**

“Not having to recap information. That is in my previous notes” (Rushmoor)

“Difficult because I got the impression that he didn’t want to know” (Hart)

“Constant/consistent mental health training is needed. (Maybe every 6 months to do half a day) on these courses, talk to people with MH. They need to listen to individual stories of people who have mental health. Experts by experience” (Hart)

“Longer appointment times to talk about mental health” (Rushmoor)

“Ask me how I’m feeling. Open question allows me time to explain and longer appointments please!” (Rushmoor)

“Appointments to be longer” (Hart)

“My GP was & is annoying” (Hart)

“System is spot on but the system is over stretched. Doctors are just people doing a job. The system is at breaking point” (Hart)

“Not having to deal with hostile receptionists. For GP to try and understand and to be ‘on my side’ and prepared to help” (Rushmoor)

“I can’t go to hospital for this. I need to go to a GP but they are not trained in mental health” (Hart)

“MH consultant” (Hart)

“I try not to go to the GP too much as I don't want to bother them and feel they have people worse off than me to deal with.” (CA Survey)

“I was desperate in December, feeling suicidal and asked my surgery for a GP appointment. They told me nothing was available until January and that I should go to A and E if desperate. It took a lot of effort for me to ring the surgery to ask for an appointment and this rejection really knocked me back. I've cancelled a GP appointment because I couldn't face it, I don't want to talk to anyone when I'm feeling really low. They don't understand how hard it is to make an appointment and turn up when you feel so bad.” (CA Survey)

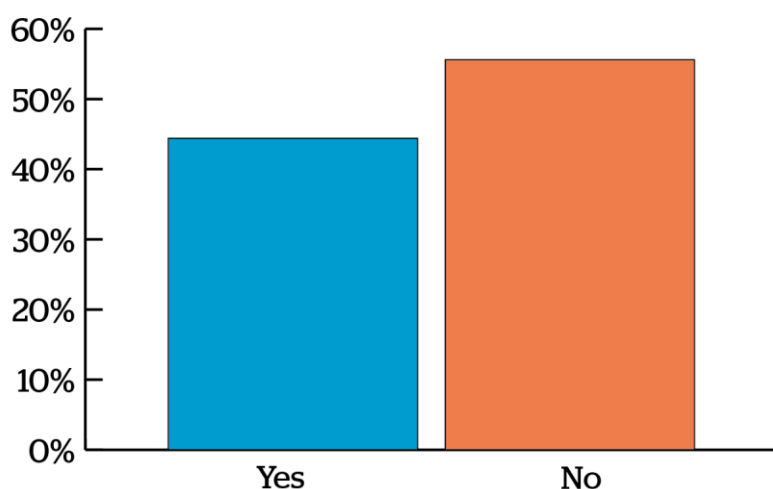
“GP is overstretched and you get a limited time for your appointment so can only address one issue not multiple issues so MH does not get addressed.” (CA Survey)

“Terrible to access GP can't get appointment or see same doctor-don't feel I have a relationship with doctor like I used to have. Going through everything each time is very stressful as that causes anxiety and stress” (CA Survey)

“It can be difficult to access GP as she likes to see same GP who is very good and she doesn't like change. She can have to wait over a week to see her GP.” (CA Survey)



Did you feel you GP understood your needs?



“My GP is good, but the first doctor I saw wasn't helpful and just handed me a leaflet. It took me a long time to pluck up the courage to go the surgery and it really knocked me back when I felt they didn't listen.” (CA Survey)

Where do you hear/find services that you need?

“TalkPlus. My GP sent me to them. I was sent to the PTSD group in the wellbeing centre but it is no longer available” (Rushmoor)

“A couple of years ago, the crisis team came to my house and told me about the mental health services. I was assigned a CPN, they came to me, but I would rather have gone to them because I like to keep everything separate. I went to a support group in Beech House for 8- 12 weeks, this is for people with MH needs. Services were run at the wellbeing centre and I saw leaflets explaining about mental health services. I registered to get more support and they put me in a group. At first, it was scary but I enjoyed it. I find it really helpful” (Rushmoor)

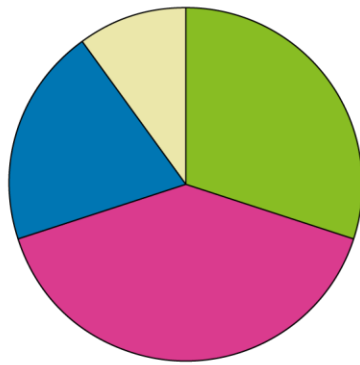
“My carer told me about Branches” (Rushmoor)

“My doctor referred me to TalkPlus, who then referred me to a counsellor but only limited to a number of sessions. I went back to my doctor, who referred me to a psychiatrist but then nothing happened. They've abandoned me” (Rushmoor)

“I saw a poster regarding mcch. I phoned the number and they helped immediately, they gave me the help I needed. i.e. a counsellor and working volunteer” (Rushmoor)

“Local mental health charities provide a valuable service - only ever used the online services available but they offer interesting advice and how to get support.” (CA Survey)

Do you have any other support from other services?



- 30% received support from the Community Mental Health team of the Wellbeing Centre/Safe Haven
- 40% found support from third sector organisations
- 20% don't know where to look for help
- 10% found support through the police

How would you like to find out about what services are available?

"It would be good if CMHRS team give and supplied relevant information. Or via a CPN/care coordinator" (Hart)

"From a local support group and internet. Very little information from CMHRS team" (Hart)

"I would like information about what happens and where to go when they are discharged from mental health services. Could we have signposting? A 'buddy'/peer support? A 'step-down' service?" (Hart)

"Do Surrey providers link/integrate with Hampshire services especially on discharge?" (Hart)

"Local carers group" (Hart)

"I made them aware I was not available for two months and the wellbeing centre cancelled my appointment" (Rushmoor)

"Online" (Rushmoor)

"Newspaper" (Rushmoor)

"Online but everything with one link" (Rushmoor)

"Council newsletters- probably the best way because everyone gets these and they can see it" (Rushmoor)

"Need campaigns to let people know about these services. Don't have to spend lots of money to let people know about them" (Rushmoor)

"TV Advert- gives public awareness where to go or phone numbers. No need for referral different times of day" (Rushmoor)

"LA/CCG website. GP practice" (Hart)

“If there is a number to ring, I can use it rather than searching on the internet when you don’t know what to search for” (Rushmoor)

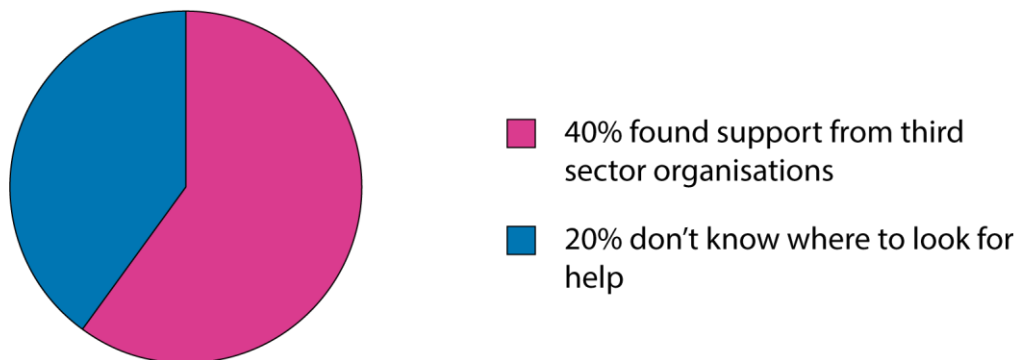
“Somebody with good local knowledge who you could phone or meet in person to get advice and information about local services.” (CA Survey)

“Clients need better information about local services and GPs/statutory services need to be doing more to promote local voluntary sector services.” (CA Survey)

“Better information about services and staff being less patronising and respecting me more.” (CA Survey)

“I don’t know what support groups are available, it would be good to have more information about what’s out there.” (CA Survey)

Have you used Safe Haven in Aldershot?



