healthwatch Hampshire



Your Voice Counts: Young People's Mental Health

Phase Three Report: April - June 2017 Opportunity for young people accessing 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. This event was 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;
- 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.
 - Mental Health services are backlogged and evidenced that 40% of the referrals coming through are not meeting the service's criteria.
 - Transition
 - Resources/preventative methods
 - GPs say that they refer to appropriate services however the waiting times are lengthy to be seen soon as possible
 - Young people are reporting that they are not certain of who to go to for the support, in fear of not being taken seriously.
 - Signposting and coordinating
 - Parents/Carers
 - Parents and carers needs were reflected in their attendance to PACE event, delivered by CAMHS. One attendee said it was the best thing they have done, to have a direct conversation with a CAMHS professional to get on the path of the right support as their GP did not refer to the service and they were not aware that they could self-refer.
 - Schools
 - Schools felt that they have not been supported and wanted more involvement. Two schools reported spending approximately £50,000 an academic year on employing mental health professionals, responding to the needs of their students internally as there is an increase in demand.

Background: Your Voice Counts Young People

The theme for the third part of the project is "Your Voice Counts: Young People", continuing the theme of Mental Health. The focus themes were access to their GPs,



hospitals, mental health services, local support available, and other opportunities.

We can make a difference through early intervention and public health approaches. (Public Health England, 2010)

This part of the project was looking to gather feedback from young people about their mental health and 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; these are 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 broad 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

We went to Step by Step where young people are living in supported accommodation that have, or are accessing CAMHS services or have transitioned to Adult Mental Health services.

This 1-to-1 engagement took place alongside an informal cooking session in the communal kitchen in the Step 1 accommodation. The session was attended by 6 young people between the ages of 16 and 21 and 5 young people gave feedback and shared experiences.

Step by Step works with young people aged 11 to 25 using a structured combination of services including accommodation, support, training, drug and alcohol support and counselling.

It is common for Step by Step clients to have behavioural and mental health issues, drug and alcohol misuse issues, low incomes or be out of work and reliant on benefits. It is also common for clients to have struggled in formal educational settings and therefore left education with low or no formal accreditations. Some clients may have been in care before living at Step by Step and many have experienced family breakdowns, turbulent and chaotic home lives and street homelessness.

Step by Step aims to support young

people to...

- Take more control of their adult lives
- Learn to be team players and trust others
- Increase their self-esteem and self-confidence
 Realise their potential and gain the motivation to progress successfully
- Develop new skills to live, work and become a successful part of their wider community

Key issues raised during the session

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

4 out of 5 young people discussed having depression and mental health problems and were critical about the time that it takes to get support and therapy through CAMHS and adult mental health services, the lack of information when they are waiting for support, minimal guidance about how long the waiting list is and being unclear about the service that they are actually waiting for and GPs being supportive but not being able to get their patients support quickly enough or speed up referrals when patients are in crisis.

Several young people discussed 'not trusting hospitals' either because relatives had died in hospital or emergency services hadn't responded quickly when called in the past, especially in response to issues relating to mental health. When asked how this effects the way they use hospitals now, they discussed actively avoiding using hospitals 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 young people that attended the

session and spoke with the Healthwatch Engagement Officer on a one-to-one basis;

Case Study 1

Male, 21 years old

- February 2016, first suicide attempt (overdose drugs and alcohol)
- Admitted to Frimley Park A&E for 12 hours
- Received necessary medial support
- Felt that health professionals did not tell him what was going on, what medicines were being administered and was not informed about test results or given discharge paperwork
- He was visited by the mental health team. Therapy has been recommended and he is currently on the waiting list but is unsure what type of therapy he will be offered or when
- Now unemployed after losing his job due to absence without notifying the employer
- GP (Border Practice) good with physical ailments but thinks he is lacking knowledge in relation to mental health issues

About A&E after suicide attempt: "It would have been nice if they told me what was going on. I had needles in me but I didn't know what they were for and I got no test results or paperwork when I left A&E."



Case Study 2

Male, 17 years old

- Diagnosed with ADHD, Tourette Syndrome and depression
- Really positive about the health services that support him
- Has regular appointments every two months to check medication and wellbeing
- The health professionals listen to him and ask good questions that he understands
- He regularly visits a specialist in London about his Tourette Syndrome
- e But gets nervous about booking appointments at the GP so gets others to do it

Case Study 3

Male, 19 years old

- Diagnosed with ADHD and depression
- Received family mediation and anger management from CAMHS in 2014 (when living at home with his mother) but felt that neither were effective and was subsequently made homeless.
- He has now stopped taking medication and is using martial arts and exercise (Fight Science, Aldershot) to control his anger issues.

"Everyone has a dragon inside and it takes the right person to tame it. Martial Arts works for me. Doctors need to find out what is going on in someone's core and then find out what will interest them."

Case Study 4

Female, 19 years old

- Diagnosed with Emotionally Unstable Personality Disorder and Bipolar Disorder at the Hollies (diagnosed in approx. Spring 2015) but still awaiting information about therapy or support, currently not receiving anything
- Currently 5 weeks pregnant (unplanned pregnancy)
- Is currently worried about her own mental health because her medication has been halved due to the pregnancy so her anxiety and paranoia have increased
- Currently visits the GP every week at Princes Garden Surgery and has had positive experiences there and said they are doing everything they can and are friendly but they can't get her the support that she needs for her mental health problems

"I feel like a child having a child with no support and I'm worried about doing something stupid like taking drugs and alcohol because they are my release. I feel lost."



Case study 5

Male, 19 years old, unemployed

• Suffering from depression, currently feeling suicidal

- Moderate learning difficulties
- Referred to CAMHS at 16 years old and received counselling between the ages of 16-18
- Regularly attends LGBT groups at SbS and in Guildford and finds this support really good. Likes to socialise, share experiences, have a network of friends
- Likes to use exercise and volunteering with Parkside to maintain good mental wellbeing

Engaging with professionals at Step by Step

The following questions have also been sent to Anna Kahn who currently runs the Counselling programme at Step by Step:

- 1. What services are you currently providing linked to mental health and wellbeing?
- 2. How do you receive referrals for these services?
- 3. Are the services over/under prescribed?
- 4. What is working well in relation to these services?
- 5. What could be improved?
- 6. What links and referral processes do you have with CAMHS and Adult Mental Health Services?
- 7. What is working well?
- 8. What could be improved?
- 9. Are the young people that you support currently accessing local mental health support services, such as the Wellbeing Café, The Safe Haven, Recovery College etc?
- 10. What preventative, crisis and recovery services do you think are effective with the young people that you support?
- 11. Are there any access issues relating to services in the local area?
- 12. Are there any areas in Rushmoor or Hart (Yateley, Fleet, Farnborough, Fleet, Aldershot and Farnham) that you do not cover? And what is the referral process/service provision in these areas?
- 13. Do you have any specific or recurring issues that you have with local mental health services?
- 14. Are there any particular groups of young people that you think are currently falling through the gaps in relation to accessing mental health service?
- 15. Do you have any feedback or experiences that you can share in reference to young people transitioning from CAMHS to Adult Mental Health Services?
- 16. What recommendations would you make to improve mental health services for young people living in the local area?

Recommendations for future engagement with this group

• The informal setting works well for this group because it allows them to participate without



feeling pressured. Setting up engagement within accommodation means that they incur no travel costs and are able to dip in and out of sessions.

- There are support workers and managers on-hand in case a client makes a disclosure that causes concern or they need emotional support from someone that knows them well.
- 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.

