

SURVEY DEVELOPMENT REPORT

2023 COMMUNITY MENTAL HEALTH SURVEY

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Updates

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Questions and comments

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1. Introduction

The Community Mental Health Survey (CMH) has been conducted almost every year since 2004 as part of the Care Quality Commission's (CQC) NHS Patient Survey Programme (NPSP). CMH is one of the five experience surveys that comprise CQC's national programme. The Survey Coordination Centre (SCC), based at Picker, are responsible for coordinating the survey on CQC's behalf.

The survey provides an opportunity for service users to feed back on their recent experiences of NHS Community Mental Health services. The data collected are used by the CQC in its assessment of mental health trusts in England. NHS mental health trusts use the survey data to understand how they are performing with regards to the quality and experience of services they provide to their users, and to pinpoint improvement. Moreover, national stakeholders such as NHS England and the Department of Health and Social Care, use the data to understand how services across England are performing.

This year, the survey has moved from a solely paper-based method to a mixed-mode approach, providing participants with the opportunity to complete an online or a paper questionnaire. The 2023 survey has undergone a large-scale redevelopment, taking into consideration the changes in response mode and sample period. The break in the data series, due to the move to mixed-mode, shift in demographic profile and the timing and length of the sample period, provided an opportunity to redevelop the questionnaire ensuring that its content is in line with policy and practice and allowing trusts to use the new questions for improvement.

1.1 Background

A pilot¹ was conducted in 2021 to investigate the feasibility of transitioning the Community Mental Health Survey from a paper-based to a mixed-mode method. This followed the successful transition of other surveys within the NPSP, namely the Adult Inpatient and Maternity surveys. The pilot tested a push-to-web approach combining both online and paper data collection methods. The findings supported a move to a mixed-mode data collection approach with a paper questionnaire included in the second and the final mailings.

More specifically, pilot 2 achieved a response rate similar to that of the national survey approach (paper-based questionnaire only). However, there were some slight differences in terms of the demographic profile and question responses between the national sample (paper-based only) and the pilot group (paper and online based approach). The analysis showed that younger people were more likely to complete the online questionnaire compared to older people. This difference was compensated for once data were weighted for age differences across the population. Moreover, analysis of the question responses showed that the national sample provided more positive responses compared to the pilot group(s). As this pattern remained after the data were weighted, the transition to a mixed-mode approach could have contributed to a break in the trend data.

Analysis of the overall results showed that national level differences were generally consistent with trust level differences in terms of mode of completion, question responses

¹ For more details, please visit: <https://nhssurveys.org/wp-content/surveys/06-development-work/06-engagement-work/2021/Community%20Mental%20Health%202021%20Mixed-mode%20pilot%20results.pdf>
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and response rates. This signalled that trust comparability would not be impacted by the move to mixed-mode methodology.

More specifically, the analysis of the pilot data showed that:

- The introduction of mobile numbers did not negatively impact the response rate. Service users with a mobile phone number were significantly more likely to respond than those without a mobile number on record.
- Text message (SMS) reminders were fundamental in increasing online completion rates, and response rates were higher if mobile number availability was higher. This was consistent across national and trust level findings.
- Participants aged over 35 were more likely to respond than younger service users, with the likelihood of responding increasing with age up to 80 years.
- Service users completing the survey online were as likely to use the SMS unique survey link as they were to use the log-in details provided on the letter.
- Participants responding to the online survey were younger compared to those completing the paper questionnaire. This confirmed existing findings about generational differences in mode of completion with older people being less likely to participate in online surveys².

The results of the pilot confirmed the feasibility of moving the CMH survey to a mixed-mode approach, combining both online and paper-based data collection methods with a paper questionnaire included in the second and final mailings. Text message reminders (SMS) in the second and fourth contact were fundamental in increasing online completion rates and response rates were higher where mobile number availability was higher.

1.2 Summary of changes

Given the extensive redevelopment required for the 2023 iteration of the CMH survey, the SCC undertook a number of activities to review the content and design of the survey. Based on desk research and wide consultation with stakeholders and NHS mental health trusts, several changes were implemented. This report sets out the phases of development work and provides a detailed account of the results of the consultation process.

In summary, the main changes to the methodology, survey materials and questionnaire content for the 2023 survey are:

- **Covering letters were updated to include the online survey log in details.** The tone of the text was revised to highlight that by completing the survey, participants are helping to improve care for other service users. Trusts have also been given the opportunity to add information on how they have used the previous survey data to improve care for service users.
- **Major revisions were implemented to the questionnaire.** Twenty-three new questions were added, nineteen removed, and fourteen were amended. A new section was introduced to capture the experience of younger people transitioning from Children and Adolescent Mental Health Services (CAMHS) to Adult Mental Health Services.

² <https://bmcmmedresmethodol.biomedcentral.com/articles/10.1186/s12874-020-01138-0>

- **Eligibility criteria and sample variables were revised.** For the first time this year, 16- and 17-year-olds were eligible to participate, while Memory Clinics have been excluded. Five sample variables were added, and three were removed.
- **Patient-facing materials were updated to include a leaflet for 16 and 17-year-olds.** In addition to the dissent poster, trusts were requested to display this information leaflet on their website. The leaflet allowed young service users to be aware of the survey and provided an opportunity to ask questions or opt out if they wished to be excluded from taking part.
- **Survey guidance was revised to include changes due to the move to a mixed-mode approach.** Further instructions were added to the sampling materials to reflect changes to the collection of the sampling variables.

2. Survey Development Activities

2.1 Scoping work

The scoping and consultation phases of the project were completed by IPSOS Mori. Ahead of the consultation phase of the CMH23 survey, a number of key elements of the survey were reviewed, to inform areas for discussion with stakeholders, service users and CQC. The following areas were considered for the review including; learnings from previous surveys, how to approach a recontact question for this survey population, a detailed review of the sample approach and design, a review of whether fieldwork can be shortened and how best to offer an online mode for this survey. Below is a summary of recommendations from the scoping review:

Questionnaire

- It was recommended that the questionnaire should be reviewed and designed through the lens of the mobile first principles. To ensure that the questionnaire itself is suitable for online responses.
- Reviewing the questionnaire to ensure that all questions are easily understood for all those within the sample was recommended.
- Including a recontact question which is consistent with the wider NPSP.

Materials

- Clearly outlining in all materials shared with respondents (as well as in the survey introduction) that they are able to take regular breaks and are allowed support when completing the survey.
- Ensuring that invitation letters have opt-out mechanisms to help people understand the process for removing consent at each point of recontact.
- Reviewing the format of all materials to ensure that are suitable for the audience.

Accessibility

- Accessible options to be built into the design.

- Specific requirements could be addressed for those with dementia or Alzheimer's through a more targeted approach.

Sampling

- 2-month sample month recommended.
- Stratifying samples by sex, age and care cluster recommended
- Suggested that we do not make substantial changes to the sample variables however, the following smaller changes such as removing the CCG code and adding variables confirming previously inpatient mental health stay / and or time on a waiting list were recommended.
- Consider sample boosts for minority ethnic groups, deprivation and/or receiving dementia care to ensure that we have sufficient responses from these groups for analysis.
- Reviewing the inclusion / exclusion criteria suggested based on the following:
 - adjusting the sample design to boost by ethnicity, deprivation, and /or receiving dementia care
 - extending the lower age limit to 16 from 18.
 - Exclude those currently accessing dementia services.
 - Include those accessing learning disability / drug and alcohol / Improving Access to Psychological Therapies (IAPT) / Chronic Fatigue Syndrome (CFS) / or Myalgic Encephalomyelitis (ME) / Psychosexual medicine / Gender identity services.
 - Specifying eligible and ineligible services in sampling documentation using a centralised code.

Fieldwork

- Shortening fieldwork from 18 weeks to 15 weeks (as long as all trusts are in field by week 7).

Reporting

- It was suggested that the detail provided in the Analysis Plan is the blueprint from which all the outputs are produced. All deliverables and corresponding documents should be outlined in detail in the analysis plan, including agreeing templates, QA processes, and agreeing initially, which trusts/questions are comparable.
- Recommended agreeing the detailed checks in advance to ensure high quality outputs.

2.2 Consultation phase

The consultation phase consisted of a series of exploratory interviews with a mixture of service users, frontline staff, stakeholders, sample leads and ethics specialists discussing topic areas relevant to the re-design of the questionnaire that were identified in the scoping

phase review of learnings. The core aims of these interviews were to ensure that the survey is relevant to the service that people are receiving, that the outputs are useful in identifying areas for improvement, and that the survey is future proofed to ensure trend data for years to come.

Topic guides were developed for each group of audiences interviewed, these were developed by the core research team from Ipsos, with input from the learning review at the scoping phase and contribution from the CQC team. The findings and recommendations from this report were used to form discussion points for the questionnaire development phase.

The following groups of participants were recruited and interviewed:

- **15 in-depth interviews with service users** who had come into contact with Community Mental Health services in the last 12 months.
- **10 in-depth interviews with frontline staff** who work under Community Mental Health teams across England.
- **7 in-depth interviews with stakeholders** whose work involves engagement with and use of the data produced by the Community Mental Health survey.
- **3 in-depth interviews with sample team leads** who work within trusts that deliver the Community Mental Health Survey.
- **1 in-depth interview with a representative from Ipsos' internal Ethics panel**

Main findings from consultation phase:

It became clear in interviews with service users that there were some common key steps within their journey of accessing community mental health services. There were different experiences dependent on the route, with transitions from primary care to community mental health services raising issues, while access through a crisis care team was generally a positive experience.

Through the interviews it was found that consideration was required around how service users are accessing services, and how their experience may have been impacted by this, as well as the length of time they have waited for access to care. It was decided that survey questions need to be sensitive to and reflect the range of conditions and severity of conditions of those completing the survey, as well as their different routes to accessing care. Including a timeframe in questions was recommended to help ensure those who have been in the system a longer time are reflecting on recent experiences when responding.