● Did you find this good/bad? Why?

“I rather be at home and have an episode than go to Safe Haven. I may call as I don’t drive, I don’t feel safe going there, it’s too busy too when you visit, and its locality of being opposite a pub is not good. It’s £20 for a taxi- from my home to their door too, it’s not near enough”

“I’ve rung up in the past and whoever is on reception are reluctant to let me talk to the duty officer in emergencies.”

“Safe Haven in Farnborough please”

“MH cafe in Aldershot is good and they do an excellent job.” (CA Survey)

“I don’t like the Aldershot Safe Haven and won’t go back there. It is depressing and they all know each other there. It is not what I want to do in the evening.” (CA Survey)

“Stop sending everyone to the Safe Havens, they are not appropriate for everybody.” (CA Survey)

“I did not like the Safe Haven. I thought it was unfriendly and the staff either didn't talk to you at all or acted weirdly and talked to you like you were a child. My friend I went with was upset and nobody spoke to her and they just left her with me. They all seemed to know each other there and not be interested in new people. The Safe Haven is not the sort of place I would like to go to.” (CA Survey)

“I don't very often go to the Safe Haven because it can be hard to get to and is not somewhere I feel like I want to be.” (CA Survey)

We asked people “How would you feel with direct access to a mental health professional within a GP surgery and booking them through the receptionist?”



“I would like a session with the mental health expert to help me managing my situation, my first language is Nepali”

“That would be fantastic- after my discharge it would help me”

“Excellent. Our GP hasn't a clue about how to deal with/help/understand someone with OCD. It would help if the GP receptionists were a little less hostile”

“That would be a good idea” (Carer)

“Great idea!”

“It would be nice to phone someone”

“Very good idea- how to publicize it though?”

“I would absolutely use MH services if they were in my GP surgery, these are places I know and trust. There is a ‘crazy’ system of calling GP and then to make an appointment somewhere else. I get sent a letter but I am too anxious to go because it's somewhere that I don't know and I would rather be in a familiar environment”

“It sounds like a good thing however I don't feel like I need one”

“Excellent idea. So much better”

Who do you ask for help when you feel anxious or depressed?

"No one. I haven't got anyone"

"I also want to speak to someone about my insomnia problem but I have nowhere to go" (Spoken and translated from Nepali language)

"My care coordinator or family. Maybe Branches"

"Phone or speak to my husband"


"Carers and family"

"No services are available for my mental health problem. I am on prescriptions but I have nowhere else to go for help apart from this (Your Voice Counts event taking place)"

"I believe that Branches and the Samaritans both provide excellent services. The Samaritans are supportive, easy to contact, compassionate and empowering. Branches focus on "wellness" rather than illness and on enjoying one's life whatever experience of mental health one may have. Helps to empower service users and improve their quality of life. It promotes independence and the effective use of the concept of recovery. CAP (Community Access Project) also provides an excellent, effective and empowering service."

"I feel confident that I know the services are there and I can access them when I feel low or need support, I know they are there and I can ask for support when needed"

"Wellbeing centre"



“Safe Haven”

“Recovery College course has helped”

“Family member/
Carer”

“Support meetings”

“Family member/
carer who will
then approach
CMHRS team on my
behalf”

“Care coordinator from Aldershot and if she is not around (as she is part time) I call my mum. Daft thing is the wellbeing centre has another part time member of staff but they work the same hours as the coordinator!”





We asked: "Do you have any other support from other services? Please state who, how and where they are based?"

"Best support when in crisis comes from local police and Pheonix Youth services in Fleet"

"I went to Fleet CAB and I felt they did not understand my mental health though I told them"

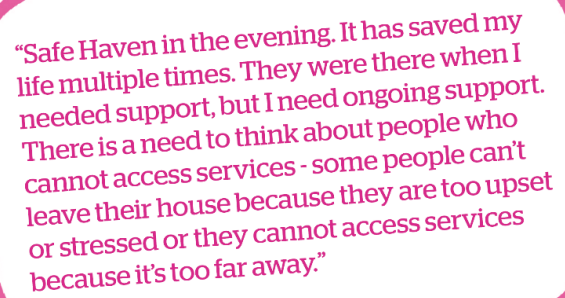
“Supported living in Basingstoke”

“CMHRS team (Home treatment team when in crisis)”

“Sanctuary community support workers- short term need to match workers with clients”

“Care support groups”

“Creative writing group in the wellbeing centre based in Aldershot. It’s a course for up to 12 weeks and you are expected to move on- not sure what to move onto as there is nothing else available”



“Safe Haven in the evening. It has saved my life multiple times. They were there when I needed support, but I need ongoing support. There is a need to think about people who cannot access services - some people can't leave their house because they are too upset or stressed or they cannot access services because it's too far away.”



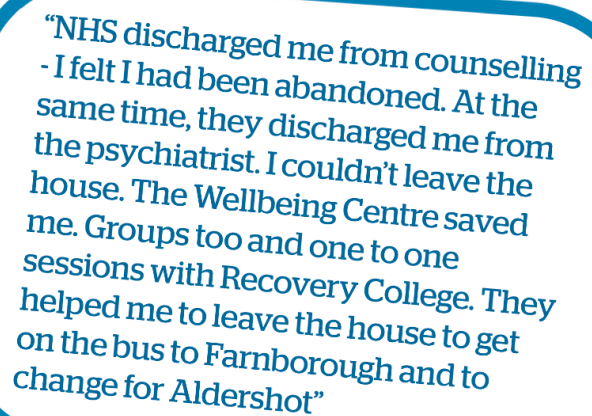
“Where can I get help? I cannot rely on prescriptions alone! I want support and therapy”

“FoCus” (Carers’ group)

“TalkPlus was really good”

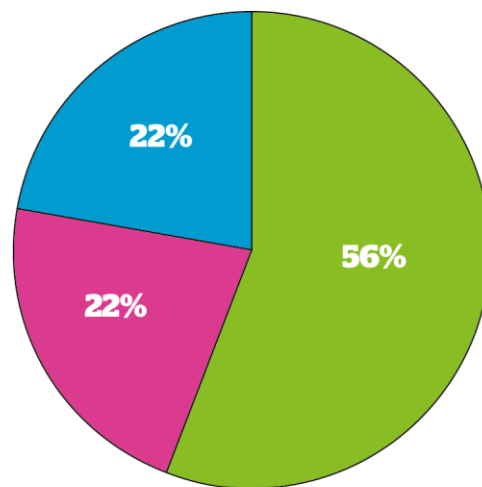
“I didn’t have help. I do now through help from mcch” (Rushmoor)

“I have a care coordinator at Aldershot Centre for Health”



“NHS discharged me from counselling - I felt I had been abandoned. At the same time, they discharged me from the psychiatrist. I couldn't leave the house. The Wellbeing Centre saved me. Groups too and one to one sessions with Recovery College. They helped me to leave the house to get on the bus to Farnborough and to change for Aldershot”

Mental Health Services are planned on the New Models of Care - if there is an urgent care centre, how far are you prepared to travel?