In Summary...

The main issues for this group is getting access to mental health services. The waiting times are too long, causing young vulnerable people to reach crisis because the preventative services are not available. The young people feel that they need to "hit crisis point to even get noticed". Despite the Wellbeing Centre and Haven Café being a two-minute walk from Step by Step, clients weren't keen to access this service because there were lots of older people there. Offering community support specifically for this age group with young-person centred activities and environments might prove to be more welcoming and thus be better attended.

Methodology: Engagement

The engagement event was held in Farnborough. This was done from the feedback of having an opportunity to access one area with good public transport from all areas of Hart and Rushmoor.

We organised a Young Minds Day, jointly with Mayfield Patient Awareness Group, to provide information through organisations' presentations of what they can offer young people and those who are involved with young people in the locality and then the opportunity to gather information from those who attended to answer the following questions;



- Young People: Have you found that schools/colleges/universities have provided support for mental health?
- Parents: Have you found services that support you in order to support the young person with their mental health? How easy is it to access support?
- Professionals: Do you feel you have the right resources to support you in order to support your Young Person with their mental health?
- Discuss and work out the most important to the young person and why
- What are the issues for Young People and how can they be better supported? What is helpful and is not helpful? (Pros and Cons)
- Why is it important to be listened to?
- If you could improve services to better meet your needs, what would you change? (And why?)
- How would you like to find out about what services are available?

Young Minds Day held presentations from organisations who work closely with young people, giving the attendees the opportunity to find out more about what is available in the locality. We also had two young people presenting their experiences, giving people a powerful insight, giving them more of an understanding. Many thanks to;

- Philippa Unwin, Personal experience
- Kimberley, Personal experience
- Judi Page, Young SafeHaven (Aldershot)
- Pr Emily David, CAMHS Hampshire
- Micki Bennett, Eating Disorders NHS Dorset
- Mak Johal, Pharmacist
- 🗧 Jilly Sears, SUGS
- Caroline Winchurch, Hart Voluntary Action
- Anna Khan, Step by Step
- Hart & Rushmoor Youth
- NHS Youth Council

- Happy, Healthy at Home Community Ambassadors
- Martyn Marsh and Mayfield Patient Awareness Group members
- Steve Manley, Healthwatch Hampshire

"They are much more likely to be reliant on other for some aspects of daily living, such as communicating their needs." (DCLG, 2008b, p7)



The questions through the carousel were also tried and tested with two different groups, to ensure the use of language was simple enough to be understood.

Questions

We also asked other questions throughout the third phase of the project to young people in the locality;

- What do you do to keep yourself feeling happy?
- What do you do to keep yourself well?
- Who do you speak to when you are feeling low/down
- Do you know where to access information about keeping well?
- My age is...
- Why is it important to be listened to?
- Tell us about your doctor
- Do you have any new ideas you would like to share with us to make health services and mental health services better for you?
- 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
- My doctor understands/does not understand what I need
- Do you think your doctor knows enough about you to help you?

Citizens Advice carried out a survey for Young People, on behalf of Healthwatch Hampshire- <u>https://www.surveymonkey.co.uk/r/HXTLTVG</u>

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 think it's important to be listened to because you need to feel understood to feel safe and if you're not listened to, then you can't be taken care of. They can't learn things just out of a text book, they need to understand things from a personal point. They need to listen to experiences and not just what a textbook says" (19 year old, Aldershot)

There were polls and voting boards throughout the research in different events and setting to reach young people in different ways, making it informal and for the young people to communicate. This enabled young people to have an opportunity to tell us in their own way what their experience was like.





Why is it important to be listened to?

"To be heard and understood. To be validated"

> "Imight have something to say. I need to express myself, share my thoughts and feelings"

"A need to be understood and make your feelings made clear. It can make you angry if you don't get listened to. Built up anger when not being heard or understood. To feel like someone cares and can empathise." "To be able to share and explore confidential information in a safe, non-judgmental space"

"Sometimes I feel lonely, without any friends to talk to"

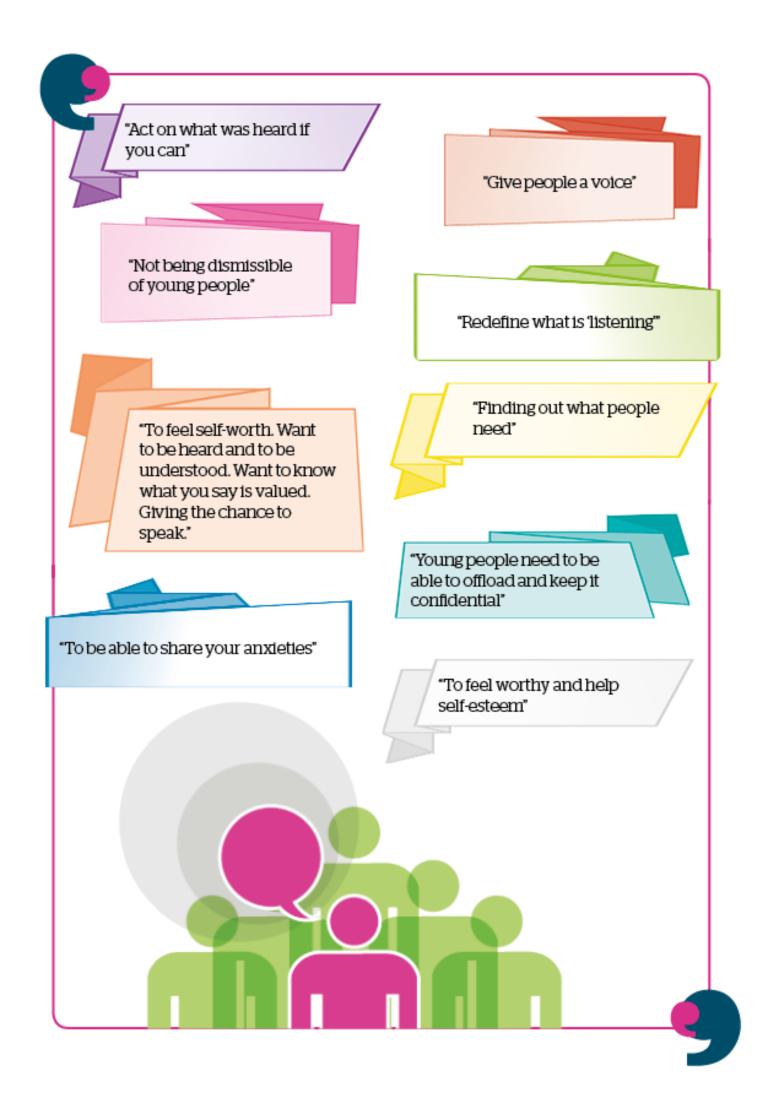
"Reflective listening-repeat back what you have heard, to check you are on the right lines"

> "All parties listening, all people are involved"

"There is no point providing unwanted services- must listen to get it right"

"Immediately provides a degree of relief to be listened to, at last" "To ensure people can signpost you to the most helpful person, so that people understand how you're feeling. People can be afraid to speak out and be listened to for fear of being stigmatized and people treating you differently."