In the interviews, frontline staff identified a number of challenges and changes that impact the way they provide care. Staff shortages, a lack of available space to have appointments, and issues with IT systems were all cited as key challenges to staff in community mental health services. Furthermore, a number of frontline staff also raised that they had seen structural changes to the roles providing care. These issues were kept in mind when developing the questionnaire for 2023.

Interviews with sample team leads, stakeholders and frontline staff included questions covering sample design and methodology. Key changes to the eligibility, inclusion and exclusion criteria recommended include:

- Extending the lower age limit of the survey to include sixteen- and seventeen-year-olds.
- Including service users who are also accessing drug and alcohol support alongside community mental health services.
- Exclusion of those solely accessing dementia services, as much of the care these service users receive is through their GP and limited contact with memory clinics.

Interviews with service users, frontline staff, stakeholders and the representative from Ipsos' internal Ethics panel, explored opinions on how to make the survey more accessible. Participants were also invited to share their thoughts on the potential inclusion of a recontact question in the survey. Overall, participants from all groups were positive about the potential inclusion of the recontact question and the opportunity for future research that this may create. The importance of using easy to understand language and providing information on data protection compliance were raised. Additionally, it was agreed that the option of opting-out and the process to do this is made clear. Service users also felt the maximum length of time after the survey they would be happy to be recontacted was one year.

Interviews with service users, stakeholders and frontline staff also invited opinions on how the current survey could be improved, areas for further investigation and suggested changes to content. The recommendations included health inequalities, integration of care, family involvement in care and defining time periods for service users to reflect on when answering questions.

2.3 Desk Research

Early development stages of the 2023 survey involved CQC conducting desk research to review potential new questionnaire themes. This identified a number of topic areas all of which were reviewed in collaboration with the SCC. The most prominent themes identified were health inequalities, digital exclusion, involvement of family in care, integrated care, waiting times for care and trauma informed care.

Existing research on health inequalities showed that demand for mental health services is more prevalent across deprived communities. In particular, mental health inequalities have been known to exist across some of the protected characteristics such as age, sex and sexual orientation, ethnicity and disability. Evidence from the Adult Psychiatric Morbidity Survey³ showed significant ethnic inequalities for people with mental health issues in England. For example, among men with psychotic disorder, people from the Black and Asian ethnic groups were much more likely to suffer from psychosis than men who were White. In fact, the survey demonstrated that Black men were three times more likely to be diagnosed with a psychotic disorder than White men. Additional evidence on ethnic inequalities in psychiatric care pathways showed that in 2019/18 detention rates under the Mental Health Act among the Black or Black British group were four times higher than the rates of the White group⁴. Further research by the Kings Fund has linked these findings to higher levels

³ [mental health and wellbeing in england full report.pdf \(digital.nhs.uk\)](https://digital.nhs.uk/mental-health-and-wellbeing-in-england-full-report.pdf)

⁴ [Ethnic inequalities and pathways to care in psychosis in England: a systematic review and meta-analysis | SpringerLink](#)

of serious mental health disorders within this group, as well as racism and discrimination within psychiatric care services⁵.

Digital exclusion has been of particular relevance to health inequalities and especially, with the move to more digital healthcare appointments. The pandemic and the changes that it entrenched for the delivery of and access to healthcare has resulted to the widening of inequalities between those who were digitally included and those who were digitally excluded. Existing research has linked social and digital exclusions in England⁶. A close correlation has been found between low levels of information and communication technology, and social disadvantages (including lower income and lower levels of education). Further research has identified age, gender, income and education as primary determinants for access and use of technology⁷, while additional findings emphasised that socio-economic factors have been distinctly linked to internet use, as individuals with a higher income were more likely to spend time online and be acquainted with the online space⁸.

Involvement of family in care has been an integral part of the CMH survey but this was further explored during the development phase of the 2023 Survey. NICE guidelines on involvement of family in care have highlighted that healthcare professionals should check whether a service user wants their partner, family members and/or carers to be involved in decisions about their care⁹. If consent cannot be given by the service user, family members and carers should be kept informed, but healthcare professionals should still respect the confidentiality of the service user. A growing body of evidence has shown that engaging the family in the care of patients had a positive impact on the quality of care and patient agreement with treatment¹⁰. Family involvement could contribute to the creation of a culture of inclusivity which has proved beneficial to the quality of treatment and patient safety.

The NHS Long Term Plan¹¹, published in January 2019, recommended Integrated Care Systems (ICSs) as central for its delivery. An ICS brings together local organisations with the purpose of improving population health, redesigning care, creating shared leadership and action. To this end, ICSs provided a practical way of delivering the 'triple integration' of primary and specialist care, physical and mental health services, with social care¹². Integrated models of primary and community mental health care have been developed to support adults with severe mental health illness. Evidence has shown that community-based services could reduce emergency departments use for mental health needs, as well as improve outcomes for individuals experiencing mental health crises.

For many people experiencing mental health crisis, sanctuaries, safe havens, and crisis cafés have provided a more appropriate community alternative to emergency services. An example has been the Aldershot Safe Haven Café that was launched by Frimley Health and Care and staffed by NHS and voluntary sector mental health professionals. Aimed at helping

⁵ [What are health inequalities? | The King's Fund \(kingsfund.org.uk\)](https://www.kingsfund.org.uk/what-are-health-inequalities/)

⁶ [Digital Exclusion in Higher Education Contexts: A Systematic Literature Review \(sciencedirectassets.com\)](https://www.sciencedirectassets.com/Digital-Exclusion-in-Higher-Education-Contexts-A-Systematic-Literature-Review)

⁷ <https://journals.sagepub.com/doi/10.1177/1461444818797082>

⁸ [Full article: Do the rich get digitally richer? Quantity and quality of support for digital engagement](https://www.nice.org.uk/guidance/cq138/ifp/chapter/involving-you-in-your-care)

⁹ <https://www.nice.org.uk/guidance/cq138/ifp/chapter/involving-you-in-your-care>

¹⁰ Østergaard B, Clausen AM, Agerskov H, *et al.* Nurses' attitudes regarding the importance of families in nursing care: a cross-sectional study. *J Clin Nurs* 2020;297-8:1290–1301. DOI 10.1111/jocn.15196

¹¹ [The NHS Long Term Plan \(PDF\)](#)

¹² [NHS Long Term Plan » 5. Local NHS organisations will increasingly focus on population health – moving to Integrated Care Systems everywhere](#)

people refrain from needing emergency NHS care, the café has provided adequate care planning, encouraged self-management to prevent crisis escalation, and enhanced access and treatment provision from other services¹³. Attendance to Safe Haven services has been found to reduce emergency department usage and psychiatric admissions. Further evidence from Cambridgeshire and Peterborough highlighted that voluntary sector and local authority working together has resulted in a 20% decrease in mental healthcare use for the emergency department. A 26% reduction in the number of admissions to acute hospitals from emergency services (based on mental health needs) has additionally been found.

One of the most prominent topic areas that was explored during the development phase was waiting times. Evidence on waiting times showed that nearly a quarter of mental health patients (23%) waited more than 12 weeks to start treatment, due to lack of consultant psychiatrists. Four out of five (78%) sought help from emergency services, while two in five (43%) said that their mental health got worse¹⁴. Given the long waiting times, trusts have taken action in offering support. NHS Derbyshire Healthcare provided service users with a 'Waiting Well' leaflet with information and methods to cope whilst on the waiting list¹². Supported by evidence, understanding how people are experiencing long waiting times was considered of value.

According to the NHS Long Term plan the development of trauma informed care in relation to a community offer for people with severe mental health problems and vulnerable young people has been a priority. However, there has been a lack of consensus between health and social care sectors on how to define trauma-informed practice¹⁵. A thorough approach of introducing trauma-informed care at clinical and organisational levels has been appealed by the Centre for Health Care Strategies¹⁶. Recent research suggested that multiple adverse childhood experiences (ACEs) have been strongly correlated with an increased risk of developing poor health outcomes such as mental health disorders¹⁷. Additional research highlighted that services that have not been informed on trauma were at the risk of excluding individuals who experienced it¹⁸, and thus trauma-informed care offered opportunities to improve healthcare for people who are currently facing poor care outcomes¹⁹.

2.4 Advisory Group

Following the completion of the scoping work and desk research as detailed in the sections above, two advisory group sessions were held in the early development phase of the 2023 survey to gather feedback from key stakeholders representing the views of the eligible population. These included national bodies such as the NHS England, a selection of NHS Community Mental Health trusts, and charities specialising in mental health such as Young Minds and Dementia UK. These members were consulted throughout the survey development phase to ensure the questionnaire aligned with current procedures and the

¹³ [integrated-care-case-study-mental-health.pdf](https://www.integrated-care-case-study-mental-health.pdf) (england.nhs.uk)

¹⁴ <https://www.rcpsych.ac.uk/news-and-features/latest-news/detail/2022/10/10/hidden-waits-force-more-than-three-quarters-of-mental-health-patients-to-look-for-help-from-emergency-services#:~:text=10%20October%202022&text=Nearly%20a%20quarter%20of%20mental,for%20World%20Mental%20Health%20Day>

¹⁵ [Working definition of trauma-informed practice - GOV.UK](https://www.gov.uk/government/publications/working-definition-of-trauma-informed-practice) (www.gov.uk)

¹⁶ <https://www.traumainformedcare.chcs.org/what-is-trauma-informed-care/>

¹⁷ [The effect of multiple adverse childhood experiences on health: a systematic review and meta-analysis - The Lancet Public Health](https://www.thelancet.com/public-health/article/2022/01/01/the-effect-of-multiple-adverse-childhood-experiences-on-health-a-systematic-review-and-meta-analysis)

¹⁸ [Full article: \(Mis\)understanding trauma-informed approaches in mental health](https://www.tandfonline.com/doi/full/10.1080/10803548.2022.2088888) (tandfonline.com)

¹⁹ [Tackling poor health outcomes: the role of trauma-informed care](https://www.kingsfund.org.uk/projects/tackling-poor-health-outcomes-the-role-of-trauma-informed-care) | The King's Fund (kingsfund.org.uk)

data can be used effectively by NHS Community Mental Health trusts to implement improvements to service user experience.