- Five miles
- Ten miles
- Fifteen miles
- Twenty miles or more

“Awareness and understanding of the barriers that I face in leaving the house and accessing services. More CBT, even if it's only fortnightly or monthly, would help.” (CA Survey)

Some commented to say they rely on public transport and proved difficult out of hours which then they have to rely on taxis. One said a taxi fare from Fleet to Safe Haven in Aldershot cost them £20 and struggled to afford this.

We also wanted to enquire around the use of Surrey and Borders Partnership Community Services, these were the results;

- **Have you used these services previously?**
- **Did you see anyone from the Community Mental Health team? What was your experience like?**

“Yes, but not recently, used to be very good” (Carer, Hart)

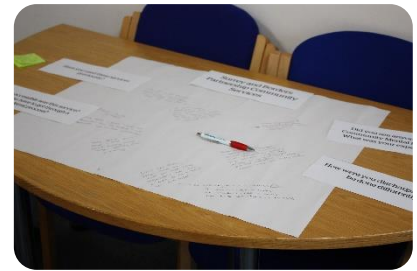
“I use services in Hampshire rather than Surrey. But there isn't much in Surrey. Welcome project is there but they do not have central services. All scattered around” (Rushmoor)

“Yes, I was referred” (Rushmoor)

"I have been a service user for 10 years and I was referred by my GP. I feel dependent on the service and I am being discharged in June. This is scary. There has been no explanation about what will happen after discharge- there's no discharge plan or information for ongoing support" (Hart)

"The Hollies provide excellent support." (CA Survey)

"I have found that Basingstoke Assertive Outreach have been very helpful. They would be there for me whenever I needed them. Either by phone calls or by coming to my home. They have also helped in practical ways by helping me to decorate my flat, and they supported me with my family court cases. The help they gave was very intense. I had their help almost every day as I was extremely unwell." (CA Survey)



"Never found group therapy helpful but one to one with support worker through MH team was really useful" (CA Survey)

"I had 6 sessions of counselling from The Meads. I found it pointless, as it takes me a long time to trust someone and open up to them, and by the time I was getting used to the person the counselling stopped. I was told I'd have to wait 8 months before I could go back again, so I didn't bother, as it would be another person and I'd have the same issue over again." (CA Survey)

"The counselling wasn't helpful as I only had 6 sessions and found that this started to explore and open up other issues which then couldn't be dealt with. Nothing was resolved for me and there was no further support available. It took me a long time to get over this experience." (CA Survey)

"MH team said I wasn't bad enough to get help" (CA Survey)

"They check up on me every 2-3 weeks and have given me a number to contact at any time if I need help. This is reassuring for me. They are never judgemental. They've responded very quickly and identified that I need more help and put this in place." (CA Survey)

● How accessible was this service? Did you have to get through a referral process?

"It wasn't accessible enough- I didn't meet the criteria" (Hart)

"They told my children to forget the past and look to the future differently" (Carer, Rushmoor)

"Variable access- sometimes it's very good but sometimes lacking availability to talk to someone" (Carer, Hart)

"Crisis line doesn't help. People don't call you back. Make suggestions like 'have a bath', 'go for a walk', etc. Not helpful" (Hart)

"Took over 12 months" (Hart)

“Safe Haven is great- staff are fantastic! But the building is not appropriate. Not accessible (Stairs- no lifts)” (Rushmoor)

“Camberley Safe Haven is only open 2 days a week- Monday and Friday. Need longer (Possibly down to money)” (Rushmoor)

More information was found via Citizen’s Advice’s survey;

“My Post Natal Depression was diagnosed when my daughter was 3 months old, she is now 16 months old and I have only just had an appointment with the psychiatrist. It’s difficult to get childcare to free up the time to receive the therapy. I found this very stressful, and felt that they weren’t very understanding about the child care issues. They kept offering me appointments which I couldn’t take. I think some people might just give up. There are only 6 sessions available which doesn’t seem very much.” (CA Survey)

“Client has been finding it difficult to receive support now he is working. The support team workers have been ringing but he explained it is easy on the phone to just say "I'm doing fine". Especially as he doesn’t know when they are going to be ringing. Often he misses the calls or if he is at work or travelling out he said he can’t talk and isn’t able to say how he is feeling. He said he is often rung when he is at work. He also explained how it can be difficult to access support when you are working because you have to book time off work, like when he needed to arrange a bed. He has also been recommended groups at Farnborough Library but to attend he would have to book time off work.” (CA Survey)

“Difficult to get hold of preventative MH service as have to self-refer as discharged. Wait times are terrible and MH don’t have same psychiatrists each time” (CA Survey)

“Really has very little money and no car so subsidised/cheaper transport would really be the only way” (CA Survey)

“Better transport links directly to services or subsidised transport” (CA Survey)

“Transport can be a problem, especially in the evenings. Encouragement to go out. It helps if the service is laid back and casual and friendly.” (CA Survey)

“My daughter has to travel to get support, she’s currently on the waiting list for a clinic in Epsom and we have to use public transport to get there, there’s nowhere more local available.” (CA Survey)

● How were you discharged? Could it be done differently?

“Community Health used to be 1 mile from my house. They then moved to Aldershot. My psychiatrist was there but changed areas and discharged me, saying that there was nothing that they could do. I had a new psychiatrist and they were not as good and then I got signed off” (Hart)

“Evening access is needed! If services were working, we wouldn’t need a crisis line. Need something in the evening” (Hart)

“I had good experience of the community mental health team. I can’t praise them enough” (Rushmoor)

“Make sure someone is ready to be discharged. Cannot put a time line on it. Sometimes people say all the right thing to be discharged but are actually not ready- ensure they are fully ready” (Hart)

“I received CBT after a referral from CMHT, and found this really helpful. The CBT has finished now, and I receive ongoing support from the Well Being Centre. This has saved my life, as there is always someone there that I can talk to, especially in the evenings. I have a peer support group there, and also courses that I can attend.” (CA Survey)

“I feel that the CMHT have been helpful and I was seen regularly. But I felt my discharge was a bit cut off as though I was left to it.” (CA Survey)

“Client described how he felt the support he received worked but he was let go too early and support stopped too soon.” (CA Survey)

“They are too rushed to discharge you before people have fully recovered. The services have too much pressure on them from the government to get people back home as quickly as possible often before they have fully recovered.” (CA Survey)

The current theme around mental health throughout Your Voice Counts has been around Crisis and the need for preventative services to be in place, we found that it was difficult to gather feedback around this as service users were reluctant to share information that may have a negative impact on what they feel is minimal support. We had some answers which shows examples of what support needs individuals have at crisis point;

● **What happens when you are at crisis point?**

“My son, 19, is not getting support at crisis point. No services available and 999 is the only option. We find the police more able to talk to him” (Rushmoor)

“The crisis line is rubbish.” (CA Survey)

“The local crisis services - the crisis phone line, the home treatment team, The Safe Haven - are rubbish, I do not want to be involved with them.” (CA Survey)

● **Who helps you?**

“Husband” (Rushmoor)

“My mum” (Hart)

“People who are going through the same things as me” (Rushmoor)

“My mum” (Carer, Hart)

“Safe Haven” (Rushmoor)

“No one” (Rushmoor)

“Family” (Rushmoor)

● Where did you try, and get help? Did they help and how?