"Ineed to feel part of a group/sector of society = accepted (Not alone)"



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
- Blue Local Implementation Group
- Community Cash Fund: Chocolate Muffin Publishing
- Improving Young People's Mental Health Promoting a Coordinated Approach to Eating Disorder: Public Policy Exchange
- Post 19 Group
- Voice- Rushmoor
- e Better Local Care
- Mental Health Futures Workforce
- Parents and Carers Event: FitFest Aldershot
- Patient and Public Engagement Group
- North East Hampshire & Farnham and Surrey Heath Mental Health Forum
- Carers Hub: Yateley, Farnborough and FoCus
- Parents' Voice
- Young Minds Day
- Wessex: Mind The Gap

Feedback Analysis

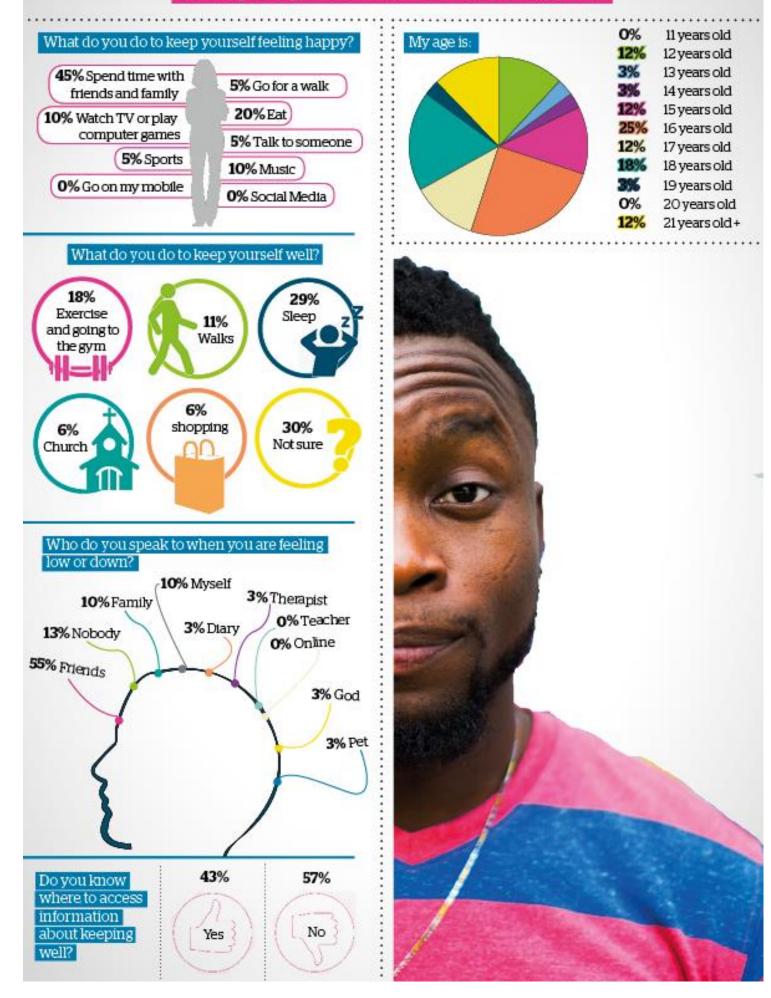
These are the presented findings throughout the engagement;

- We spoke to 135 young people and this does not include the number of parents/carers and professionals who are working with young people
- Young people say they prefer face to face communication rather than social media. They only want good news stories and promotional events on social media so they know where to go for support.
- Professionals are asking for extra support to ensure they reach more young people, as they fall through the gaps. They have found that networking in events have helped them understand of how other organisations are able to help when they are restricted in their organisation and highlighting their need for mental health training.



We asked young people these questions and these are the results;

Young People and Mental Health: Statistics



59 attended Young Minds Day event in Farnborough. These were a mixture of young people, parents, carers and professionals who work with young people. The carousel We asked young people these questions and these are the results;

We've asked three different questions and the themes were shown;

- Young People: Have you found that schools/colleges/universities have provided support for mental health?
 - Specific crisis line
 - Found that individual support was helpful, nothing else place for support. Not any provision.
 - Absolutely no support from sixth form college
 - At uni, there's more support- I had to access it myself. It was made more clear what services were available throughout time at uni.
 - Depends on organisations and the individual in that role
 - Colleges are better than schools
 - Schools not listening to needs of young people
 - Invest in Step by Step project- early help and intervention
 - Knowledge about services needs to be better
- Parents: Have you found services that support you in order to support the young person with their mental health? How easy is it to access support?
 - I felt fobbed off. Wanted more information- criteria was raised by GP to "see only very sick people"
 - Young Safe Haven supports parents too- we need to know about it
 - There's a non listening culture, including the expectation of not being listened to or heard
- Professionals: Do you feel you have the right resources to support you in order to support your Young Person with their mental health?
 - Stacey Miller consultancy- able to train up professionals and young people to recognise signs and symptoms (Peer Ed)
 - Breaking down barriers
 - e Advocacy
 - Better communication
 - Better training for staff
 - Creating a win/win situation
 - Specialist services have funding issues and concerns for hearing support
- Discuss and work out the most important to the young person and why.
 - Health professionals listening to me Might be first point of call. Never heard before so issues left internalised. Taken seriously, this can often get confused with boundary issues not mental health.
 - Accessing Services quickly When left in distress the situation would get worse. To feel safe/supported/held
 - Health professionals taking time to explain things properly Workers not presuming YP's understanding process
 - Having my say and being involved in the design of services As young people are the experts of their own need. YP's involvement improves autonomy/partnership. They are in the driving seat.
 - Friendship Getting and m

Getting and maintaining friendships, feeling a burden/not feeling good enough. Fitting in.



Health mentors

As Psychiatrists can feel "Prescriptive"- young person focused spaces at GP surgery.

- Being signposted to relevant agencies Knowing about free resources, information is empowerment
- Health professionals communicating ;2;8Joint up working/avoiding confusion. Transparency building a trusting relationship. Having their needs met.



What are the issues for Young People and how can they be better supported? What is helpful and is not helpful? (Pros and Cons)

- Stigma around mental health; school, bullying, dysfunctional family life, social media, self-harm.
- Anxiety; life change, school, exams
- e Depression
- Suicidal thoughts
- 🗧 Self Harm
- Accepting individuality- not all young people are academic
- Self image and comparisons
- Influence of the internet (Media)- Past, instant, living to the pressure
- Peer pressure; fitting in, drugs/alcohol, antisocial behaviour,
- Parental pressure; success and achievement, schools paying for lipservice to mental health, they see it as failure on their part. Parents with mental health issues.

Pros

- Need a multi layer approach
- Technology; apps and online- mental health first aid England, Mind Your Head, Base NHS, education through videos, awareness training through schools, Mindfulness youtube videos
- Peer sharing and support; work on coping strategies
- Schools to liaise with parents and the young person; proactive and informed parents
- Voung Person's Safe Haven
- Sport organisations for wellbeing; more positive media messages and campaigns