2.4.1 Advisory Group 1 – Sampling

The first advisory group, held on the 6th of March 2023, focused on the proposed mixed-mode design and the sampling changes. Topics taken forward to the advisory group for feedback were, potential eligibility criteria amends, methodological changes, as well as review of sampling variables.

Eligibility criteria:

The Five Year Forward View for Mental Health set out plans for improving mental health services for children and young people. The NHS Long Term plan has committed to improve access to community-based mental health services to meet the needs of an additional 345,000 children and young people aged 0-25 by 2024. The aim has been to provide support through NHS mental health services and school or college-based Mental Health support teams.

The change in the eligibility criteria to include 16- and 17-year-olds resulted from an appetite to understand the experience of transition from Children and Adolescent Mental Health Services (CAMHS) to Adult Mental Health Services (AMHS). Feedback from stakeholders indicated the importance of capturing the experiences of young people who move from Children to Adult services. This would also enable the collection of data from service users who we do not systematically gather feedback from and to standardise the age range for the adult surveys across the wider NPSP.

Stakeholders discussed and reviewed the need to continue sampling service users using Memory Clinics for a primary diagnosis in the 2023 survey as the nature of interaction with service users is different to other services provided by NHS Community Mental Health trusts. The implementation and delivery of Memory Clinics varies across England: some trusts provide both the diagnosis and ongoing care themselves; whilst for other trusts, they solely provide the diagnosis while care is delivered by the General Practitioner (GP). Consequently, for some service users they will have no contact with the trust bar their diagnostic appointment. People with dementia are still eligible to participate as long as their primary service being accessed is not Memory Clinics and is provided by NHS Community Mental Health trusts.

Following stakeholder feedback, drug and alcohol services remained excluded from the survey after exploring the barriers for the inclusion of drug and alcohol services. Regional variation was the main reason for the continued exclusion of this service, as not all trusts provide drug and alcohol services. This type of support, in areas, has also been provided by third sector organisations.

Sampling:

The advisory group were informed about the change in the length and timeframe of the sampling period, and the impact this would have on comparable results. The sampling period for the 2023 survey has moved to April and May and was reduced to two months instead of three. To be eligible, service users must have had at least one contact (face-to-

face, video call, telephone) during the sampling period and one other contact either before, during or after the sampling period.

A number of new variables were taken forward for discussion with the advisory group members including the use of mobile phone numbers, mobile phone number indicator, service level indicator, mental health inpatient indicator, and sub-ICB location codes. Stakeholders discussed the importance of receiving service level data to pinpoint improvement. There was also an appetite from stakeholders to include a mental health inpatient indicator to measure whether a service user had an inpatient stay for seven days or over in the last twelve months.

2.4.2 Advisory Group 2 – Questionnaire

The second advisory group session took place on the 22nd of March 2023, and focused on questionnaire design. Stakeholders fed into the decisions for the topic areas and structure of the questionnaire, contributing to the redevelopment of the 2023 questionnaire in line with the current priorities of service users, and policy and practice changes. Six main areas were flagged for discussion with the advisory group.

The structure of mental health services

Entry to mental health services can be complex with multiple different referral pathways. Previous iterations of the CMH survey did not account for the referral pathway but were designed from the basis that there were universal elements of experience that most service users encountered throughout care and treatment, such as having a care coordinator, interactions with the service, or crisis care. To this end, the survey was designed from the basis of a service user having a single individual overseeing their care.

The advisory group explored the possibility of utilising the survey to understand differences in how care is delivered based on how someone accessed the service in the first instance, as there are multiple pathways into mental health services.

Furthermore, stakeholders provided feedback on the need to revise who has been organising and delivering care for service users. They explained that there is a mental health team in charge of delivering care and treatment and not a single person or contact.

Waiting times

Desk research identified waiting times as an important area to understand from a service user's point of view. The 2022 iteration of the CMH only had two questions on waiting times: accessing crisis care and accessing talking therapies. The advisory group members discussed the need to understand waiting times for accessing services initially and the resources available for service users whilst waiting for their first treatment. Stakeholders explored whether waiting times depended on the service user's pathway into the mental health services, how trusts could manage risk with waiting lists and if high-risk service users were prioritised.

Inequalities: Digital exclusion

Digital exclusion refers to unequal access to digital technology and can be seen as a form of inequality. The topic of digital exclusion was raised as trusts should be supporting service

users to access their care in the way they would prefer (including via digital appointments). Findings during desk research demonstrated that there was a link between digital exclusion, health inequalities and social disadvantages. Stakeholders fed back that inequalities were of particular importance for mental health and there was a need to understand digital exclusion. However, they suggested the CMH23 survey should focus on inequalities in accessing care and reasonable adjustments.

Crisis care

Stakeholders agreed that crisis care was an important aspect of mental health to understand. They fed back that the questions included in the previous iteration of the survey covered the aspects of crisis care they wanted to understand. Moreover, the members discussed whether there was a time requirement for mental health trusts to call the service user back after their initial contact and whether the crisis care section could be applicable for particular services such as CAMHS.

Talking Therapies

Questions on talking therapies have been in the survey for years as historically it has been important to service users to reflect on non-medicine related care. Feedback during consultation suggested that talking therapies remained an important aspect of care. Stakeholders explored whether there was variation in talking therapies provided by trusts or region and discussed the benefits of retaining questions on talking therapies. The members highlighted the need to consider questions focusing on the experiences service users have had with regards to the length of time they waited before receiving treatment and whether they were given enough privacy to talk comfortably.

Recontact question

There has been appetite across the wider NPSP in exploring uptake from survey respondents in being re-contacted. The purpose of the re-contact question has been to provide respondents with the option to opt-in to participate in future research (separate to the national survey), and to inform them of the survey results. Stakeholders agreed that the question will be included in the online survey only.

Following the two advisory group sessions, advisory group members were prompted to feed back on the questionnaire, by reviewing the overall structure and flow of the questionnaire, as well as the language used. Following the advisory group, stakeholders were invited to complete a post-advisory group engagement online activity giving further feedback on questionnaire themes and prioritising questions to include in the Easy Read questionnaire.

2.5 Trust webinars

Following the advisory group sessions, two webinars were held with participating Community Mental Health trusts. These provided opportunities for trusts to share feedback on the proposed changes to the questionnaire and highlight any concerns or challenges to the proposals. The first webinar focused on the proposed methodological and sampling changes, while the second webinar focused on questionnaire changes and sampling instructions. Overall, all changes were supported by trusts while trusts were able to give their feedback.

The first trust webinar on the 27th of March 2023, focused on gathering trust feedback and making decisions on sampling changes for the 2023 survey. Trusts were informed about and fed back on the option to submit a sample larger than the standard 1,250 people, changes to the eligibility criteria, the sampling period, sample variables, and the questionnaire design. There were three main areas flagged for discussion with trusts:

- **Timing of text message (SMS) and postal reminders:** trusts suggested allowing seven days between each reminder for the service user population. This reinforces what we learned during consultation on the Community Mental Health 2021 mixed mode pilot, where service users felt they would be overwhelmed by the speed of the contact strategy adopted on other mixed mode surveys.
- **Sampling:** trusts agreed on excluding Memory Clinics as these services were primarily used for assessment; they agreed on including 16 and 17-year-olds but suggested questions were cognitively tested with young people to analyse their understanding of the overall survey.
- **Questionnaire content:** trusts agreed on adding questions on reasonable adjustments exploring the type of support provided to service users to access their care and treatment (such as communications/translations, physical needs, etc.) and whether the support provided met their needs. They suggested retaining questions on talking therapies as trusts who still provide the service had been using this feedback for service improvement. Trusts also fed back on the decision to include a separate section for young service users who have transitioned CAMHS to Adult services. On waiting times, they agreed that adding a new question on signposting service users to support while on waiting lists was a priority. Finally, trusts provided guidance on referral pathways, highlighting that the delivery of services differs at local level, service users can be seen by a team rather than one individual, and flagged the need to collect data on service level information to provide granular reporting.

2.6 Engagement activities

For CMH23, a publicity activities plan has been implemented to publicise the survey and increase engagement at national and local level. Trusts and mental health charities have been asked to promote CMH23 on their communication networks via a series of press releases and social media cards.

Two press release templates were designed and shared with trusts and national organisations. For trusts, the template enables them to add their own text and data, explaining how they used feedback, what actions were taken and positive outcomes. For national organisations, the template includes national level results of the survey.

In addition to the press releases, four social media cards have been made available to trusts and national organisations, promoting engagement prior to and during fieldwork. The cards provide basic information about the survey including the purpose, value, when service users will be invited and how to participate. They were designed for easy use across a number of platforms including Twitter, LinkedIn, Facebook, and Instagram.

3. Methodological approach

The 2023 survey has moved from a solely paper-based self-completion postal questionnaire to a mixed-mode survey design where service users are able to complete either an online or paper version of the questionnaire. This means that service users have the option of completing the questionnaire online in the first instance before being offered a paper questionnaire later in fieldwork. In addition to postal invitations and reminders, service users also will receive two text message (SMS) reminders containing a unique link to the online survey.

The decision to change the survey methodology from paper-only method to mixed-mode approach, presented further opportunities to review all aspects of the design of the survey.

3.1 Mixed-mode approach

For the first time since its inception, the Community Mental Health 2023 survey is being conducted using a mixed mode approach.