“It feels like they are tearing our communities apart. Friendship is the key to recovery”
(About group funding cuts in Rushmoor)

“Safe Haven. I went three weeks ago, and they were amazing” (Rushmoor)

“The help was after my crash- the creative writing group in the wellbeing centre (Aldershot) got me through my crash. It did the same for my mum too. We ended up helping with each other” (Rushmoor)

“Safe Haven/Wellbeing Centre. I found the wellbeing centre via a poster. They were better than a NHS counsellor- the counsellor was useless” (Rushmoor)

“Crisis number passes you off” (Hart)

“In theory, yes, but CMHRS team often too busy to see me and say ‘go to safe haven later’. I go to Safe Haven who say ‘how do you expect us to help?’ and ‘go to A&E’. I try the crisis line and I’m often put through to the answer phone and when they do call back, they read from a script and don’t help me. They also say ‘go to A&E’- so I always end up in A&E 😞” (Hart)

“Groups like Branches, helps me to stay well.”

“Talk Plus is good, Safe Havens are brilliant” (CA Survey)

● Do you know where to go in a crisis?

“Safe Haven- but I don’t like going. Judgmental staff. I want to go somewhere where I can be, be. I don’t want to act ‘I’m fine’, when I’m not” (Rushmoor)

“Crisis line- useless at signposting” (Hart)

“Crisis line- no, CMHRS team- no, Home treatment- no, Safe Haven- no, Phoenix Youth in Fleet- yes!” (Hart)

“I’m lucky to know where to go but many don’t” (Rushmoor)

“Family or support worker” (Rushmoor)

“By the time, I see someone, the crisis has eased” (Hart)

“General support and regular appointments with GP” (CA Survey)

“Having regular, fixed visits to a professional allows him to cope better” (CA Survey)

“Constant use of doctors and talking therapy” (CA Survey)

“She feels she has got good access to her GP and knew there were crisis support through the Crisis Line and Samaritans, and she said she knew preventative support was available. She has now accessed Talk Plus through her GP. She keeps very tight budgets and monitors her money weekly with Lloyds bank via text statements which she feels is really helpful.” (CA Survey)

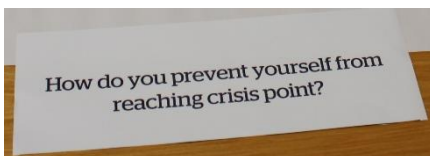
● **How do you prevent yourself reaching crisis point?**

“I clean!” (Rushmoor)

“I feel there is nothing was ok to go on for” (Rushmoor)

“Obviously upset, distraught- I have bad thoughts about family. I was having car accidents” (Rushmoor)

“Try to relax and distract myself with television or music” (Rushmoor)



“Recovery college courses and self-help groups” (Rushmoor)

“I go to Safe Haven before reaching crisis point” (Rushmoor)

“Long term support- keeping things as it is” (Rushmoor)

“Long term groups to keep me safe” (Rushmoor)

“When I start to struggle, I try to motivate myself, use distraction techniques and ask for help” (Hart)

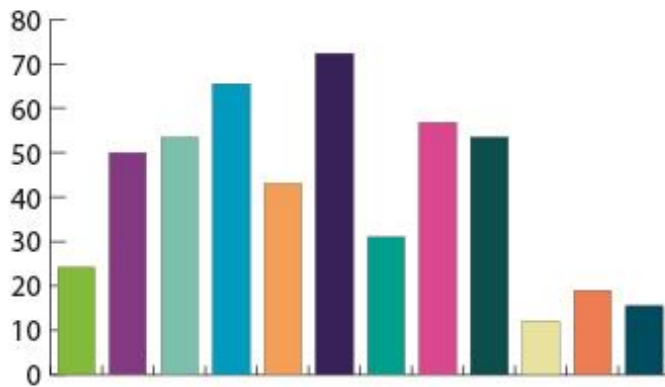


Survey Feedback Analysis from Citizens Advice Bureau

CAB have conducted a survey in the localities of Hart and Rushmoor on behalf of Healthwatch Hampshire. The results have been included in the analysis of the engagement work Healthwatch Hampshire have carried out;

Citizens Advice surveyed 67 clients about their experiences of local mental health services. One of the questions we asked clients was “Which of the following do you consider to have a negative impact on your mental wellbeing?”

Which of the following do you consider to have a negative impact on your mental wellbeing? Please select all that apply



- 24.1% - Access to my GP
- 50% - Housing
- 53.4% - Family and relationships
- 65.5% - Money worries and debt
- 43.1% - Work and employment
- 72.4% - Social isolation
- 31% - Transport
- 57% - Physical health
- 53.4% Changes to the benefit system
- 12% - Internet access and online services
- 19% - Access to preventative mental health services
- 15.5% - Access to crisis mental health services

Social isolation was the predominant factor, identified by 72% of clients, followed by money worries / debt (66%), physical health (57%), changes to the benefits system and family / relationships (both 54%).

Other significant factors affecting clients' mental wellbeing included housing, work / employment and transport.

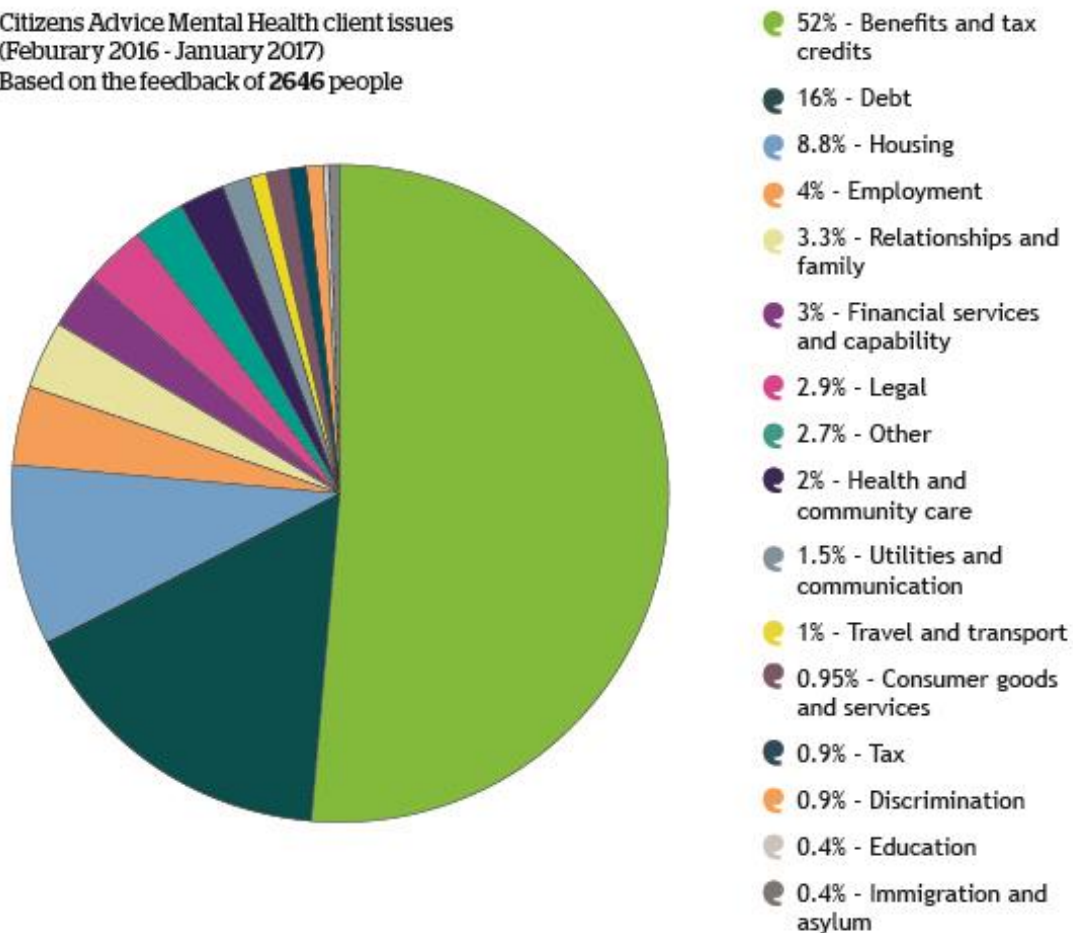
“My partner has left me and I'm being made homeless in a couple of months.”