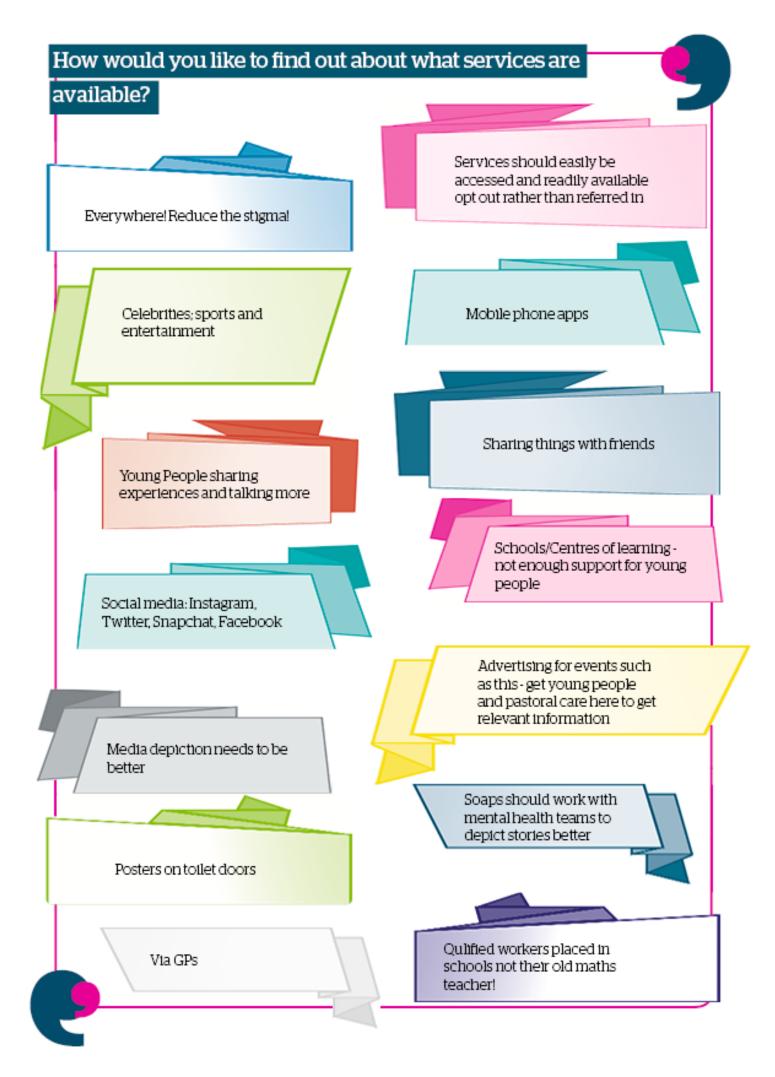
Cons

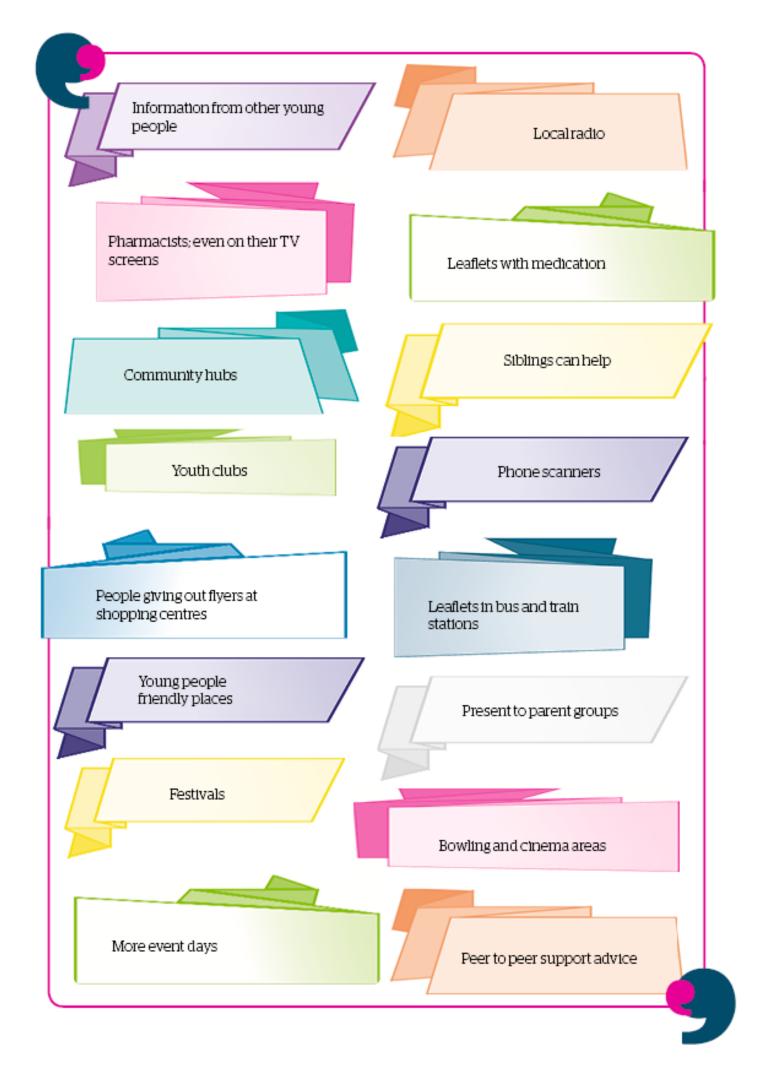
- Too many services involved with an individual
- Too much signposting- need a co-ordinator
- CAMHS- not responsive enough
 - Not enough experienced staff
 - Not enough continuity in staff (Social services do)
 - Long waiting times
 - Not enough awareness of their outreach work
- Counselling as a "quick fix"

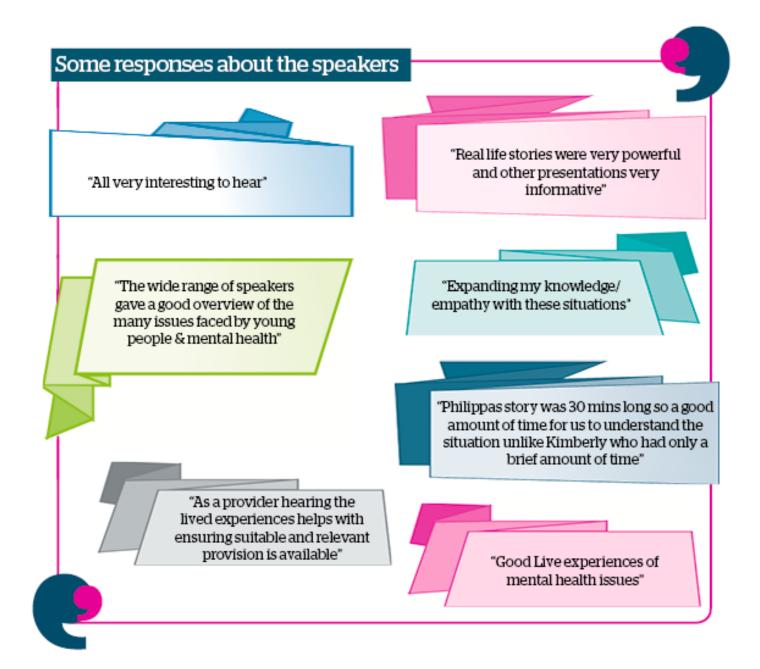
- Not enough information- needs to be centralized
- Homework- ban it!
- Not enough preventive work
- Educational system;
 - Not holistic
 - Too restrictive
 - No freedom/expression
 - Too many tests
 - Effects teachers and young people
 - Exams do not suit everyone

If you could improve services to better meet your needs, what would you change? (And why?)