The pilot which was conducted in 2021 confirmed the feasibility of using a mixed-mode approach for this patient population and emphasised the benefits for such an approach. In particular, a push-to-web approach strategy has led to an improved data quality through online responses, more representative responses, improved accessibility to the survey and had the potential to make the survey more cost-effective by decreasing postal responses (saving money on return postage, processing paper returns and paper storage). This move has been successfully implemented by other NPSP surveys and was supported by participating Community Mental Health trusts.

3.1.1 Contact approach

The contact approach for CMH23 has been altered to adopt 'push-to-web' principles. Previously, the survey comprised of three mailings, two of which contained paper questionnaires, and service users did not have the option to complete the questionnaire online. CMH23 will be conducted using a mixed-mode design of online questionnaire followed by a paper questionnaire being mailed to non-respondents (and participants who request a paper version of the questionnaire).

There will be five contact attempts using a blend of postal letters and SMS reminders. The first and second paper letters will contain a URL and log in details for the online survey. Two text message (SMS) reminders with a unique link to the online survey will be sent after the first and second mailings. Paper questionnaires will be included in the second and third mailings. When the paper questionnaire is mailed out, a freepost envelope will be included to return completed questionnaires.

The schedule and content are shown in the table below.

Table 1: CMH23 Contact approach

Schedule	Contact type
Week 1 (day 0)	Postal paper letter with URL and log in details for online survey
Week 2 (day 7)	SMS text message with unique link to online survey (if phone number available)
Week 3 (day 14)	Postal paper letter with URL and log-in details for online survey AND paper questionnaire
Week 4 (day 21)	SMS text message with unique link to online survey (if phone number available)
Week 5 (day 28)	Postal paper letter with paper questionnaire only

Text message reminders will be sent alternately with letters. The time between the initial mailing and the first reminder will be seven days. The second SMS reminder will be sent seven days after the second mailing. If the date the SMS reminder is due to be sent falls on a weekend or Bank Holiday, it should be sent on the next working day. Both text message (SMS) and postal reminders will be sent to non-respondents only.

3.2 Sampling period

The sampling period for the 2023 survey has been altered from September to November (3 months) to April and May (2 months). In order to be eligible, a service user must have had one contact during the sample period and one other contact either before, during or after the sample period.

3.3 Sample variables

A number of new sampling variables have been added to the 2023 sample, these are detailed below.

Mobile phone number (service user)

As the 2023 survey has moved to a 'push-to-web' approach, SMS reminders will be sent to service users who have not completed the survey. Trusts have been asked to include service users mobile phone number, in addition to their postal addresses. The mobile phone number should be the number the service user has agreed to use for clinical correspondence.

As the SCC would not receive actual mobile numbers, and to monitor levels of mobile number by trust the 'mobile number indicator' variable has been retained from Community Mental Health 2022 survey (CMH22).

Mental Health Inpatient Indicator

The indicator was included to measure whether a service user has had a mental health inpatient stay in the last 12 months, that lasted 7 or more days. Trusts were instructed to include service users who had 'leave days' if they were still under section, and service users who had an inpatient stay of 7 days and over, in the last 12 months from when the sample is drawn.

Service level Information

The inclusion of service-level information was to support the possibility of trusts receiving more granular data at service level. Trusts are asked to record the type of primary service used by the individual during the sampling period (April and May 2023). If a service user has used multiple services, trusts were instructed to include the most recent contact as the primary service.

Sub-Integrated Care Board (ICB) codes

Sub-ICB location codes²⁰ have replaced CCG codes and trusts will provide these in their sample.

Attribution variable: Assessment service group²¹

Assessment service group has been added as an attribution variable to the 2023 survey to indicate which service type was primarily used by the service user during the sampling period (April and May). Within this field '1' signifies Child and Adolescent Mental Health Services (CAMHS), '2' Adult Mental Health Services, and '3' Older People Mental Health Services.

Removed variables: CPA status, CCG codes and email address indicator

As mentioned above, CCG codes have been excluded from the 2023 survey, and replaced by sub-ICB codes. CPA status has been also removed following analysis of CMH22 data showing that CPS status has been phased out nationally and trusts had stopped using it. CMH23 will not include an indicator for whether the trust holds an email address for the service user.

3.4 Patient facing materials

As with the survey, materials were redeveloped to reflect the changes to the mixed-mode methodology and eligibility criteria. The dissent poster has been redesigned and reworded to have a more personal tone, and a leaflet for 16- and 17-year-olds was developed for the first time to inform and provide young respondents with the opportunity to opt out.

3.4.1 Dissent poster and 16- and 17-year-olds leaflet

As with previous surveys, a dissent poster was created and displayed during the sampling period. This was intended to make service users aware of the survey and provide an opportunity for them to ask questions or opt out if they wished to be excluded from the

²⁰ <https://digital.nhs.uk/binaries/content/assets/website-assets/services/ods/integrated-care-boards/ods-change-summary-icb-22-23---yr1-renaming>

²¹ Assessment Service Group (ASG) is the new term used for core services. Please note that the ASG is included as 'Service Type' in the sample construction spreadsheet.

survey. The overall design was adapted from the 2022 survey highlighting the value of the survey. Six different designs were offered enabling trusts to select their preference.

The 16- and 17-year-old leaflet included significant information on the purpose of the survey, options to give dissent, data protection and confidentiality. Trusts were advised to display the 16- and 17-year-olds leaflet on their website for an extended period until the end of July 2023, to reach service users who continue to receive care and treatment via video call and telephone consultations.

3.5 Online survey

The online questionnaire is the same as the paper version, with the exception of the following additions:

- a 'Moving to Adult services from Children services' section which is available to service users aged 16-25 only. These questions explore service user's experience of transitioning between CAMHS and Adult services.
- two re-contact questions at the end of the survey providing the option to service users to take part in future research and to receive the results of the CMH23 survey once these are published.

4. Changes to the questionnaire and cover letters

4.1 Cognitive testing

Following the completion of the consultation phase with key stakeholders and trusts, the questionnaire and covering letters were revised for testing with recent service users. Cognitive testing involved 24 interviews with recent NHS community mental health service users, asking them to read aloud the cover letters and answer the questionnaire, explaining the reasoning behind their answers.

The process of cognitive interviewing ensures that as far as possible, the instructions, questions and response options are clear, relevant, easy for respondents to answer and are understood as intended. This year both the paper and online versions of the questionnaire were tested among the participants.

The covering letters were also tested as they had undergone significant changes. Respondents were asked to read these and comment on the tone, language, appearance, and purpose of each one of the covering letters and the text message (SMS) reminders. Following each round of testing, revisions were made to the survey materials in accordance with any issues that were evidenced by the interviews.

4.1.1 Recruitment

Service users were recruited online. They were screened upon registering their interest to participate, using a detailed screening questionnaire to identify:

- the mental health service they had used;
- the nature of their contact with the Community Mental Health services;

- the date and times of their visit(s);
- their condition(s);
- their demographics; and
- their location.

Participants were recruited on the basis that they had used the NHS Community Mental Health services at least twice in the past year and are aged 16 and over.

A mix of participants were recruited from the super care clusters (psychotic, non-psychotic, cognitive impairment), and interviews with carers of the service users were also held, to ensure representation and engagement across clusters. In addition to care clusters, we covered a mix of demographic characteristics, such as age, gender, geographical location, and ethnicity.

Six cognitive interviews were conducted with young participants aged 16-19, who had recently transitioned from Children services to Adult services. As service users aged 16 and 17 were included for the first time for the Community Mental Health survey, no other quotas were applied.

4.1.2 Advertising

The recruitment adverts were updated for the 2023 survey to be visually appealing and portray a sense of positivity to increase engagement. A link to Picker's website was created providing detailed information about the interviews and survey. The website content included information about the survey, who is eligible, what to expect when taking part, how they can take part, confidentiality, information sharing, who is organising the research, contact details and privacy notice.

A variety of online platforms were used for the recruitment adverts. Adverts were initially posted on Twitter, LinkedIn, and Facebook. As in the previous year, paid Facebook boosted posts were also utilised. Social media adverts proved to be effective as 86% of respondents to the screening survey saw the advert via a social media platform.

In addition to posting on social media, selected CMH trusts were contacted during recruitment and the advert was shared to the trusts' user forum and specific groups of service users, such as for 16- and 17-year-olds. This proved less successful as only 7% of participants registering their interest to take part saw the advert via a trust.

Broadening the eligibility criteria to include 16- and 17-year-olds created difficulties in the recruitment of this specific group, especially as we were searching to recruit young people who had transitioned from CAMHS to Adult services in the last six months. In addition to sharing the advert with trusts, we contacted Further Education colleges in England, external mental health organisations such as Young Minds, and CQC's Young Champions Network to boost participation from young people.

For the third round of interviewing, a recruitment agency was sub-contracted and recruited five participants aged between 16 and 19 years old, who had recently transitioned from Children services to Adult services.

4.1.3 Interviews

Testing was conducted between 19th May and 26th June 2023. The approach involved a total of 24 interviews, spread across three waves of interviewing, with changes made and retested after each round. All interviews were conducted online, and each interview lasted around 90 minutes. A £40 'Love to shop' or 'Amazon' voucher was given as a thank-you for taking part. Participants were offered the option of face-to-face and over the phone interviews, but all participants registering their interest chose video conferencing as their preferred method for interview.

Following the completion of each round of interviews, a debrief session was held between the SCC and CQC. The questionnaire was refined after each round of testing. The same process was followed for the covering letters.