“Few issues with damp but doesn't get me down too much, I get lonely, money is my biggest worry that makes me very stressed followed by work as I can only work part time due to health. I worked more hours and ended up worse off - this trap is depressing and every month is a struggle”

Hence we see a picture where the wider social determinants of health - poverty, debt, housing, family & relationships and social isolation have a significant negative impact on clients' mental wellbeing.

Alongside the client surveys, Citizens Advice analysed the issues which clients who declared a mental health condition sought advice on over the last year. Across Citizens Advice Hart and Rushmoor, 658 clients declared a mental health condition, seeking advice on 2646 issues during the period. Clients who declare a mental health condition often seek advice on multiple issues over a longer period than other Citizens Advice clients.

Citizens Advice Mental Health client issues
(February 2016 - January 2017)
Based on the feedback of 2646 people



Clients presented with a diverse range of issues, but the primary issues for both Rushmoor and Hart clients respectively were:

- Benefits and Tax Credits (54% & 42%)
- Debt (15% & 23%)
- Housing (9% & 10%)

These advice issues accounted for 78% and 75% of all enquiries respectively. Other common advice issues included employment, relationships and family, legal and financial services & capability.

Considering the benefits and tax credits issues in more detail, the primary issues for clients for both Rushmoor and Hart respectively were:

- Personal Independence Payments (38% & 24%)
- Employment Support Allowance (29% for both)
- Housing Benefit (7% & 8%)
- Working & Child Tax Credits (5% & 8%)

These advice issues accounted for 79% and 69% of all benefits and tax credit enquiries respectively.

“Changes to my benefits are a big time struggle, I was an emotional wreck when I went to Citizens Advice.”

“The support given to him at the Citizens Advice was extremely important to his wellbeing and has allowed him to resolve housing and benefits problems that were a real strain on his life.”

Considering debt issues, those associated with day-to-day living costs such as council tax arrears, utilities debts, rent arrears and overpayments of benefits were significant for both areas at 47% for Rushmoor and 43% for Hart.

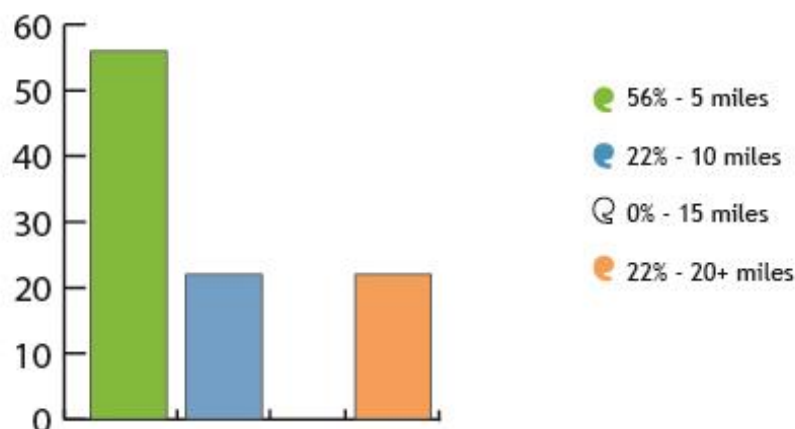
Looking in more detail at housing issues, threatened homelessness was the biggest category of housing advice issues for both Rushmoor (17%) and Hart (18%). Including all advice issues relating to homelessness such as threatened, actual and the local authority homelessness service accounted for 40% and 41% of housing enquiries respectively.

As part of our survey, we asked clients what had a positive impact on their mental wellbeing:

“I need ongoing help with forms, benefits, housing etc. Citizens Advice have helped me with this.”

“Someone sitting down with me who knows the system, money advice”

Mental health services are planned on the New Models of Care - if there is an urgent care centre, how far are you prepared to travel?



Client comments from the Citizens Advice client survey are included in relevant sections elsewhere in this report. The full detail of the Citizens Advice client survey responses and anonymised client data analysis is available to North East Hampshire and Farnham CCG on request.

Response from Professionals (Ongoing)

Communicating throughout the engagement work, we found that talking to many organisations; they were keen to be onboard with any recommendations given in this report.

Surrey and Borders Partnership are piloting a new model- looking at one single point of contact for mental health crisis; (*March 2017*)

Single Point of Access for Mental Health Crisis Care - Project Update

We have been progressing plans for our new Single Point of Access (SPA) for mental health crisis care - which has been scheduled to go live in April 2017.

A great deal has already been achieved including: creating a draft operating policy, testing out the use of digital dictation with the Epsom Home Treatment Team and winning funding from Health Education England to create a bespoke training package for our call handlers.

However, after extensive engagement with our Community Mental Health Recovery Service (CMHRS) managers, it has become clear that it would be beneficial to gather more evidence of how the team will work in practice before undertaking a widespread restructure of services.

We are now hosting a three-month field test to explore this further, as outlined below, and this will extend the service go live date to February 2018.

Field testing

People in crisis are some of the most vulnerable people we support and we want to make sure we feel confident that our services are safe and appropriate.

The test; we are conducting will have three distinct phases to better understand the impact of moving the rapid response element of our CMHRS services moving to the SPA and to test the robustness of the model.

Elmbridge CMHRS will be leading the test by allocating their current rapid response workers to work solely with people in crisis.

They will then gradually expand the remit of the rapid response workers so that they eventually span several CMHRS teams in Spelthorne, Runnymede and Woking, replicating the future service model.

Timeline

The inclusion of the field test means the final business case cannot be submitted to the Trust executive board until after it has been completed. To ensure we then allow enough time to mobilise the service, we expect it to be live by Feb 2018.

- o Field test March/April/ May 2017
- o Business case submitted to SABP Exec Board June 2017
- o Mobilisation phase (20 weeks) August - December 2017
- o Go live February 2018.

This has been discussed at Trust's Strategic Change Programme Board in February and the Trust's Executive Directors are clear that the additional time and work is essential to ensure that services are safe, sustainable and fit for purpose.

Next steps

* We are continuing to develop the service at pace, including engaging with individuals and organisations to do this. For example, to develop our care pathways and finalise our operating model. Following our recent survey around naming the service, we will also shortly be circulating our shortlist and asking people to vote for their favourite.

* Our next newsletter update about the project’s progress so far will be shared more widely.

* We will continue to share news of the projects progress through newsletter updates throughout the year.