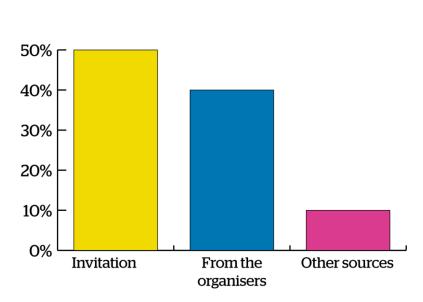
- Family therapy- learning how to listen to each other and to communicate more effectively
- Continuity with professionals
- Engagement with agencies who work with young people
- More capacity
- Money into GPs and Pharmacists to help them take "help position" from A&E or GPs to refer to Pharmacists
- NLP Availability
- Job Centres to be more friendly and approachable
- Find out how to engage with the public- not everyone uses the internet!
- Complementary therapies/ timeline therapy- disassociating
- Children and young adults under too much pressure from school- exams and SATs
- Utilise patient groups and make them more proactive
- Train up GP Surgery receptionists to be nice and not rude
- Terminology labels people
- Workplaces to be more aware of mental health
- More Safe Havens
- More networking opportunities
- Better access and quicker
- More money for CAMHS and restructure
- Know and respect your limits as a professional- can someone else do the job better
- Signposting directory or coordinator
- Services in schools
- More holistic and systemic services
- Continuity and co-ordination of services
- Better use of pharmacists
- Professionals to show more empathy towards patients





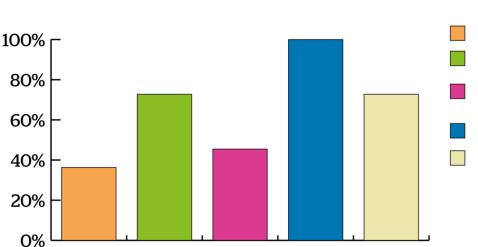


We asked Young Minds Day attendees to do an exit survey to find out more;



How did you hear about Young Minds Day?

Everyone stated it was easy to get to the venue.



Which of the speakers did you find useful?

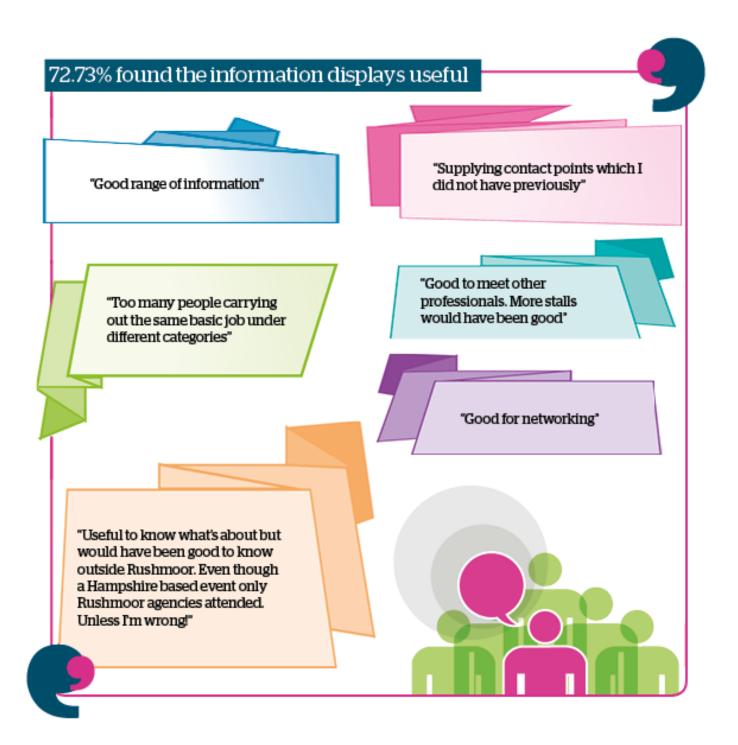
Young Safe Haven: Issues people face

- Real Life experience: Kimberly
- Medication: Prescribed Medication and the downsides
- Real Life experience: Philippa

Eating Disorders and Transitions (Dorset and Hampshire)

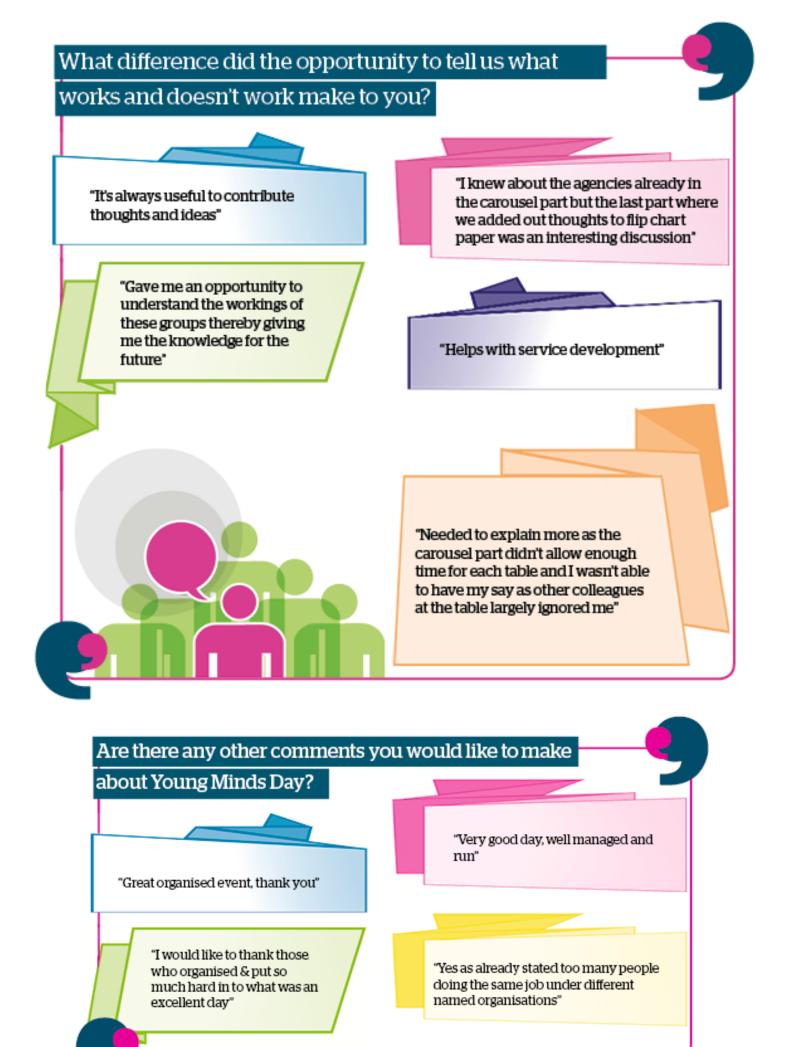
We had a **100%** agreement to the question - "Did you find the carousel mini presentations/discussions useful?"

90% felt they could contribute to the carousel questions



100% found us "Very Helpful or Quite Helpful" at the event **100%** of the respondents would attend another event like Young Minds Day in the future





70% of the respondents would like to be updated on the recommendations made and to attend the final event

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.

"My GP was very easy to talk to and they understand how I felt" "While I was unwell, Triage was extremely hard. I could cope with phone for an appointment and got one straight away" "I feel involved in my healthy because they gave me Ritalin tablets to calm me down." (Male, 17, with autism and ADHD, Fleet)

"GPs need training around learning disabilities, understanding but mostly importantly with empathy." (Female, 19 with a learning disability and BPD, Aldershot)

"Coping strategies given, before leaving an appointment- tools & techniques to use, if they don't know- print them" (Aldershot)

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.

A mental health service aimed specifically at school-age children has opened in Aldershot, Young Persons Safe Haven is based in Hillside Road, and is modelled on the Wellbeing Centre for adults. The YP Safe Haven is offering support to anyone between the ages of 10 to 17 and this extends to their family members and carers.

This service is being led by Just Wellbeing and they became involved

with two schools in Rushmoor and one in Farnham because of the number of young people who were missing school as a result of stress and other mental health conditions. The organisation worked with students to devise a questionnaire to see what kind of mental health support they wanted to see. They received 1,600 responses and these have been developed further to meet their needs at the Young Safe Haven.



