

County Durham Community Mental Health Units Enter and View Summary

February 2024 – January 2025



Introduction

Our role at Healthwatch County Durham is to gather people's views and experiences, especially those that are seldom heard, to give them the opportunity to express how they feel about a service. The aim of an Enter and View visit is to gather views and experiences of residents, relatives and staff of a service and observe the environment to assess the quality of the service.

We carried out six (6) announced Enter and View visits across all Community Mental Health Teams in County Durham between February 2024 and January 2025 undertaken by authorised representatives who have the authority to enter health and social care premises.

The team collate feedback gathered and observations made to compile a report. The report identifies aspects of good practice as well as possible areas of improvement. Healthwatch County Durham is an independent organisation, therefore we do not make judgements or express personal opinions, but rely on feedback received and objective observations of the environment.

The following is an overview of issues highlighted throughout our visits to six (6) sites across County Durham. These were; Merrick House (Peterlee), Derwent Clinic (Shotley Bridge), Enterprise House (Spennymoor), Chester Le Street Unit (Chester le Street), Kirkstone Villa (Lanchester Road Hospital) and Goodall Centre (Bishop Auckland). Overall we spoke with 94 service users and 31 staff members. We have summarised the main feedback themes from both service users and staff along with the primary recommendations made across the Community Mental Health Teams of County Durham.

Acknowledgements

Healthwatch County Durham would like to thank management, staff, residents and relatives, for making us feel welcome and for taking the time to speak to us during all the visits.



The staff really tried, but their hands are tied they can only do so much.



Service User feedback

Staff Attitude

- Staff were generally found to be friendly and caring.
- Some felt staff genuinely listened and were supportive.
- Others mentioned staff lacking empathy or changing attitudes depending on who is present.
- Staff acknowledged personal history and tailored interactions accordingly.

Access and Communication Issues

- Long phone wait times, missed calls, and inconsistent staff responses are major concerns.
- Difficulty reaching reception and being passed around frustrates users.
- The intercom systems and lack of greeting at the front desk leave some feeling unwelcome.
- Travel difficulties and inconvenient appointment times add to access barriers.

Inconsistency in care

- Service quality varies widely depending on which staff member a user sees.
- Some users feel rushed, not listened to, or labelled negatively (e.g. "seen as a troublemaker" if they complain).
- Continuity is disrupted by frequent staff changes, which can trigger anxiety in some service users.

Care Planning and Support Gaps

- Unclear or missing care plans (some didn't know if they had one).
- Support promised but not delivered.
- Lack of involvement in care planning.



Sometimes there's new staff which can induce my anxiety, this has happened 3 times



Delays and Administrative Failures

- Long waits for appointments and appointments cancelled frequently.
- Being “lost in the system” or discharged without proper communication was distressing for users.
- Some users report no support for years due to transitions between services (e.g. perinatal to community mental health).

Building, Environment & Travel

- Poor building conditions (depressing, clinical, inappropriate waiting areas).
- Some locations were difficult to get to and felt secluded.
- Parking issues.
- Reception not consistently manned.
- Privacy/confidentiality concerns as conversations can be overheard.
- Some areas feel crowded which heightens anxiety.

Service Gaps and Limitations

- Some users felt dismissed or pigeonholed into one diagnosis (e.g. autism) when broader support was needed.
- There’s a perception that staff try hard but are constrained by system limits.
- Service users express frustration over limited funding, growing demand, and insufficient support structures.



**“When I go in, I'm
thinking 'I hope I get to
speak to the nice one!'”**

**“My daughter saw two ladies,
they said they couldn't help
but at least they were honest
with us”**



Staff feedback

Compassionate and Respectful Care

- Listening closely to clients and treating all patients with courtesy, respect, and compassion was emphasised.
- There is a strong culture of empathy and support among staff and toward patients.
- Clients are encouraged to take control of their care, promoting a person-centred approach.