Mental Health Crisis Helpline

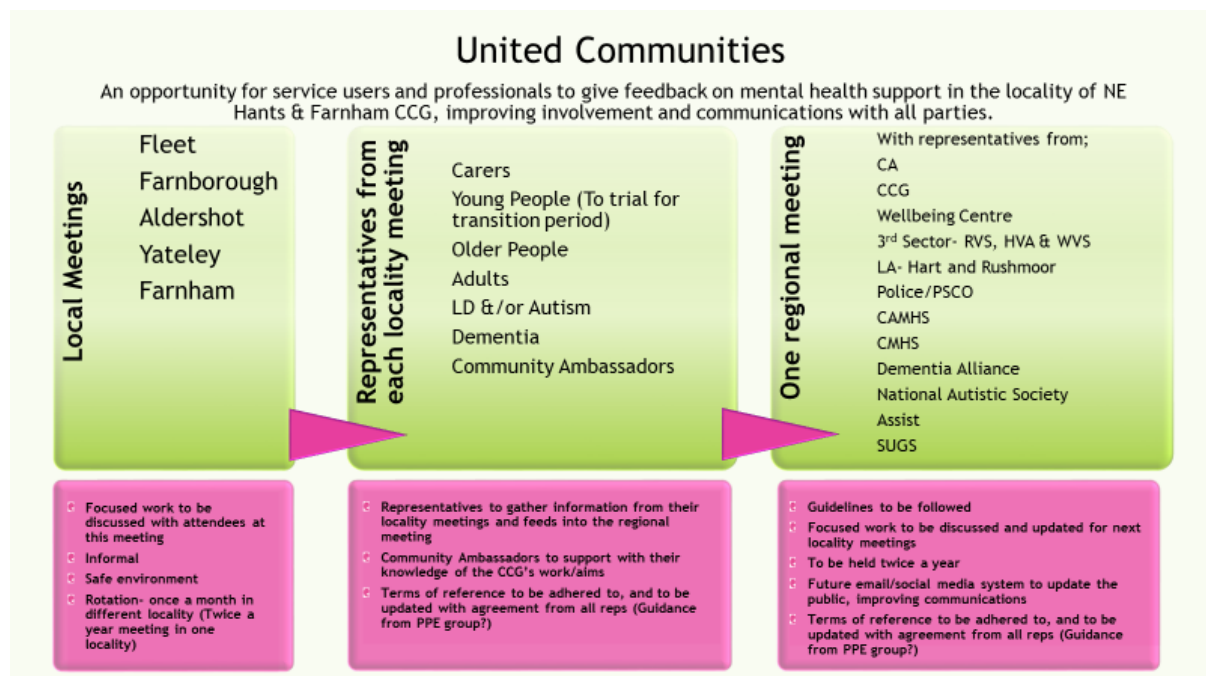
Under the original timeframe, our Mental Health Crisis Helpline - which is currently located in our Crisis House short stay service in Redhill - was going to relocate in April to join the wider Single Point of Access team.

The current Mental Health Crisis Helpline will remain available on the current contact details until the new service is ready to open.

Contact

If you have further questions about the Single Point of Access for Crisis Mental Health Care, please contact Sara Saunders, project manager, on sara.saunders@sabp.nhs.uk

NHS North East Hampshire and Farnham Clinical Commissioning Group’s Senior Commissioning Manager for Mental Health and Learning Disabilities, Nick Parkin, have had a direct conversation with a focus group who agreed to take part, in shaping how conversations are done for mental health service provision in the five localities, ensuring people who access these services are part of this. The conversation developed a structure which the CCG are looking to roll out in this format;



NHS North East Hampshire and Farnham Clinical Commissioning Group has had some of their staff members attending an Empowering Engagement course, as they recognize the need to involve people in their future services or to improve existing ones. Many had

focused on the impact of mental health services and how they could support this. Please refer to Appendix D of their work presented.

Summary



Due to the time constraints of the project, Healthwatch can only show a snippet of the daily issues faced by people with mental health and can affect individuals in different ways. These findings only show what Healthwatch could identify and evidence for the report.

The key themes that are shown are;

- Referral Process
 - A few have said that when they are at crisis point, they had to wait for their referral to be processed. They have expressed that there should be preventative services in place to support them while waiting for the support and suggested that if this was already in place, they would not reach crisis point.
 - It was also noted that having an alternative contact to mental health services, they would access this rather than going through their GP, and having more time with the said service. Many have said "Wouldn't it help taking the pressure off GPs?"
- Resources/information hub/preventative methods/linking up work/WIN
 - Many of the individuals have said there is either too little resources or gaps
 - Many individuals felt that the attitude of the health services have little regard to mental health and wanted more empathy from them.
 - Parents/Carers are a vast resource that GPs and Mental Health services may underuse and they are key to everyday aspects of the individuals' life
 - Adult Mental Health services take on existing or previous service users who were accessing Children and Adolescent Mental Health Services when they are in a crisis
- Parents/Carers
 - This has been highlighted several times throughout Your Voice Counts- parents and/or carers have been found to be a big part of many people who access mental health services. This also impacts the attendance of accessing mental health services in the locality. They are present daily and understand the issues and impact of any situations that would be had on the individual and needing support for themselves as well as those they care for with mental health issues. The project does not highlight these as it would go into depth and these findings have been found via another commissioned project that North East Hampshire and Farnham Clinical Commissioning Group had asked Healthwatch Hampshire to carry out. Out of their four key themes, they found that there was a need for looking after their mental health. The CCG are now procuring a suite of support for carers in the North East of Hampshire for implementation in April 2018
 - Parents and Carers have been affected by their individuals' mental health, therefore resulting in their need to support their own, becoming a patient themselves.
 - CAMHS have also provided events such as FitFest to give parents and carers support. These are usually well attended Hampshire-wide and Aldershot has recorded low attendance, in comparison. There is a need to support this further as it is accessible by any form of transport and free of charge.

- Mental Health
 - This was a key theme through discussions and many felt they needed more support and understanding through their GP, who need to be trained further to support people in need of mental health support or communicating effectively
 - A few people have said that they would like access to mental health services in Fleet locality, as they felt there was no appropriate resources available or not known
 - Nearly half of the GPs in a training session felt that they were not confident to do a Mental Capacity assessment

- Other
 - Hart District Council is in the process of signing up to the Local Authority Mental Health Challenge. This national initiative, launched by a partnership of charities and The Royal College of Psychiatrists, encourages and supports councils to promote better mental health in their area. They have been identifying a priority to focus on in 2017.

The one key theme highlighted throughout all engagement was the access to a central point of contact whether it is a contact telephone number, email or information hub.

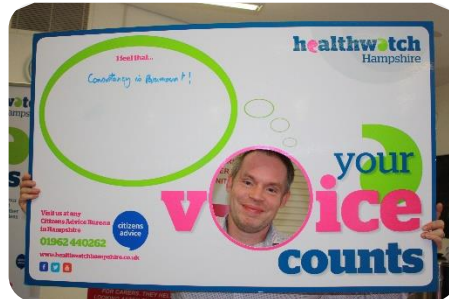
Recommendations

Recommendations from the second phase of Your Voice Counts, particularly the focus on adult mental health services;

- Give your patient and yourself enough time for an appointment
- Signpost when necessary to appropriate services such as the Citizens Advice Bureau for more non-medical information
- Give notice at least 3 sessions before the support ends and give alternative support information to peer groups or 3rd sector organisations
- GPs to undertake specialist training (Or a recap) on:
 - on the Mental Capacity assessment
- To provide GPs with resources
 - such as peer support services in their locality
 - voluntary and community groups to signpost to
 - This could be led to a social prescribing model
- The Wellbeing Centre and Safe Haven
 - These services both offer preventative services as well as supporting patients in crisis and through recovery. Creating safe environments like the Safe Haven and Wellbeing Centre where patients can openly discuss their issues and share their experiences has proven very beneficial for those that attended this workshop. Services such as this seem to be an invaluable resource that are utilised by some of society's most vulnerable people and we would therefore recommend that such services continue to receive financial support, or supported in an alternative environment.
 - There is also a need to look at the location of where the Wellbeing centre/Safe Haven is placed as many felt they could not go, and some are not able to get there.
- Social Inclusion Activities in the Community
 - It became very apparent during the workshop that the majority of participants felt that social inclusion activities, whether that be a drama group, playing football or group cooking sessions were deemed an essential

part of recovery and staying well. Therefore, we would recommend that people are being signposted to social inclusion activities with support in funding and referred to by medical professionals, especially GPs.