Child and Adolescent Mental Health Services known as (CAMHS), provides services that works with children and young people aged 0-18 years old who have mental health and emotional difficulties that significantly affect their life and relationships.

NHS Sussex Partnership Trust CAMHS held a Parents and Carers Event (PACE), known as FitFest was held on the 15th June and their report is found via the link (Appendix A) The one day event aimed at several

objectives, as they have recognised the need to address issues that young people face daily, giving attendees the support they need. Their aims stated in the report to;





- To engage families in understanding the needs and difficulties young people face and increase their confidence and knowledge managing potential issues or concerns.
- To provide information in a way that is helpful, engaging and non-threatening.
- To present information that will destigmatise mental illness and other related issues
- Raise awareness of potential issues and where to seek help, advice and support.



The workshops were presented by specialists, covering issues around;

- e Autism Awareness
- Managing ADHD
- Managing Challenging Behaviour
- Supporting a child with substance misuse
- Supporting a child with eating difficulties
- Boosting body Image and Self-esteem
- Managing anxiety (for primary and secondary school aged young people)
- Supporting a child in crisis
- Supporting a child with sexual health and relationships
- Supporting a child through transition
- Supporting a child who is being bullied
- Talking to a child about gender identity and sexuality
- Where to go for support

79.7% of the exit survey responded were from the North- East Hampshire and Farnham locality.

An overview of the event was given (Abstract from the PACE Report- please see full report for more details)



It was clear on the day, from 119 attendees, that there was a need for this event and there should be further support for CAMHS to deliver this.

CAMHS in Hampshire held focus groups particularly around the restructure of the website, ensuring they cover Winchester, Havant, Fareham, Andover, Basingstoke and Aldershot. The findings are found in Appendix C.

Appendix D shows a further example from a school in the locality and how they deal with their students' mental health with support in place. This evidenced the need to support schools in their counselling provision as local GP surgeries are referring their young patients to the service, as well as reducing the CAMHS pressure- early as they can, as a preventive measure and to prevent students reaching to the point where their needs are complex and being left in a vulnerable position. This is also evidenced through the Association of Colleges, in survey shown 74% of colleges across England are forced to refer students with mental health issues directly to A&E in the past academic year (2016) This report link can be seen in Appendix E.

In another aspect, there was concerns and issues highlighted by calls to Help & Care Gateway team from parents and carers and conversations through the Your Voice Counts project, around the community paediatric issues and children's services provision by Frimley and Virgin Care. There is an official response from Angela Murphy, Deputy Director of Strategy and Partnerships and lead for Children & Maternity Collaborative working across Hampshire 5 CCGs responded to the public's feedback on issues raised.

"Many thanks for your email regarding patient feedback of which we welcome. We are aware of the challenges that our families and young people have been experiencing following the interim transfer of community paediatric services from Frimley Park Hospital NHS Foundation Trust to Virgin Care which happened last August 2016 and then more recently the service changed from Virgin to SABP in partnership with CHFS who won the Surrey wide procurement.

We are working incredibly hard in partnership with our providers to resolve the challenges with historical back logs and unacceptable waiting time and to ensure our families can access appropriate services as quickly as possible.

It is difficult to respond to the individual scenarios below, however if they wish us to pursue their individual complaints then please do ask them to contact us. Amy Childerley, Deputy Quality Manager manages our Complaints and can be reached through <u>nehccg.commentsandcomplaints@nhs.net</u>

We do have a fully operational community paediatric service now in place through the new partnership arrangement. We have also separately commissioned the ADHD/ASC service where we had a gap in provision for children aged between 6-11. This service is also now live and the new provider is working rapidly to contact all families who have been referred to offer them appropriate and timely appointments. They will of course be ensuring those children who have been waiting longest or where they have complex health needs are seen at the earliest opportunity. The provider will be offering week and weekend clinics to clear the back log and reduce long and unacceptable waiting times.

In the meantime, we have established a link with a parents group who have very helpfully been providing updates to parents. We will be very happy to follow-up any families who wish to make a formal complaint, but as both the services are now operational we do hope to see a significant improvement in the current situation.

Please let us know if we can be of any further help and please keep us posted on any further issues that are raised through Healthwatch. We will be using this information to support our conversations with the providers."

Healthwatch Hampshire have also spoken to the Office of the Police and Crime Commissioner. Michael Lane is the Police and Crime Commissioner, an elected representative responsible for holding the Chief Constable of Hampshire Constabulary to account, and is a voice for the public. He has a Youth Commission, now in their fourth year, made up of 14 to 25 year olds who decide four priorities for the year ahead with their voices being heard on policing and crime issues that matter most to them, utilising their skills and experiences.

The Youth Commission have recognised the need to look at cyber safety, unhealthy relationships, hate crime, and mental health. Commissioner Michael Lane is keen to support the recommendations made, ensuring key partners are working together to improve the four issues.

Mental health has now been a theme for two years for the Youth Commission, and there has been some joint partnership work with West Sussex Partnership. For example, the Youth Commission have promoted their Mind Your Head mobile app to the public.

The Youth Commission have also supported the "It's Ok to Talk" campaign last year on social media, targeting young men who are resistant to talking about their mental health, including suicidal thoughts.

Throughout the year, the Youth Commission hold a "Big Conversation" with their peers, asking them to respond to their four chosen priorities with their views and experiences, and what they should do to tackle the issues. From this, recommendations are made and given to the Police and Crime Commissioner and other partners such as Hampshire Constabulary, Hampshire County Council, Neighbourhood Watch, Hampshire Fire and Rescue Service, Youth organisations, Hampshire Cultural Trust and other partners. This would be beneficial for the local Clinical Commissioning Group to create a partnership, to take on board any relevant health recommendations.

The Youth Commission have produced a recommendation report which is seen in Appendix F.

Hampshire Constabulary has a Mental Health Lead, Huw Griffiths, who ensures frontline officers have been given the opportunity to access mental health training or developing their mental health skills further.

There are changes in law coming with the Policing and Crime Act that require officers to seek advice from a Mental Health Professional prior to using sec 136 and we are working with partners across the Force area to ensure this is in place.

Currently, staff are being signposted to Hampshire County Council for the Mental Health training, with a waiting list of a year. The Clinical Commissioners could provide relevant training to professionals, which then gives professionals tools and techniques to recognise signs before the young person gets to a crisis point.

Healthwatch Hampshire have asked if they are able to say the percentage of young people in the North East Hampshire and Farnham locality are being signposted to other services to support their mental health needs and if there are any referrals to A&E in the last three months. The police have no way of measuring this, however when an officer comes across a child (Under 18) who is "at risk" they complete a form that initially goes to Hampshire County Council for onward dissemination to the appropriate agencies. This form would cover all sorts of risk and other issues and it is not possible to break down into separate categories.

For those 18 and up, there is an almost identical adult form that follows the same process. They cannot break down that form either.

Calls to the Police that are flagged with a "mental health" context are 20% lower in Aldershot and Farnborough than they are across the rest of the Force. Their belief is that this is due to the Crisis Cafe in Aldershot that enables folk to just drop in when they need to. It does appear to dramatically reduce "crisis" incidents and they did not have a single detention under sec 136 in Aldershot and Farnborough in the first four months of this year (the latest figures we have). They feel it is definitely a success worth looking at!"