Staff Experience and Teamwork

- Staff feel supported and comfortable, with a collaborative work environment.
- Positive attitudes toward colleagues and mutual respect are noted.
- However, staff turnover and shortages impact continuity and quality of care.

Service Accessibility and Privacy Issues

- Barriers include phone access issues and overcrowded waiting areas.
- Lack of sufficient privacy, with conversations easily overheard in reception and therapy rooms.
- There is concern over miscommunication about services received (e.g. therapy expectations).

Service Quality and Delivery

- Staff are responsive and try to follow up quickly (e.g. within 24 hours).
- Care is co-produced with clients and focused on symptoms rather than diagnoses.
- There are inconsistencies in service standards across community teams.
- Building issues with some not fit for purpose.

Systemic Challenges

- Increased demand, particularly from neurodiverse clients, is straining services.
- Calls for staff upskilling, better incentives, and consistent care offerings across teams.
- Some tools like safety plans are seen as patronising or poorly designed.

Recommendations

The following recommendations have been formulated based on observations of the environment and feedback gathered from residents, relatives and staff across all 6 Community Mental Health Teams.

Staff Development and Wellbeing

- Provide staff with regular training on care plan development and managing challenging situations.
- Promote staff wellbeing to support high-quality care.
- Ensure consistency in staffing and provide service users with access to the most appropriate staff member. Communicate clearly who their named worker is and who to contact when that person is unavailable.
- Recognise and promote the positive work staff do, highlighting their friendliness and caring nature. Support staff in signposting service users to appropriate external services.

Care Planning and Service User Involvement

- Actively involve service users in the development and review of their care plans.
- Regularly update care plans and ensure service users understand what is included, how to access the plan, and when it will next be reviewed.
- Follow up on all support offered, especially after appointments or changes in medication.
- Clearly manage service user expectations about what the service can and cannot provide.
- Provide supportive and compassionate communication while users are waiting for appointments or services.

Recommendations continued...


Feedback and Rights

- Ensure all service users are aware of the complaints process and understand that raising concerns will not negatively affect their care.
- Create a clear, easy to understand document outlining service users' rights, what they can expect from the service, and what to do if those expectations are not met.

Environment and Accessibility

- Ensure all conversations are conducted in private to uphold confidentiality; address any instances of overheard discussions.
- Create a clean, friendly, and welcoming environment with access to natural light.
- Improve access to telephone support—ensure phone lines are consistently answered and adequately staffed.
- Ensure reception staff are welcoming and helpful.
- Provide clear, accurate signage throughout the facility.
- Consider using less clinical or more community-based spaces to promote a comfortable atmosphere.
- Offer appointments outside standard 9am – 5pm hours to increase accessibility and flexibility.

**“Staff shortages in mental health
can sometimes affect users”**



"There are barriers, where people can't get through on the phone and the waiting area can get full and overcrowded at times".



"I have witnessed many occasions of staff members providing excellent customer care towards their patients whilst demonstrating compassion"

Provider responses

There is strict legislation that is required when conducting an Enter and View.* Following an Enter and View visit, there are requirements for service providers to respond to a Healthwatch report and its recommendations. All services must respond within 20 working days on receipt of the report. This can be extended to 30 days with the agreement of Healthwatch. Only two Community Mental Health Teams responded within the regulated time frame.

***Regulation 44 of The NHS Bodies and Local Authorities (Partnership Arrangements, Care Trusts, Public Health and Local Healthwatch) Regulations 2012**



healthwatch County Durham

Healthwatch County Durham

Unit 3

Crook Business Park

New Road

Crook

DL15 8QX

www.healthwatchcountydurham.co.uk

t: 0300 180 0025

e: info@healthwatchcountydurham.co.uk

 [/healthwatchcountydurham](https://www.facebook.com/healthwatchcountydurham)

 [@healthwatchcountydurham](https://www.instagram.com/healthwatchcountydurham)

 [/company/healthwatch-co-durham](https://www.linkedin.com/company/healthwatch-co-durham)