- Specialist Knowledge
 - Many participants discussed GPs not having specialist knowledge of mental health problems or associated medication. They also said that medical professionals could better refer mental health patients to local support services so that they can access local support networks.



What's next?

The third phase of Your Voice Counts is focusing on Young People and Mental Health. The Citizens' Advice Bureau have already rolled out the surveys in Hart and Rushmoor area.

We will be holding a Young Minds Day, in partnership with Mayfield Patient Participation Group, to engage young people and anyone who is in contact with them.

If anyone is interested in attending, please contact Fi Biggs.

Key contacts

Safe Haven
Ruth Webster
Director Mental Health Services
Wellbeing Centre/Safe Haven
121 Victoria Road
Aldershot
Hampshire
GU11 1JN
Telephone: 0800 028 2815
Email: r.webster@mcch.org.uk
Website: <http://www.mcch.org.uk>

Parents and Carers Hub
Ian Penfold
Community Ambassador and Parent

SUGS
Jilly Sears
Branch Officer
SUGS and Community Ambassador
Direct contact: 07939384142

Hart Voluntary Action
Caroline Winchurch
Chief Executive
Telephone: 01252 815652
E-mail: ceo@hartvolaction.org.uk
Website: www.hartvolaction.org.uk

Hart District Council
Liz Glenn
Health and Policy Project Officer
Telephone: 01252 774228
Email: liz.glenn@hart.gov.uk
Website: www.hart.gov.uk
Twitter: @HartCouncil
Facebook: /HartDistrictCouncil

Happy, Healthy At Home (Vanguard)
Caroline Martinez
Community Ambassador Coordinator
Happy, Healthy at Home (NE Hants & Farnham)
Telephone: 01252 335573
Email: nehfccg.ambassadors@nhs.net
Website: www.happyhealthyathome.org
Twitter: @NEHFCCG

Blue LIG Group
Florence Garland
Adults' Health and Care
Hampshire County Council
Telephone: 01962 847249
Email: Florence.garland@hants.gov.uk
Website: <http://www.hampshirelearningdisabilitypartnershipboard.org.uk/>

Compiled by
Fiona Biggs
Engagement & Project Officer
March 2017



References

'Mencap Briefing: Benefit changes: the Welfare Reform Act 2012' Mencap

Parents' Voice, parentvoice@roseroad.org.uk

Mental Health Crisis Helpline Telephone helpline for people in mental health crisis, available evenings and weekends. Tel: 0300 456 8342 Text: 07717 989024 Text relay: 18001 0300 456 83 42
Web: www.sabp.nhs.uk/advice/crisis-help

Recovery Colleges Educational courses on a range of psychological, mental and physical health conditions. Details available at www.sabp.nhs.uk/recovery/recovery-college

Certificate of Capacity- "Advance Directive" or "Advance Healthcare Directive" is a Medical GP/doctor acting on the person's behalf through the Mental Health Capacity Act.

Transition of care from child to adult mental health services: the great divide
Singh, Swaran P, July 2009 - Volume 22 - Issue 4 - p 386-390

iTalk info@italk.org.uk
023 8038 3920

Appendix A

The Government's response to the Five Year Forward View for Mental Health

Appendix B

Camberley Safe Haven - Update March 2017

Services provided by Camberley Safe Haven will be transferred to the Aldershot Safe Haven from 1 April 2017. The Safe Haven at 147 London Road, Camberley was part of a pilot of five Surrey Safe Havens.

A seven-evening a week, 365-day a year service will be available at Aldershot Safe Haven for Surrey Heath residents, as well as access to all other Surrey Safe Havens every evening. This will allow consolidation and improvement of services and will offer accessible mental health out of hours crisis care.

The Camberley Safe Haven will remain open every Monday and Friday night from 6-11pm until Friday 31st March 2017.

From Saturday 1st April 2017, you can get support and advice at:

Aldershot Safe Haven (121 - 123 Victoria Road, Aldershot GU11 1JN)

Monday to Friday 6pm to 11pm

Saturday and Sunday and Bank Holidays from 12.30pm to 11pm.

Other crisis support is available:

Mental Health Crisis Helpline: An out of hours and weekend service for people with mental health problems and those who have concerns about them. A trained member of staff will listen and provide accurate information and support between the hours of 5pm to 9am Monday to Friday and 24 hours on weekends and bank holidays
Call: 0300 456 83 42 SMS: 07717 98 90 24

General Practice: GP practices are open from 8am to 8pm, Monday to Friday in Surrey Heath

Action For Carers: To find out how to receive help if a person is caring for someone in mental health crisis visit: <http://www.actionforcarers.org.uk/>

You can also visit any of the other Safe Havens in Surrey:

<p>Woking</p> <p>The Prop</p> <p>30 Goldsworthy Road</p> <p>Woking GU21 6JT</p>	<p>Monday to Friday: 6pm to 11pm</p> <p>Weekends: 12.30pm to 11pm</p> <p>Bank Holidays: 12.30pm to 11pm</p>
<p>Guildford</p> <p>Oakleaf Enterprise</p> <p>101 Walnut Tree Close</p> <p>Guildford GU1 4UQ</p>	<p>Monday to Friday: 6pm to 11pm</p> <p>Weekends: 6pm to 11pm</p> <p>Bank Holidays: 6pm to 11pm</p>
<p>Epsom</p> <p>The Larches</p> <p>44 Waterloo Road</p> <p>Epsom KT19 8EX</p>	<p>Monday to Friday: 6pm to 11pm</p> <p>Weekends: 6pm to 11pm</p> <p>Bank Holidays: 6pm to 11pm</p>
<p>Redhill</p> <p>Wingfield Resource Centre</p> <p>St Anne's Drive</p> <p>Redhill RH1 1AU</p>	<p>Monday to Friday: 6pm to 11pm</p> <p>Weekends: 6pm to 11pm</p> <p>Bank Holidays: 6pm to 11pm</p>

Mental Capacity Resources

- MCA and National Mental Capacity Forum (Video)
<http://www.scie.org.uk/mca-directory/forum/video.asp>
- Mental Capacity Act (MCA) tailored for you
<http://www.scie.org.uk/mca-directory/mca-tailored-for-you/index.asp>
- Mental Capacity Act
<http://bhamsouthcentralccg.nhs.uk/health-services/mental-capacity-act>
- GP Resource Pack
<http://bhamsouthcentralccg.nhs.uk/publications/1091-gp-resource-pack>

Helpful Organisations for parents/carers

- Contact a Family (Children)
<http://www.cafamily.org.uk/>
- Hft
<http://www.hft.org.uk/>
- Blue LIG group (Basingstoke, Hart and Rushmoor Local Implementation Group)
www.hampshirelearningdisabilitypartnershipboard.org.uk
- FoCUS (Forum of Carers and people who use our services) SaBP NHS
www.sabp.nhs.uk/focus

Appendix C



Citizens Advice Hampshire
Let's work together



“Your Voice Counts”

Healthwatch Hampshire are running a project to understand the needs and experiences of people using mental health services in North East Hampshire and Farnham. The Clinical Commissioning Group responsible for health services in the area have asked us to do this work to inform the future development of services.