Across the three rounds of interviewing, the following demographic profile of respondents was achieved:

- Gender: 9 male, 14 female, 1 non-cisgender;
- Age: 6 were aged between 16 - 19, 4 were aged 20 - 27, 7 were aged between 28 – 47, and 6 were between 48 – 67 years old (and one who did not disclose their age);
- Location: 3 respondents were from Greater London, 2 from East of England, 3 respondents from West Midlands, 5 from South East, 2 respondents from South West, 1 from East Midland, 3 respondents from Yorkshire and the Humber, 5 from North West, and 1 from North East;
- Ethnic background: 15 White British, 3 Black African, 3 Asian British, 2 Any other Asian background, 1 Any other mixed background;
- All participants had long-term conditions;
- 2 interviews were conducted with the carer/friend of the service user;
- 5 participants tested the paper questionnaire, 8 tested the CAMHS online version of the questionnaire, and 9 tested the Adult version of the online questionnaire.

At the start of each interview, participants were made aware that the interview was voluntary, there was no requirement for them to answer all the questions if they did not wish to or, disclose information that they were not comfortable discussing. They were all made aware that they could finish the interview at any point if they did not feel comfortable and this would not affect their health or social care.

4.2 Covering letters

The covering letters were significantly redeveloped for the 2023 survey to include a more personal and friendlier approach, and a clear message that reflected the move to 'push-to-web' approach. Added to the centre of the letter was a box highlighting details for the online survey, including the URL and log-in details encouraging respondents to complete the online questionnaire. In addition, trusts have the opportunity to add their own text in the first mailing letter, outlining how they have used the previous survey data to improve care for service users. The visual appeal of all three letters was also improved making them clearer and easier to read, by drawing attention to the key parts of information, which are bolded and highlighted, including the data protection and confidentiality information.

Following feedback from cognitive interviewing, the motivational messaging was improved across the three letters to encourage service users to take part in the survey. The tone of the letters focused on the sentiment that respondents are helping to improve care for other service users rather than the system. A clarification was also added to underline that although respondents may receive mental health care from a GP, this survey is only about care they received by the NHS Community Mental Health trust.

4.3 SMS reminders

Cognitive testing confirmed that younger respondents prefer the ease of completing the survey online via the SMS reminder, without the need of copying the URL and adding their login details on their browser. The content of both text message (SMS) reminders tested well, with respondents having positive comments about the opt-out option and the inclusion of a 'due by' date in the second SMS. Following feedback from service users, and as standard NPSP procedure, the text message (SMS) reminders should come from a named sender 'NHS Survey', as this provides legitimacy to the contact and reassures respondents.

4.4 Questionnaire content

The transition to a mixed-mode and the break in data trends created the opportunity to significantly revise the questionnaire. The final version of the questionnaire which included a thorough revision of the topic areas and the inclusion of a number of new and/or amended questions, was created following consultation with key stakeholders at the advisory group, trust feedback and cognitive interviews with service users to ensure clarity, comprehension, and relevance. During the development phase, key stakeholders and NHS Community Mental Health trusts were invited to provide their opinion on the proposed changes.

The questionnaire was reviewed with the aims of:

- Ensuring the content is in line with policy and practice;
- Adhering to the new eligibility criteria (inclusion of 16- and 17-year-olds);
- Allowing trusts to use new questions to pinpoint improvement.

The table below provides an overview of the new topic areas, the rationale that led to the development of each new section and a summary of the questions.

Table 2: CMH23 Topic Area development process

Topic Area	Purpose	Question examples
Your NHS Appointments	Timeframe respondents received their last treatment.	<ul style="list-style-type: none"> ○ Length of time been in contact with MH services
Accessing Care and Treatment	Service users' experience while waiting between their assessment with the NHS mental health team and their first appointment for treatment.	<ul style="list-style-type: none"> ○ Length of time waited ○ Support offered while waiting ○ Support appropriate for needs
Your Mental Health Team	Previous section 'Your health and social care workers' revised and redesigned to focus on service user	<ul style="list-style-type: none"> ○ Enough time to discuss needs ○ Got help that was needed ○ Repeating MH history

	experience in the last 12 months with their NHS mental health team.	<ul style="list-style-type: none"> ○ Treated with care and compassion
Your Care	New section created by merging the existing 'Organising your Care', 'Planning your Care' and 'Reviewing your Care' sections. The focus is on communication and support, and service users' involvement in deciding their care and treatment.	<ul style="list-style-type: none"> ○ Decisions being made together ○ Delivery mode of care ○ Support to make own decision ○ Being in control of own care
Your Treatment	New section created by merging the previous 'Medicines' and 'NHS Talking Therapies' sections to facilitate the flow of the questionnaire.	<ul style="list-style-type: none"> ○ Who prescribed MH medication ○ Purpose/benefits/symptoms/withdrawals ○ Medication review ○ TT waiting times, privacy
Crisis Care	Section remained in questionnaire. Changes include the addition of new questions. A question added on whether respondents contacted the crisis team in the last 12 months to allow trusts to pinpoint improvement. A second addition was a question about the support the service users' family or carer received while they were in crisis.	<ul style="list-style-type: none"> ○ Know who to contact when in crisis ○ Got help needed ○ Length of time to get through ○ Family involvement
Support and Wellbeing	Existing questions reformatted into a grid question. A new set of questions on reasonable adjustments is added to capture equality of access to mental health services.	<ul style="list-style-type: none"> ○ Help finding support (joining a group, finding work, financial advice, cost of living) ○ Friends/family involvement ○ Support or assistance accessing care
Overall	Section remains in questionnaire as per previous versions.	<ul style="list-style-type: none"> ○ Respect and dignity ○ Overall experience ○ Views on quality of care
About You	Section remained in questionnaire as per previous versions.	<ul style="list-style-type: none"> ○ Demographic
Moving to Adult Services from Children Services	New section was added to capture younger service users' experience of transitioning from CAMHS to Adult services. Included in online survey only.	<ul style="list-style-type: none"> ○ Information provided ○ Support provided ○ Changes in care once transitioned ○ Family involvement
Recontact	Section was added to explore whether respondents wanted to participate in future research and receive the results of the CMH23 survey. Included in the online survey only.	<ul style="list-style-type: none"> ○ Answers to be linked to contact details ○ Email address to receive results of the survey

The front-page instructions were updated in line with other NHS patient surveys to reflect changes to the CMH23 survey. In addition to information about the survey and how to complete the questionnaire, a new instruction was added. This was intended to highlight that the survey is about service users' experience at the NHS Community Mental Health Trust and not the mental health care they may have received by their GP. As a result, the CMH22 instruction 'Please do not include contact with your GP' which was used throughout the questionnaire was removed. New instructions for the 'Moving to Adult Services from Children Services' and 'Support and Wellbeing' sections were also added to assist respondents to understand and answer the questions.

In total, nineteen questions were removed, fourteen were amended and twenty-three new questions were added. Instructions were also altered to correspond to the new topic areas and the tone of the questions. A detailed list of all the removed questions is provided in the Appendix. The table below includes the CMH23 questions and provides an overview of the changes to these questions during each round of cognitive testing. The final column ('Final Question') shows the question as included in the CMH23 survey.

Table 3: CMH23 Questionnaire mapping with changes in each round of cognitive interviewing

Round 1 question	Round 2 question	Round 3 question	Final question
Covering page	Covering page	Covering page	Covering page
My NHS Appointments	My NHS Appointments	My NHS Appointments	My NHS Appointments
Q1: When was the last time you saw someone from NHS mental health services? <i>This includes contact in person, via video call and telephone.</i> <input type="checkbox"/> In the last 12 months <input type="checkbox"/> More than 12 months ago <input type="checkbox"/> Can't remember <input type="checkbox"/> I have never seen anyone from NHS mental health services	<i>No change</i>	<i>No change</i>	Q1: When was the last time you saw someone from NHS mental health services? <i>This includes contact in person, via video call and telephone.</i> <input type="checkbox"/> In the last 12 months <input type="checkbox"/> More than 12 months ago <input type="checkbox"/> Don't know / can't remember <input type="checkbox"/> I have never seen anyone from NHS mental health services
Q2: Overall, how long have you been in contact with NHS mental health services? <input type="checkbox"/> Less than 1 year <input type="checkbox"/> 1 to 2 years <input type="checkbox"/> 3 to 5 years <input type="checkbox"/> 6 to 10 years <input type="checkbox"/> More than 10 years	<i>No change</i>	<i>No change</i>	Overall, how long have you been in contact with NHS mental health services? <input type="checkbox"/> Less than 1 year <input type="checkbox"/> 1 to 2 years <input type="checkbox"/> 3 to 5 years <input type="checkbox"/> 6 to 10 years <input type="checkbox"/> More than 10 years