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.
 - Mental Health services are backlogged and evidenced that 40% of the referrals coming through are not meeting the service's criteria.
- Transition
 - Health Sciences Research Institute (Warwick) shows in their research that "poor transition leads to disruption in continuity of care, disengagement from services and is likely to lead to poorer clinical outcomes. Some young people, such as those with neurodevelopmental disorders and complex needs, are at greater risk of falling through the care gap during transition. Services need robust and high-quality evidence on the process and outcome of transition so that effect intervention strategies can be developed."
 - NICE (2004) warned of the transition period needs to be the focus for young people. These fall through three sections;
 - Leaving home, education, lifestyle changes, financial (Benefits, tax, etc)
 - Prevention, early identification and intervention
 - Structured New Models of Care and staff development
- Resources/preventative methods
 - Many of the individuals have said there is either too little resources or gaps
 - GPs say that they refer to appropriate services however the waiting times are lengthy to be seen soon as possible
 - Young people are reporting that they are not certain of who to go to for the support, in fear of not being taken seriously.
- Signposting and coordinating
 - NHS Dorset shows an approach to young people through one single point of contact of the "Transition Team", showing examples of impact;
 - Freedom to direct resources therefore self-manage their own wellbeing
 - Involving parents and carers
 - Manage concerns about money for children taken by Adult services or building trust.
 - Confidentiality issues met with statutory requirements

- 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.
 - 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.



- Parents and carers needs were reflected in their attendance to PACE event, delivered by CAMHS. One attendee said it was the best thing they have done, to have a direct conversation with a CAMHS professional to get on the path of the right support as their GP did not refer to the service and they were not aware that they could self-refer.
- 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
 - Schools felt that they have not been supported and wanted more involvement from the local CCG. Two schools reported spending approximately £50,000 an academic year on employing mental health professionals.
 - Schools in the locality are responding to the needs of their students by providing their own mental health team internally, as this need has increased over the last couple of years.

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 are made from the second phase of Your Voice Counts, particularly the focus on young people's mental health provision;

- Give your patient and yourself enough time for an appointment
- Give notice <u>at least 3 sessions</u> before the support ends and give alternative support information to peer groups or 3rd sector organisations
- CAMHS
 - To have extra support in delivering PACE/FitFest workshops in the locality, a CCG representative to attend the event to hold direct conversations with the public and support future promotion, to positively engage with the public
 - To have support/funding in delivering workshops for young people, using the same model as PACE FitFest
- Better use of pharmacists; leading to another point of immediate contact for young people
- GPs to undertake specialist training (Or a recap) on:
 - e on the Mental Capacity assessment
- To provide GPs with resources
 - e such as peer support services in their locality
 - voluntary and community groups to signpost to
 - This could be led to a social prescribing model
- Utilise patient groups and make them more proactive
- Signposting and coordinating
 - Signpost when necessary to appropriate services such as the Citizens Advice Bureau for more non-medical information
 - Funding a signposting directory or services coordinator; creating one point of contact and coordinating services
 - Ensure this method identifies the gaps in transition, ensuring young people have been signposted to appropriate support
 - Further support on this will meet the Local Transformation Plan 4.2 by implementation of a multi- agency single point of access. Hampshire Youth Access has local organisations from the North- East Hampshire locality involved; Hart Voluntary Action, 121 Youth Counselling, Step by Step, No Limits and The Source.
- Young Safe Haven
 - These services both offer preventative services as well as supporting patients in crisis and through recovery. Creating safe environments like the Young Safe Haven 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.
- Schools
 - To give mental health support to schools in the locality, providing access to a specialist or advisor to refer appropriately.
 - To provide training and resources to schools in the locality, giving them access with contact details to emergency mental health specialists.



- Specialist Knowledge
 - Many participants discussed GPs not having specialist knowledge of mental health issues 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.
 - Family therapy- using different methods to reduce the impact on the family's mental health as this means Adult Mental Health services will be used.
 - Mental Health training to be delivered for front line professionals, tying in with 1.2 (Local Transformation Plan), to develop an awareness training programme with regard to emotional wellbeing and mental health, or supporting CAMHS to do the delivery on this.
 - The Mental Health training will also fit in with the LTP 1.3 of joint working with the police, they would be trained to recognise young people's mental health needs by the CCG supporting/working with, via Crisis Concordat
 - Improving the transition arrangement between CAMHS and AMH is being reviewed and the audit is due in October 2017. The Local Transformation Care Partnership Plans have included this transition process in all acute and community contracts.
- Creating a self-help service where young people can learn tools and techniques to self-manage their anxieties and to recognise when they need to access help and where
- Create more networking opportunities- for both young people and professionals

What's next?

The fourth and last phase of Your Voice Counts is focusing on Dementia and Mental Health. The Citizens' Advice Bureau have already rolled out the surveys in Hart and Rushmoor area, and the closing date for the survey is 25th August 2017.

We will be bringing a group together to discuss future engagement with North East Hampshire and Farnham Clinical Commissioning Group, strengthening the relationship between both parties.

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

Key contacts

Hampshire CAMHS Helen Dove Innovation & Participation Lead *CAMHS Hampshire* Sussex Partnership NHS Foundation Trust Avalon House Chesil Street Winchester SO23 0HU Telephone: 01962 831059 Email: hdove@nhs.net Website: http://www.sussexpartnership. nhs.uk Young Safe Haven Judi Page Director Mental Health Services Just Wellbeing North Barn 4 Hillside Road Aldershot Hampshire GU11 3NB Telephone: 0800 061 4132 Email: j.page@justwellbeing.org.uk Website: https://www.justwellbeing.org.uk/young -people

Mayfield Patient Awareness Group Martyn Marsh

Mayfield Medical Centre Telephone: 01252 541884 Email: <u>mayfield.reception@nhs.net</u> Website: www.mayfieldmedicalcentre.nh s.uk

Parents and Carers Hub Ian Penfold Community Ambassador and Parent

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

Hart District Council Liz Glenn Health and Policy Project Officer Telephone: 01252 774228 Email: <u>liz.glenn@hart.gov.uk</u> 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: <u>nehfccg.ambassadors@nhs.net</u> Website: www.happyhealthyathome.org Twitter: @NEHFCCG

Step by Step Anna Khan Counselling Service Coordinator 36 Crimea Road Aldershot Hampshire GU11 1UD Telephone: 01252 346100 Email: info@stepbystep.org.uk Website: https://www.stepbystep.org.uk Twitter: @stepbystep1989 Facebook: /StepbyStep

The National Autistic Society South Hampshire Branch David Carter MBE Branch Officer Hampshire Autism Voice Email: dc@hampshireautismvoice.org.uk Website: www.shantsnas.org.uk Twitter: @Autism Facebook: /HampshireAutismVoice

Office of the Police and Crime Commissioner Lynne Meechan

Youth Commission Project Officer Hampshire, IOW, Portsmouth and Southampton Telephone: 01962 871595 Email: lynne.meechan@hampshire.pnn.police.uk Website: <u>http://www.hampshire-pcc.gov.uk/</u> Twitter: @HantsYC Facebook: /hantsyouthcommission



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HW Hampshire Teachers Pack

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Jonathan Beebee, Nurse Consultant, PBS4

Parents' Voice, parentvoice@roseroad.org.uk

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Children, Young People and Families: Life course approach Marmot 2010, Fair Society, Healthy Lives: The Marmot Review

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www.earlyinterventionfoundation.org.uk

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Hampshire Mental Health Transition Protocol, NICE