Local Citizens Advice in Hart and Rushmoor are contributing to this project by undertaking a survey of their clients who use mental health services. We would welcome support from other voluntary and community organisations to ensure the experiences of their clients are included.

This is an opportunity for service users to share their experiences and influence the way mental health services are provided in their area. We are also looking for service users who may be interested in ongoing engagement work to feedback experiences of service users.

Who can take part in the survey?

Anyone who has had, or is currently experiencing, a mental health problem or knows someone with a mental health problem (e.g.: you are a carer of someone with a mental health problem).

All responses will be anonymous and you won't be contacted unless you'd like to be involved in future engagement work.

The survey is held securely online and can be completed by going to this link:


<https://www.surveymonkey.co.uk/r/6HFRDHY>

For more information please contact Ben Gillett at hwhdm@citahants.org or speak to the Healthwatch team on 01962 440 262


Appendix D

Empowering Engagement

video: <https://www.youtube.com/watch?v=TY2c3pt4MkU&feature=youtu.be>



The Importance of Co Production In Mental Health
(The Real life Narratives behind the people we want to engage)
Nick Parkin Senior Commissioning Manager
Mental Health and Learning Disabilities



Why?
The experience of people who use Mental Health Services can be very powerful narratives. However people living with Mental Health difficulties still describe feeling marginalised and ignored. In commissioning service for people with Mental Illness I feel that it is vital that 'the experts' find the space to listen to what people want from the services we commission as those services can have such a powerful impact on their lives. I believe passionately that we should nurture those narratives and place them at the heart of our service provision and commissioning

What?
The Empowering Engagement in North East Hampshire and Farnham pilot has provided the space and time to be able understand the role of the CCG in this area. It is my firm belief from my experience as a therapist that for an organisation to engage successfully with the population it serves there is a need to have an internal debate and reflection about the importance of Mental Health within the whole area of service provision in order to create a socially constructed internal narrative about Mental Health and its importance to us

Key Findings
The events have not yet taken place. However, I am working with colleagues from other areas that have had great success in raising the profile of mental Health and service user experience in their work.

Conclusions
We have had valuable lessons from when service user engagement has been successful in Mental Health commissioning. I think we have to learn from this experience so that we don't get so excited by the idea that service users want to tell us about their experiences that we forget that they are sharing and exposing their lives with us. We HAVE to take care of the narratives that people gift to us and look after the people we want to engage with

Project Goals
My goals are two fold.


Firstly to share with Colleagues in the CCG examples of other areas that have successfully engaged with people who use services to transform Mental health provision as its integration into the consciousness of the Organisation. I plan to do this by holding a Seminar with presentations from other organisations and a stand up comedy routine about mental Health

Secondly to facilitate that internal dialogue about mental Health into our thinking so that the organisation can develop a shared and socially constructed narrative about the importance of Mental Health in all of our work


Evaluation Strategy
Feedback survey form

Credits
Jane McGrath
Jessie Cunnett
Ros Hartley
Sharon Ward


References
• *Therapy as Social Construction* Sage 1992 Gergen K and Macnamee S
• *A post Modern Approach to Therapy, Chapter 1* Basic Books 1997 Anderson H
• *'John Doe No 24'* 'Stones in the Road' 1994 Sony Entertainment Mary Chapin Carpenter



Further contact information Nick Parkin nick.parkin@nhs.net



Inigorating the GP consultation:
A proposal for a pilot project to engage patients with mental health concerns in Aldershot and their GP surgeries
Dr Lesley Rosling



The Problem
Mental health is core business for GPs, and nine out of ten patients with a psychological problem are treated by them. The Five Year Forward View in Mental Health promotes person centred care and parity of esteem between physical and mental health. The increasing complexity and demands placed on GPs to deliver care in the community risks affecting the quality of the GP consultation. Healthwatch Hampshire's report of 2016 confirm this with patients reporting they feel rushed with their physical health being prioritised over their mental health needs. The RCGP goes further recommending that the GPs traditional role of a Gatekeeper should evolve into that of a Navigator whose role it is to co-ordinate and signpost to services beyond mental health such as housing and social care. GPs need the tools to do this. Research adds that many GPs have the skills to provide holistic care, but lack the confidence, time or support to use them. The RCGP suggests these skills may need reviving, refreshing and reinvigorating. The organisation MIND states their belief that 'if we get mental health support in Primary Care right, we can help people stay well'. Aldershot is a deprived community with the area of Ticehurst Meadows being one of the most deprived in the country. It has high levels of mental health morbidity. This pilot project aims to engage patients and GPs to work together to develop solutions to improve the GP experience.

The Goal
A locality of GPs who invigorated to improve the quality of consultations with mental health patients, and a locality of patients confident that their GP has listened to their needs and made changes to the way they work in order to improve their patients experience and health.

Proposed engagement activity

Exploring experiences of Mental Health	Healthwatch Hampshire/NEHFCCG
Interviews with five Aldershot GPs	Lesley Rosling (completing)
Key informant interview with voluntary sector Broadhurst Project	Lesley Rosling (completing)
GP Website Survey	Service Users / Healthwatch Hampshire
GP atmosphere survey	Service user/ Healthwatch Hampshire
Facilitated GP / service user workshops	All Haydon from Express Yourself
Co-produced solutions agreed	All Haydon from Express Yourself
Wider Aldershot locality GP service user event	All GPs, service users, and local providers to attend / service users performance to illustrate solutions
Evaluation	Healthwatch Hampshire / Wives Voices

Project Description
Five GPs and five receptionists from the five Aldershot practices will be invited to meet with 12 patients with mental health concerns to attend a series of two workshops. These will be facilitated by an external consultant and a lay member of the public experienced in working with service users doing creative writing and an running an acting group.

Findings to date: Patients and GPs agree that consultations need improving

What do patients with mental health concerns say:

- GPs focus on physical health problems.
- They feel rushed and would like a GP really listen and not rush through the appointment. This would enable them to access services before a crisis
- A GP should have more specialist knowledge
- The GP should know about services to signpost to like the Safehaven and the Wellbeing Centre

What the GPs say:

- Patients tend to present with a physical problem
- We need more time
- Not clear what role of existing services is. One experienced GP described the Wellbeing Centre as a 'Safehaven in hours' manned a by 'duty worker'

References

- Healthwatch Hampshire 2016. Exploring Experiences of Mental Health
- RCGP
- Five Year Forward View Mental Health
- www.healthwatchhampshire.org.uk/seeking-mental-health-support-from-a-gp

Contact information:
Lesley Rosling
GP Principal Southlea Group Practice Aldershot
NEHF CCG Clinical Lead Mental Health
Lesley.rosling@nhs.net

Aldershot has enough services for people with mental health problems...it has the Safehaven, the Wellbeing Centre, the Source, Inclusion, Step by Sep and Community Access project...no more new services are needed. GPs need education as to where to signpost and refer...
Tracy Bowden Community Access Project

For more information, contact Healthwatch Hampshire or nehccg.public@net