Round 1 question	Round 2 question	Round 3 question	Final question
<input type="checkbox"/> I am no longer in contact with NHS mental health services <input type="checkbox"/> Don't know / can't remember			<input type="checkbox"/> I am no longer in contact with NHS mental health services <input type="checkbox"/> Don't know / can't remember
Accessing Care and Treatment	Accessing Care and Treatment	Accessing Care and Treatment	Accessing Care and Treatment
Q3: How long did you wait before receiving your first appointment with the NHS mental health team? <input type="checkbox"/> Less than 2 weeks <input type="checkbox"/> 2 to 3 weeks <input type="checkbox"/> 1 to 2 months <input type="checkbox"/> 3 to 6 months <input type="checkbox"/> More than 6 months <input type="checkbox"/> Don't know / can't remember	Q3: How long did you wait between your assessment with the NHS mental health team and your first appointment for treatment? <input type="checkbox"/> Less than 2 weeks <input type="checkbox"/> 2 to 3 weeks <input type="checkbox"/> 1 to 2 months <input type="checkbox"/> 3 to 6 months <input type="checkbox"/> More than 6 months <input type="checkbox"/> Don't know / can't remember	<i>No change</i>	Q3: How long did you wait between your assessment with the NHS mental health team and your first appointment for treatment? <input type="checkbox"/> Less than 2 weeks <input type="checkbox"/> 2 to 3 weeks <input type="checkbox"/> 1 to 2 months <input type="checkbox"/> 3 to 6 months <input type="checkbox"/> More than 6 months <input type="checkbox"/> Don't know / can't remember
Q4: How did you feel about the length of time you waited before receiving your first appointment with the NHS mental health team? <input type="checkbox"/> The waiting time was appropriate <input type="checkbox"/> The waiting time was too long <input type="checkbox"/> The waiting time was too short <input type="checkbox"/> I did not have to wait <input type="checkbox"/> Don't know / can't remember	Q4: How did you feel about the length of time you waited between your assessment with the NHS mental health team and your first appointment for treatment? <input type="checkbox"/> The waiting time was appropriate <input type="checkbox"/> The waiting time was too long <input type="checkbox"/> The waiting time was too short <input type="checkbox"/> I did not have to wait <input type="checkbox"/> Don't know / can't remember	<i>No change</i>	Q4: How did you feel about the length of time you waited between your assessment with the NHS mental health team and your first appointment for treatment? <input type="checkbox"/> The waiting time was appropriate <input type="checkbox"/> The waiting time was too long <input type="checkbox"/> The waiting time was too short <input type="checkbox"/> I did not have to wait <input type="checkbox"/> Don't know / can't remember
Q5: While waiting for your first appointment, did you experience any changes in your mental health? <input type="checkbox"/> Yes, my mental health improved	Q5: While waiting, between your assessment with the NHS mental health team and your first appointment for treatment , did you experience any	<i>No change</i>	Q5: While waiting, between your assessment with the NHS mental health team and your first appointment for treatment, did you experience any changes in your mental health?

Round 1 question	Round 2 question	Round 3 question	Final question
<input type="checkbox"/> Yes, my mental health got worse <input type="checkbox"/> No, my mental health stayed the same <input type="checkbox"/> Don't know / can't remember	changes in your mental health? <input type="checkbox"/> Yes, my mental health improved <input type="checkbox"/> Yes, my mental health got worse <input type="checkbox"/> No, my mental health stayed the same <input type="checkbox"/> Don't know / can't remember		<input type="checkbox"/> Yes, my mental health improved <input type="checkbox"/> Yes, my mental health got worse <input type="checkbox"/> No, my mental health stayed the same <input type="checkbox"/> Don't know / can't remember
Q6: While waiting for your first appointment, were you offered support with your mental health? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember	Q6: While waiting, between your assessment with the NHS mental health team and your first appointment for treatment , were you offered support with your mental health? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember	<i>No change</i>	Q6: While waiting, between your assessment with the NHS mental health team and your first appointment for treatment, were you offered support with your mental health? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember
Q7: Was the support offered appropriate for your mental health needs? <input type="checkbox"/> Yes, completely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> I did not need any help <input type="checkbox"/> Don't know / can't remember	<i>No change</i>	<i>No change</i>	Q7: Was the support offered appropriate for your mental health needs? <input type="checkbox"/> Yes, completely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> I did not need any support <input type="checkbox"/> Don't know / can't remember
Moving to Adult Services from Children Services Children and Adolescent Mental Health Service (CAMHS) are services that support young people, between 11 – 18 years old. The move to Adult services, if required, takes place when young people turn 18 years old.	Moving to Adult Services from Children Services Children and Adolescent Mental Health Service (CAMHS) are services that support young people, between 11 – 18 years old. The move to Adult services, if required, takes place when	<i>No change</i>	Moving to Adult Services from Children Services Children and Adolescent Mental Health Service (CAMHS) are services that support young people, between 11 –25 years old. The move to Adult services, if required, takes place when young people turn 18 years old.

Round 1 question	Round 2 question	Round 3 question	Final question
The following questions ask about your experiences whilst moving to Adult services.	young people turn 18 years old. The following questions ask about your experiences whilst moving to Adult services.		The following questions ask about your experiences whilst moving to Adult services.
Online Q8: In the last six months have you moved from Children and Adolescence Services to Adult Mental Health services? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember	<i>No change</i>	Online Q8: In the last six months have you moved from Children and Adolescent Services to Adult Mental Health Services? <input type="checkbox"/> Yes, all of my services have moved <input type="checkbox"/> Yes, some of my services have moved <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember	Online Q8: In the last six months have you moved from Children and Adolescent Services to Adult Mental Health Services? <input type="checkbox"/> Yes, all of my services have moved <input type="checkbox"/> Yes, some of my services have moved <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember
Online Q9: Did you feel you were given enough information about what would happen during your move to Adult services? <input type="checkbox"/> Yes, the right amount <input type="checkbox"/> Some, but not enough <input type="checkbox"/> No, too little <input type="checkbox"/> I was not given any information <input type="checkbox"/> Don't know / can't remember	Online Q9: Did you feel you were given enough information about what would happen during your move to Adult services? <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember	<i>No change</i>	Online Q9: Did you feel you were given enough information about what would happen during your move to Adult services? <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember
Online Q10: Did you feel you got enough support from your NHS mental health team when moving to Adult services? <input type="checkbox"/> Yes, completely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No, but I would have liked this <input type="checkbox"/> No, but I did not want support	Online Q10: Did you feel you got enough support from your Children and Adolescent NHS mental health team when moving to Adult services? <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No	<i>No change</i>	Online Q10: Did you feel you got enough support from your Children and Adolescent NHS mental health team when moving to Adult services? <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember

Round 1 question	Round 2 question	Round 3 question	Final question
<input type="checkbox"/> Don't know / can't remember	<input type="checkbox"/> Don't know / can't remember		
Online Q11: Did you experience any changes in your care after you moved to Adult services? <input type="checkbox"/> Yes, my care improved <input type="checkbox"/> Yes, my care got worse <input type="checkbox"/> No, my care stayed the same <input type="checkbox"/> Don't know / can't remember	<i>No change</i>	<i>No change</i>	Online Q11: Did you experience any changes in your care after you moved to Adult services? <input type="checkbox"/> Yes, my care improved <input type="checkbox"/> Yes, my care got worse <input type="checkbox"/> No, my care stayed the same <input type="checkbox"/> Don't know / can't remember
Online Q12: Has your family or someone else close to you been involved in planning your move to Adult services? <input type="checkbox"/> Yes <input type="checkbox"/> No, but I would have liked this <input type="checkbox"/> No, but I didn't want or need this <input type="checkbox"/> Don't know / can't remember	<i>No change</i>	<i>No change</i>	Online Q12: Has your family or someone else close to you been involved in planning your move to Adult services? <input type="checkbox"/> Yes <input type="checkbox"/> No, but I would have liked this <input type="checkbox"/> No, I didn't want or need this <input type="checkbox"/> Don't know / can't remember
Your Mental Health Team Thinking about the last 12 months , when you have seen someone from NHS mental health services for your mental health needs ...	<i>No change</i>	<i>No change</i>	Your Mental Health Team Thinking about the last 12 months , when you have seen someone from NHS mental health services for your mental health needs ...
Q8: Were you given enough time to discuss your needs and treatment? <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> Can't remember	Q8: Were you given enough time to discuss your needs and treatment? <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember	<i>No change</i>	Q8: Were you given enough time to discuss your needs and treatment? <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember
Q9: Did you get the help you needed? <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent	<i>No change</i>	<i>No change</i>	Q9: Did you get the help you needed? <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent

Round 1 question	Round 2 question	Round 3 question	Final question
<input type="checkbox"/> No <input type="checkbox"/> Don't know/ can't remember			<input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember
Q10: Did your NHS mental health team, consider how areas of your life impact your mental health? <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> Don't know/ can't remember	<i>No change</i>	<i>No change</i>	Q10: Did your NHS mental health team, consider how areas of your life impact your mental health? <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember
Q11: Did you have to repeat your mental health history to your NHS mental health team? <input type="checkbox"/> Yes, often <input type="checkbox"/> Yes, sometimes <input type="checkbox"/> No <input type="checkbox"/> Don't know/ can't remember	<i>No change</i>	<i>No change</i>	Q11: Did you have to repeat your mental health history to your NHS mental health team? <input type="checkbox"/> Yes, often <input type="checkbox"/> Yes, sometimes <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember
Q12: Did your NHS mental health team treat you with care and compassion? <input type="checkbox"/> Yes, always <input type="checkbox"/> Yes, sometimes <input type="checkbox"/> No <input type="checkbox"/> Don't know/ can't remember	<i>No change</i>	<i>No change</i>	Q12: Did your NHS mental health team treat you with care and compassion? <input type="checkbox"/> Yes, always <input type="checkbox"/> Yes, sometimes <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember
Your Care	Your Care	Your Care	Your Care
	Q13: Do you have a care plan? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know <input type="checkbox"/> Can't remember	Q13: Do you have a care plan? This is a plan for any care and treatments you will receive. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know <input type="checkbox"/> Can't remember	Q13: Do you have a care plan? This is a plan for any care and treatment you may receive. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know <input type="checkbox"/> Can't remember
Q13: Have you and your NHS mental health team decided together what care and treatment you will receive?	<i>No change</i>	<i>No change</i>	Q14: Have you and your NHS mental health team decided together what care and treatment you will receive?