My Care, My View Tool, 2006

Mind Your Head, Hampshire CAMHS: Sussex Partnership NHS Foundation Trust

#ItsOktoTalk campaign

Appendix A

file:///C:/Users/fiona/Downloads/PACE%20Report%2015.06.17.pdf

Appendix B

Young People Mental Health Resources

Hampshire CAMHS <u>http://www.sussexpartnership.nhs.uk/sites/default/files/documents/camhs_hampshire_brochure_</u> <u>aw.pdf</u> Telephone: 0300 304 0050 (Monday to Friday between 9am and 5pm)

Young Minds: <u>www.youngminds.org.uk</u> ChildLine: 0800 1111 Hampshire County Council Children's Services: 0300 555 1384

The Vine: www.thevinecentre.org.uk 01252 400196

Hampshire Youth Access <u>www.hampshireyouthaccess.org.uk</u> 02382 147 755 enquiries@hampshireyouthaccess.org.uk

The Source: www.thesourceforyou.co.uk 01252 333330

No Limits 02380 244 244 enquiries@nolimitshelp.org.uk

Fleet Phoenix: www.fleetphoenix.co.uk 01252 812308 Out of hours: 07568 065123

iTalk <u>info@italk.org.uk</u> 023 8038 3920

FingerTips iView Plus Tool "You're Welcome Standards"

Mental Capacity Resources

 Mental Health Rights Act- Easy Read version <u>http://www.nhs.uk/NHSEngland/AboutNHSservices/mental-health-services-</u> <u>explained/Pages/easy-read-mental-health-act.aspx</u>

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

Helpful Organisations for parents/carers

- Contact a Family (Children) <u>http://www.cafamily.org.uk/</u>
- Parentline: 0808 802 5544
- Samaritans: 116 123
- FoCUS (Forum of Carers and people who use our services) SaBP NHS www.sabp.nhs.uk/focus

If you are concerned about the immediate safety of your child or anyone around them please go straight to the A&E department at your local hospital.

Appendix C

Website Focus Group- number one

10th and 15th February 2017

The first round of CAMHS in Hampshire website focus groups were held in the last couple of weeks at Winchester, Havant, Fareham Andover, Basingstoke and Aldershot.

We had a small number attending each of the focus groups representing various organisations and as parents and carers. The summary below hopefully encapsulates the main points that were raised relating to what was required, needed to be avoided and was important to all those that attended.

1. The request that information was clear and the service details were obvious at the start before time was wasted sifting through and finding the service was not appropriate etc. Be clear who's who and what's what, and areas covered, age range etc.

2. Easy and obvious navigation around the website including breadcrumbs (pathway)

3. Not too many words, lots of visuals, photos and video clips. Use the voices of YP to share experiences and knowledge. Include the experiences of famous people.

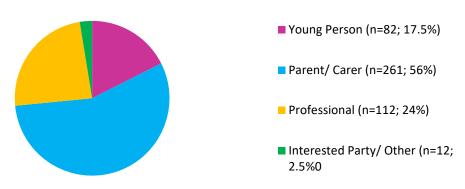
- 4. Make it interactive i.e. quizzes
- 5. Have a user guide to terminology and acronyms
- 6. Don't forget siblings
- 7. Not too corporate or too childlike.
- 8. No pop ups
- 9. Have a search bar that's effective and quick to use

- 10. Have available advice including managing a crisis 24/7 on the website.
- 11. Consider the requirements of the Accessible Information Standard
- 12. Contacts and resources section
- 13. When it's all done ADVERTISE IT WIDELY !

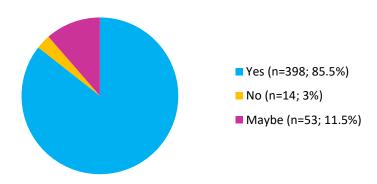
Hampshire CAMHS Initial Website Survey

A brief survey was sent out in order to collate initial views about CAMHS in Hampshire's forthcoming website. The response rate was excellent with 467 people giving CAMHS feedback. The aim was to establish 1) whether people would access a website 2) what functions they would like a website to have 3) whether they would be interested in partaking in focus groups to further discuss the look and function of the new website. A summary of results is below.

Question 1. Who are you?

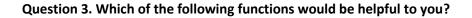


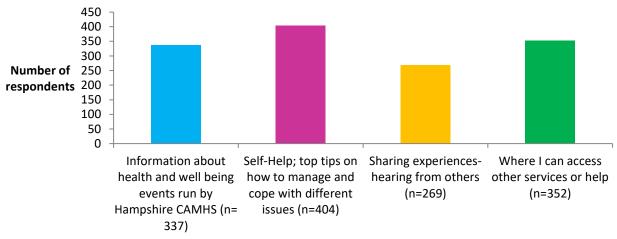
Question 2. Would you access a website for information, advice and guidance for emotional health/ psychological matters?



Qualitative feedback to 'no' or 'maybe' responses included;

	Number of respondents
Prefer to speak to someone in person	12
Depends on how I am feeling/ If I am motivated/ remember	3
Too complex to navigate/ time consuming/ wouldn't meet my needs	4
Unsure about quality of information on the internet	3





Website Function

	Number of respondents
Info on current affairs/ interests of young people	3
Info and support for dealing with immediate crisis	4
Info and advice for post 16years	1
Social media platforms (e.g., twitter)	2
Information about CAMHS processes (including treatment options)	14
Info, resources and support for parents/ carers	6
Info, resources and support for professionals (e.g., teaching staff)	3
Info that young people with a learning disability can access	1

Other suggestions included:

Question 4. Would you be interested in being part of a task group to give feedback once the website design is in process?

195 (41%) of respondents were willing to join a task group and provided their contact details.

Appendix D

From one school;

"Our counsellors see between 300-350 students per academic year. The range of support offers varies from email contact, to crisis support one off help, to regular one to one counselling appointments.

We provide:

50 hours of face to face individual counselling sessions each week. In addition we offer twice daily drop in clinics manned by trained counsellors to support students in crisis. The team also provide weekly group support sessions on common mental health issues such as anxiety and stress.

We run this service on 46 paid hours a week and rely on volunteer counsellors to be able to meet the rest of the demand. Our team consists of 6 part time, paid counsellors and 9 volunteer counsellors. We are very anxious about continued access to a pool of volunteers since the local counselling training courses may be discontinued.

Presenting issues include a variety of mild, moderate to severe diagnosed mental health such as Depression, Anxiety, Bi-polar, OCD, Eating Disorders. But also family breakdowns, relationship problems, suicidal thoughts, isolation, drug and alcohol abuse alongside academic pressures and stress.

Our good counselling provision and reputation means GP surgeries often refer their patients to our service. Our aim is to support our students as early as possible in order to stop their situation becoming one which requires ongoing specialist support.

Lack of funding within CAMHS has meant a raising of thresholds for young people to gain help, leaving our service working with increasingly complex vulnerable young people.

We run a waiting list all year round and at peak times between October to May students face waits of up to 8 weeks to see a counsellor. Currently the waiting time is 4 weeks.

Where possible we refer students to alternative counselling services so students can get the help they need and have asked for. Within Hart there is 121 Youth Counselling, in Berkshire there is ARC but a lack of youth counselling services in Rushmoor means students in our immediate catchment areas of Farnborough and Aldershot have little choice."

Appendix E

https://www.aoc.co.uk/news/colleges-forced-refer-students-mental-health-issues-directlyae?dm_i=26BG,4RA19,FUY97E,HV5VP,1

Appendix F

http://www.hampshire-pcc.gov.uk/recommendations2017

Appendix G

