



Somewhere to go, Something to do

A Survey of the Views of People Using
Mental Health Day Services in Croydon

 mind in Croydon
for better mental health

FEBRUARY 2014

Executive Summary

The Survey

118 people who had been using mental health day services in Croydon since 2009 completed a questionnaire asking them to describe the services they used to receive compared with those they receive now. They commented on how they felt their physical and mental health, quality of life and social inclusion had changed during this time. People were asked to describe the kind of services they felt would be of benefit to them now.

Main Findings

A third of people said that their mental health had got worse or much worse since 2009. Nearly 40% said their physical health was worse or much worse. Nearly 40% of people said their quality of life was worse or much worse and a third of people said their social inclusion was worse or much worse.

People said they were feeling more lonely, isolated, anxious and worried; they had more money and debt problems and felt that their mental and physical health had deteriorated. Two thirds of people were seeing their G.P. more frequently than before and nearly 50% of people said that they had been admitted to hospital (both physical and psychiatric) more frequently.

People said that previously they had been able to get a lot of practical help and assistance with form filling, dealing with bills and debt, outreach support, practical advice, understanding their mental health problems and help with community issues e.g. housing and neighbours. People said that they were much less able to get this help currently. Whereas people had previously been able to attend services several times a week, or even daily, very few people were now attending daily and more than half were now only attending one day a week.

For a minority of people the aims of the changes to day services had been achieved. 46% of people said their mental health was better or much better, 34% said their physical health was better or much better. 44% said their quality of life was better or much better and 45% said their social inclusion was better or much better.

It had been hoped that as people used mental health day services less they would use mainstream facilities and resources more. There was little evidence that this was happening. People said there were less free and low cost facilities available than before and that lack of finance was a barrier.

What People Felt They Needed

People said that what they needed was:

- Services where they could attend more regularly at a venue that was constant and reliable, and was available some evenings and week-ends;
- More practical help and assistance with form filling, bills, debt and benefits, outreach support, community issues (housing and neighbours) and help with understanding and managing physical and mental health problems;
- A place where they could meet and socialise with other people in a relaxed setting in order to combat loneliness and isolation;
- Places to get affordable nutritious meals, eaten in the company of other people.

Recommendations

- 01.** Local commissioners should listen to the views of service users about the kind of services and support that they find helpful and supportive and ensure that they have commissioned a sufficient level and quality of such services locally. This should include specialist support around welfare benefits, debt and housing problems.

02. Local providers should work with commissioners to develop monitoring and evaluation processes that evidence the value of services in terms of maintaining peoples' well-being and recovery and preventing relapse and unnecessary use of G.P services, Accident & Emergency Services, Walk-in centres and secondary mental and physical health services. This should include an element of cost / benefit analysis.

03. Funding should be made available for a mental health social prescribing service.

04. Commissioners should work with local NHS Trusts, service users, carers and local voluntary sector agencies to ensure that robust data is collected about why people are being admitted to mental health in-patient beds from the service users' perspective.

Background

In 2007 Croydon's commissioners of mental health services undertook a review of Day Services and in 2009 commissioned a new set of Day Services that aimed to: "improve the range of services available; ensure that there would be adequate services in place that are socially inclusive and assist users with their recovery; make sure that services are as accessible as possible for as many users as possible; ensure that there is a range of interlinked services available that users can access."

Mind in Croydon has been providing innovative, award winning mental health services in Croydon for more than forty years. As part of the changes, one of our services was re-commissioned to provide support for fewer people than we had previously been supporting with a focus on people who were subject to the Care Programme Approach. The aim of this new service was to improve peoples' social networks and improve their independence. The Social Networking Service has been a great success for the people accessing it, but Mind in Croydon were concerned that some of the people we had previously been supporting were no longer eligible for this service. We became aware that a number of people were not coping as well as had previously been the case. This resulted in marked deterioration in their mental health and led to people relapsing, more hospital admissions, more use of G.P.s, more social isolation and more suicidal thoughts and attempts.

Mind in Croydon decided to raise money locally through the opening of a charity shop and use the money raised to develop a support service for this group of people. In order to understand the needs of people and thus be better informed to deliver a service that would meet peoples' needs we undertook a survey.

At the same time, Mind in Croydon was becoming more concerned about the number of people being admitted to psychiatric hospital. In Croydon there

were 192 occupied bed days per 1000 adults, compared with 106 for statistical neighbours and 89 in England. Moreover, the lack of bed spaces locally meant that Croydon patients were being admitted to overspill beds as far away as Sussex and Manchester. 20% of acute mental health activity was happening in non local services. The cost of this (£2.5 million per annum) was putting enormous pressure on the local mental health budget.

Administration of the Questionnaire

The questionnaire was available to people on-line and via the post, telephone and face to face. We also held drop in sessions at Fairfield House and at other centres, including The Salvation Army and the Community Mental Health Teams. To reach a further audience we left the questionnaire at G.P. surgeries in the Borough. The consultation period was from July to October 2013.

The Results

118 people answered the questionnaire. The questions were ordered so that we could make a comparison between what support people received before the change in services and what they receive now.

Frequency of Use

How often did participants access day care services before 2009?

33% of the participants told us that they had received support every day of the week and 44% more than once a week.

How often do they access services now?

Only 6% of people now accessed services every day, 42% more than once a week and the remaining 52% once a week.

Table one over the page compares the results.