Round 1 question	Round 2 question	Round 3 question	Final question
<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> Don't know/ can't remember			<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember
Q14: Did you agree that your care and treatment would be delivered... Please cross X in all the boxes that apply to you. <input type="checkbox"/> In person <input type="checkbox"/> By video call <input type="checkbox"/> By telephone	Q15: How has your care and treatment been delivered? Please cross X ALL the boxes that apply to you. (ONLINE WORDING: Please select ALL that apply.) <input type="checkbox"/> In person <input type="checkbox"/> By video call <input type="checkbox"/> By telephone <input type="checkbox"/> Online	Q15: How has your care and treatment been delivered? Please cross X ALL the boxes that apply to you. (ONLINE WORDING: Please select ALL that apply.) <input type="checkbox"/> In person <input type="checkbox"/> By video call <input type="checkbox"/> By telephone <input type="checkbox"/> Online course(s) <input type="checkbox"/> Digital applications	Q15: How has your care and treatment been delivered? Please cross X in ALL the boxes that apply to you. <input type="checkbox"/> In person <input type="checkbox"/> By video call <input type="checkbox"/> By telephone <input type="checkbox"/> Online course(s) <input type="checkbox"/> Digital apps
Q15: In the last 12 months, have you had a care review meeting with someone from NHS mental health services to discuss how your care is working? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know/ can't remember	<i>No change</i>	<i>No change</i>	Q16: In the last 12 months, have you had a care review meeting with your NHS mental health team to discuss how your care is working? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember
Q16: Has your NHS mental health team supported you make decisions about your care and treatment? Support includes sharing information on risks and benefits of your care and treatment. <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> Don't know/ can't remember	<i>No change</i>	<i>No change</i>	Q17: Has your NHS mental health team supported you to make decisions about your care and treatment? Support includes sharing information on risks and benefits of your care and treatment. <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember
Q17: Do you feel in control of your care? <input type="checkbox"/> Yes, definitely	<i>No change</i>	<i>No change</i>	Q18: Do you feel in control of your care? <input type="checkbox"/> Yes, definitely

Round 1 question	Round 2 question	Round 3 question	Final question
<input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> No, I do not want to be in control of my care <input type="checkbox"/> My care has now ended <input type="checkbox"/> Don't know/ can't remember			<input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> No, I do not want to be in control of my care <input type="checkbox"/> My care has now ended <input type="checkbox"/> Don't know / not sure
Your Treatment	Your Treatment	Your Treatment	Your Treatment
Q18: In the last 12 months, have you been receiving any medication for your mental health needs? <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>No change</i>	<i>No change</i>	Q19: In the last 12 months, have you been receiving any medication for your mental health needs? <input type="checkbox"/> Yes <input type="checkbox"/> No
		Q20: Who prescribed medication for your mental health needs? <input type="checkbox"/> GP <input type="checkbox"/> NHS Mental Health Team <input type="checkbox"/> Both <input type="checkbox"/> Don't know	Q20: Who prescribed medication for your mental health needs? <input type="checkbox"/> GP <input type="checkbox"/> NHS Mental Health Team <input type="checkbox"/> Both <input type="checkbox"/> Don't know
Q19: Have any of the following been discussed with you about your medication?Purpose of medication <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> Don't know ...Benefits of medication <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> Don't know ...Side effects of medication <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> Don't know	<i>No change</i>	<i>No change</i>	Q21: Have any of the following been discussed with you about your medication?Purpose of medication <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> Don't know ...Benefits of medication <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> Don't know ...Side effects of medication <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> Don't know

Round 1 question	Round 2 question	Round 3 question	Final question
<p>...What will happen if I stop taking my medication</p> <p><input type="checkbox"/> Yes, definitely</p> <p><input type="checkbox"/> Yes, to some extent</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Don't know</p>			<p>...What will happen if I stop taking my medication</p> <p><input type="checkbox"/> Yes, definitely</p> <p><input type="checkbox"/> Yes, to some extent</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Don't know</p>
<p>Q20: In the last 12 months, has your NHS mental health team asked you how you are getting on with your medication?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> I have been receiving medication for less than 12 months</p> <p><input type="checkbox"/> Don't know/ can't remember</p>	<i>No change</i>	<i>No change</i>	<p>Q22: In the last 12 months, has your NHS mental health team asked you how you are getting on with your medication?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> I have been receiving medication for less than 12 months</p> <p><input type="checkbox"/> Don't know / not sure</p>
<p>Talking therapies (this can include Cognitive Behavioural Therapy) includes any NHS treatment for your mental health that involves working with a trained therapist (or counsellor).</p>	<p>Talking therapies (this can include Cognitive Behavioural Therapy) includes any NHS treatment for your mental health that involves working with a trained therapist (or counsellor or clinician).</p>	<i>No change</i>	<p>Talking therapies (this can include Cognitive Behavioural Therapy) includes any NHS treatment for your mental health that involves working with a trained therapist (or counsellor or clinician).</p>
<p>Q21: In the last 12 months, have you received any NHS talking therapies for your mental health needs?</p> <p><input type="checkbox"/> Yes, several times</p> <p><input type="checkbox"/> No, but I would have liked this</p> <p><input type="checkbox"/> No, but I did not want this</p> <p><input type="checkbox"/> This was not appropriate</p> <p><input type="checkbox"/> Don't know / can't remember</p>	<i>No change</i>	<i>No change</i>	<p>Q23: In the last 12 months, have you received any NHS talking therapies for your mental health needs?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No, but I would have liked this</p> <p><input type="checkbox"/> No, but I did not want this</p> <p><input type="checkbox"/> This was not appropriate</p> <p><input type="checkbox"/> Don't know / can't remember</p>
<p>Q22: Thinking about the last time you received any NHS talking therapies, did you feel you were given enough</p>	<p>Q23: How do you feel about the length of time you waited between your assessment with the</p>	<i>No change</i>	<p>Q24: How do you feel about the length of time you waited between your assessment with the NHS mental health team</p>

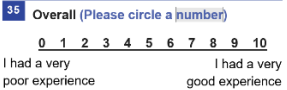
Round 1 question	Round 2 question	Round 3 question	Final question
time with the mental health professional? <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> Don't know/ can't remember	NHS mental health team and your first talking therapies appointment? <input type="checkbox"/> The waiting time was appropriate <input type="checkbox"/> The waiting time was too long <input type="checkbox"/> The waiting time was too short <input type="checkbox"/> I did not have to wait <input type="checkbox"/> Don't know / can't remember		and your first talking therapies appointment? <input type="checkbox"/> The waiting time was appropriate <input type="checkbox"/> The waiting time was too long <input type="checkbox"/> The waiting time was too short <input type="checkbox"/> I did not have to wait <input type="checkbox"/> Don't know / can't remember
Q23: Thinking about the last time you received NHS talking therapies, were given enough privacy to talk comfortably? <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> Don't know/ can't remember	Q24: Thinking about the last time you received NHS talking therapies, did you have enough privacy to talk comfortably? <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> Don't know/ can't remember	<i>No change</i>	Q25: Thinking about the last time you received NHS talking therapies, did you have enough privacy to talk comfortably? <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember
Crisis Care A crisis is if you need urgent help because your mental or emotional state is getting worse very quickly. You may have been given a number to contact, such as a 'Crisis Helpline' or a 'Crisis Resolution Team'. Please do not include contact with your GP.	<i>No change</i>	<i>No change</i>	Crisis Care A crisis is if you need urgent help because your mental or emotional state is getting worse very quickly. You may have been given a number to contact, such as a 'Crisis Helpline' or a 'Crisis Resolution Team'.
Q24: Would you know who to contact out of office hours within the NHS if you had a crisis? This should be a person or a team within NHS mental health services. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure	<i>No change</i>	<i>No change</i>	Q26: Would you know who to contact out of office hours within the NHS if you had a crisis? This should be a person or a team within NHS mental health services. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure

Round 1 question	Round 2 question	Round 3 question	Final question
		Q27: In the last 12 months, have you contacted this person or team? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> I could not contact them <input type="checkbox"/> Don't know / can't remember	Q27: In the last 12 months, have you contacted this person or team? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> I could not contact them <input type="checkbox"/> Don't know / can't remember
Q25: Thinking about the last time you contacted this person or team, did you get the help you needed? <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> I could not contact them <input type="checkbox"/> Don't know / can't remember	<i>No change</i>	<i>No change</i>	Q28: Thinking about the last time you contacted this person or team, did you get the help you needed? <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember
Q26: How do you feel about the length of time it took you to get through to this person or team? <input type="checkbox"/> I got through straightaway <input type="checkbox"/> I had to wait, but not for too long <input type="checkbox"/> I had to wait too long <input type="checkbox"/> Don't know/ can't remember	<i>No change</i>	<i>No change</i>	Q29: Thinking about the last time you contacted this person or team, how do you feel about the length of time it took you to get through to them? <input type="checkbox"/> I got through straight away <input type="checkbox"/> I had to wait, but not for too long <input type="checkbox"/> I had to wait too long <input type="checkbox"/> Don't know / can't remember
Q27: Did your NHS mental health team give your family or carer support whilst you were in crisis? <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> My family/ carer did not want support <input type="checkbox"/> Don't know/ can't remember	Q28: Did the NHS mental health team give your family or carer support whilst you were in crisis? <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> My family/ carer did not want support <input type="checkbox"/> Don't know/ can't remember <input type="checkbox"/> Not applicable	<i>No change</i>	Q30: Did the NHS mental health team give your family or carer support whilst you were in crisis? <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> My family / carer did not want support <input type="checkbox"/> Don't know / can't remember <input type="checkbox"/> Not applicable