TABLE 1

Before 2009	Frequency of Attendance	Now
23%	Once a week	52%
44%	More than once a week	42%
33%	Every Day	6%

Support Received

People were asked to describe the kind of support they received as part of attending day services previously and currently.

Table two shows that in every category people were receiving less support now than had previously been the case.

TABLE 2

Before 2009	Help Received	Now
53%	Form Filling	34%
21%	Help with bills	14%
21%	Help with debt	12%
42%	Outreach support	15%
49%	Practical advice	28%
21%	Help with community issues (e.g. Neighbours)	12%
62%	Help with understanding your mental health problem	37%
27%	Other practical support	12%

What help do people think they need and don't currently receive? (Table 3)

50% of people said that they needed help with outreach support, form filling and practical advice. In addition to this nearly half of the participants also felt that they needed help with community issues and would like a place to have a meal.

TABLE 3

Help required	Percentage of People
Form filling	50%
Help with bills	25%
Help with debt	35%
Outreach support	51%
Practical advice	50%
A place to have a meal	49%
Help with community issues	46%
Any other support	25%

How do people feel their mental health has changed? (Table 4)

46% of people said that their mental health was a bit or much better, 32% said their mental health was a bit or much worse. 22% said it was the same.

TABLE 4

Much Better	18%
A bit better	28%
Same	22%
A bit worse	19%
Much worse	13%

How do people feel their physical health has changed? (Table 5)

34% of people said their physical health was a bit or much better, 38% said their physical health was a bit or much worse. 28% said it was the same.

TABLE 5

Much Better	15%
A bit better	19%
Same	28%
A bit worse	20%
Much worse	18%

How do people feel their quality of life has changed? (Table 6)

44% of people said that their quality of life was a bit or much better, 38% said it was a bit or much worse. 18% said it was the same.

TABLE 6

Much Better	18%
A bit better	26%
Same	18%
A bit worse	20%
Much worse	18%

How do people feel their social inclusion has changed? (Table 7)

44% of people said that their social inclusion had improved, 32% said it was a bit or much worse. 24% said it was the same.

TABLE 7

Much Better	18%
A bit better	26%
Same	24%
A bit worse	16%
Much worse	16%

How often do people see their G.P.s?

65% of people said that they had seen their G.P. more frequently in the last 3 years.

TABLE 8

More	65%
Less	35%

26 people said they had seen their G.P. more than 15 times in the past 3 years. 14 people said that they had seen their G.P. 'many times' or 'countless times'.

How often have people been admitted into hospital?

58% of people said that they had been admitted to hospital more frequently in the past 3 years. This included hospital admissions for both physical and mental health problems.

TABLE 9

More	58%
Less	42%

Those who had been admitted to psychiatric hospital gave a range of reasons for these admissions. These could be themed generally as:

- Isolation
- Relapse in their mental health
- Not feeling supported

“I had a relapse in my mental state because I had no support.”

“I have feelings of isolation and that I’m not good enough.”

What did people say they need to improve their well being?

This was an open question. Responses included themes such as:

- Meeting more people
- Having somewhere safe to have a hot meal with friends
- Support when it is needed
- Practical support
- Help with benefits, debt and housing problems

“I want to be around more people to occupy my time”

“I need to go somewhere and mix with people, also to have a meal and do groups”

Who answered the Questionnaire?

Sex	
Male	47%
Female	53%

Age	
16 – 18	0%
19 – 25	2%
26-34	5%
35-44	22%
45-54	38%
55-64	22%
65+	11%

Ethnicity

67% of the participants were White British; the remaining 33% were from a range of minority ethnic backgrounds.

Postcode	
CR0	57%
CR2	14%
CR5	3%
CR7	8%
CR8	8%
CR9	0%
SE19	3%
SE25	6%
SW16	1%

Conclusions

It is encouraging to see that some people feel that over the past three to four years their mental and physical health has improved, as has their quality of life and social inclusion. However, this survey shows that there are significant numbers of people who say that the opposite is true. People described getting less help and support and feeling more isolated, lonely and anxious. Generally, they were using their G.P.s more and had increased

admission to hospital for both physical and mental health problems. During this period there has been a marked increase in the demand for in-patient beds. Significantly, this demand has not been met locally and many Croydon residents have been admitted to overspill beds as far away as Sussex and Manchester. The financial cost of this to the Clinical Commissioning Group is £2.5 million per annum, and being placed a long way away from friends, family and support is not in patients' best interests.

Service users clearly identified areas where they felt they were not getting sufficient help and support. These are:

1. Help with form filling
2. Help with bills, debt and benefits
3. Outreach support
4. Practical advice
5. Help with community issues (e.g. neighbours)
6. Help with understanding and managing mental health
7. Help with understanding and managing physical health
8. A place to have a meal in the company of other people
9. Somewhere to go to prevent loneliness and isolation
10. Somewhere to go during the evening and at week-ends

There is evidence that service users are presenting in other health and social care settings in an effort to have these needs met e.g. G.P. surgeries, Accident and Emergency Departments, Walk-in Centres. The impression is that these services do not feel able to offer the appropriate support to people and that people feel that these services do not meet their needs.

Recommendations

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02. Local providers should work with commissioners to develop monitoring and evaluation processes that evidence the value of services in terms of maintaining peoples' well-being and recovery and preventing relapse and unnecessary use of G.P services, Accident & Emergency Services, Walk-in centres and secondary mental and physical health services. This should include an element of cost / benefit analysis.

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