Round 1 question	Round 2 question	Round 3 question	Final question
Support and Wellbeing	Support and Wellbeing	Support and Wellbeing	Support and Wellbeing
<p>Q28: In the last 12 months, have you been supported with your physical health needs (this might be an injury, a disability, or a condition such as diabetes, epilepsy, etc.)?</p> <p><input type="checkbox"/> Yes, definitely</p> <p><input type="checkbox"/> Yes, to some extent</p> <p><input type="checkbox"/> No, but I would have liked support</p> <p><input type="checkbox"/> I have support and did not need this</p> <p><input type="checkbox"/> I do not need support for this</p> <p><input type="checkbox"/> I do not have physical health needs</p>	<p>Q29: In the last 12 months, has your NHS mental health team supported you with your physical health needs (this might be an injury, a disability, or a condition such as diabetes, epilepsy, etc.)?</p> <p><input type="checkbox"/> Yes, definitely</p> <p><input type="checkbox"/> Yes, to some extent</p> <p><input type="checkbox"/> No, but I would have liked support</p> <p><input type="checkbox"/> I have support and did not need this</p> <p><input type="checkbox"/> I do not need support for this</p> <p><input type="checkbox"/> I do not have physical health needs</p>	<p><i>No change</i></p>	<p>Q31: In the last 12 months, has your NHS mental health team supported you with your physical health needs (this might be an injury, a disability, or a condition such as diabetes, epilepsy, etc.)?</p> <p><input type="checkbox"/> Yes, definitely</p> <p><input type="checkbox"/> Yes, to some extent</p> <p><input type="checkbox"/> No, but I would have liked support</p> <p><input type="checkbox"/> I have support and did not need this</p> <p><input type="checkbox"/> I do not need support for this</p> <p><input type="checkbox"/> I do not have physical health needs</p>
<p>The following question asks if your NHS mental health team helped you find support in these areas. This could be through providing posters, flyers, and leaflets.</p>	<p>The following question asks if your NHS mental health team helped you find support in these areas. This could be through providing posters, flyers, and leaflets.</p>	<p><i>No change</i></p>	<p>The following question asks if your NHS mental health team helped you find support in these areas. This could be through providing posters, flyers, and leaflets.</p>
<p>Q29: In the last 12 months, did your NHS mental health team give you any help or advice with finding support for... ...Joining a group or taking part in a social and well-being activity (e.g.: art, sport etc)?</p> <p><input type="checkbox"/> Yes, definitely</p> <p><input type="checkbox"/> Yes, to some extent</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> I do not need this</p> <p>...Finding or keeping work (paid or voluntary)?</p> <p><input type="checkbox"/> Yes, definitely</p> <p><input type="checkbox"/> Yes, to some extent</p>	<p>Q30: In the last 12 months, did your NHS mental health team give you any help or advice with finding support for... ...Joining a group or taking part in a social and well-being activity (e.g.: art, sport etc)</p> <p><input type="checkbox"/> Yes, definitely</p> <p><input type="checkbox"/> Yes, to some extent</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> I do not need support</p> <p>...Finding or keeping work</p>	<p><i>No change</i></p>	<p>Q32: In the last 12 months, did your NHS mental health team give you any help or advice with finding support for... ...Joining a group or taking part in a social and well-being activity (e.g.: art, sport etc)</p> <p><input type="checkbox"/> Yes, definitely</p> <p><input type="checkbox"/> Yes, to some extent</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> I do not need support</p> <p>...Finding or keeping work</p> <p><input type="checkbox"/> Yes, definitely</p> <p><input type="checkbox"/> Yes, to some extent</p>

Round 1 question	Round 2 question	Round 3 question	Final question
<input type="checkbox"/> No <input type="checkbox"/> I do not need this ...Finances? <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> I do not need this ...Cost of living? <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> I do not need this	<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> I do not need support ...Financial advice or benefits <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> I do not need support ...Cost of living <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> I do not need support		<input type="checkbox"/> No <input type="checkbox"/> I do not need support ...Financial advice or benefits <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> I do not need support ...Cost of living <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> I do not need support
Q30: Have NHS mental health services involved a member of your family or someone else close to you as much as you would like? <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No, not as much as I would like <input type="checkbox"/> No, they have involved them too much <input type="checkbox"/> Not applicable	<i>No change</i>	<i>No change</i>	Q33: Have NHS mental health services involved a member of your family or someone else close to you as much as you would like? <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No, not as much as I would like <input type="checkbox"/> No, they have involved them too much <input type="checkbox"/> Not applicable
The following four questions ask about the support your NHS mental health team may have given to help you access your care and treatment. This could include support accessing to the building (such as provision of lifts, ramps, signage), language support (translation, interpreters), format of materials (easy read, braille, large print) and	<i>No change</i>	The following four questions ask about the support or assistance your NHS mental health team may have given to help you access your care and treatment. This could include support accessing the building (such as provision of lifts, ramps, signage), language support (translation, interpreters), format	The following four questions ask about the support or assistance your NHS mental health team may have given to help you access your care and treatment. This could include support accessing the building (such as provision of lifts, ramps, signage), language support (translation, interpreters), format of materials (easy read,

Round 1 question	Round 2 question	Round 3 question	Final question
support accessing online appointments.		of materials (easy read, braille, large print) and support accessing online appointments.	braille, large print) and support accessing online appointments.
Q31: Has your NHS mental health team asked if you need support to access your care and treatment? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember	Q32: Has your NHS mental health team asked if you need support to access your care and treatment? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember	<i>No change</i>	Q34: Has your NHS mental health team asked if you need support to access your care and treatment? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember
Q32: Do you need support to access your care and treatment? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember	Q33: Do you need support to access your care and treatment? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember	<i>No change</i>	Q35: Do you need support to access your care and treatment? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember
Q33: What support do you need to access your care and treatment? <i>Please cross X in all the boxes that apply to you.</i> <input type="checkbox"/> Physical support (e.g., lifts, wide doors, ramps, signage) <input type="checkbox"/> Language support (e.g., translated materials, translator, interpreter) <input type="checkbox"/> Format of materials (e.g., easy read, braille, large print) <input type="checkbox"/> Accessing online appointments (e.g., how to attend online appointment, resolving technical issues) <input type="checkbox"/> Other	<i>No change</i>	<i>No change</i>	Q36: What support do you need to access your care and treatment? <i>Please cross X in ALL the boxes that apply to you.</i> <input type="checkbox"/> Physical support (e.g., lifts, wide doors, ramps, signage) <input type="checkbox"/> Language support (e.g., translated materials, translator, interpreter) <input type="checkbox"/> Format of materials (e.g., easy read, braille, large print) <input type="checkbox"/> Accessing online appointments (e.g., how to attend online appointment, resolving technical issues) <input type="checkbox"/> Other, please specify
Q34: Do you feel the support provided meets your needs? <input type="checkbox"/> Yes, completely	<i>No change</i>	<i>No change</i>	Q37: Do you feel the support provided meets your needs? <input type="checkbox"/> Yes, completely

Round 1 question	Round 2 question	Round 3 question	Final question
<input type="checkbox"/> Yes, some to some extent <input type="checkbox"/> No <input type="checkbox"/> I did not receive any support <input type="checkbox"/> Don't know / can't remember			<input type="checkbox"/> Yes, some to some extent <input type="checkbox"/> No <input type="checkbox"/> I did not receive any support <input type="checkbox"/> Don't know / can't remember
Overall	Overall	Overall	Overall
Q35: Overall (Please circle a number) 	Q36: Overall, in the last 12 months, how was your experience of using NHS mental health services? Please give your answer on a scale of 0 to 10, where 0 means you had a very poor experience and 10 means you had a very good experience. <input type="checkbox"/> 0- I had a very poor experience <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10- I had a very good experience	<i>No change</i>	Q38: Overall, in the last 12 months, how was your experience of using NHS mental health services? Please give your answer on a scale of 0 to 10, where 0 means you had a very poor experience and 10 means you had a very good experience. <input type="checkbox"/> 0- I had a very poor experience <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10- I had a very good experience
Q36: Overall, in the last 12 months, did you feel that you were treated with respect and dignity by NHS mental health services? <input type="checkbox"/> Yes, always <input type="checkbox"/> Yes, sometimes <input type="checkbox"/> No	<i>No change</i>	<i>No change</i>	Q39: Overall, in the last 12 months, did you feel that you were treated with respect and dignity by NHS mental health services? <input type="checkbox"/> Yes, always <input type="checkbox"/> Yes, sometimes <input type="checkbox"/> No
Q37: Aside from this questionnaire, in the last 12 months, have you	<i>No change</i>	<i>No change</i>	Q40: Aside from this questionnaire, in the last 12 months, have you

Round 1 question	Round 2 question	Round 3 question	Final question
<p>been asked by NHS mental health services to give your views on the quality of your care?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Not sure</p>			<p>been asked by NHS mental health services to give your views on the quality of your care?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Not sure</p>
<p>About You</p> <p>This information will not be used to identify you. We use it to monitor whether different people are having different experiences of NHS services. All the questions should be answered from the point of view of the person named on the letter. This includes the following background questions on gender and year of birth.</p>	<i>No change</i>	<p>About You</p> <p>This information will not be used to identify you. Your answers will help us find out whether different people are having different experiences of NHS services. All the questions should be answered from the point of view of the person named on the letter.</p>	<p>About You</p> <p>This information will not be used to identify you. Your answers will help us find out whether different people are having different experiences of NHS services. All the questions should be answered from the point of view of the person named on the letter.</p>
<p>Q38: Who was the main person or people that filled in this questionnaire?</p> <p><input type="checkbox"/> The person named on the front of the envelope</p> <p><input type="checkbox"/> A friend or relative of the person named on the front of the envelope</p> <p><input type="checkbox"/> Both the person named on the envelope and a friend / relative</p> <p><input type="checkbox"/> The person named on the envelope with the help of a health professional</p>	<i>No change</i>	<i>No change</i>	<p>Q41: Who was the main person or people that filled in this questionnaire?</p> <p><input type="checkbox"/> The person named on the front of the envelope</p> <p><input type="checkbox"/> A friend or relative of the person named on the front of the envelope</p> <p><input type="checkbox"/> Both the person named on the envelope and a friend / relative</p> <p><input type="checkbox"/> The person named on the envelope with the help of a health professional</p>
<p>Q39: Do you have any physical or mental health conditions, disabilities or illnesses that have lasted or are expected to last for 12 months or more?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>	<i>No change</i>	<i>No change</i>	<i>Removed</i>

Round 1 question	Round 2 question	Round 3 question	Final question
<p>Q40: Do you have any of the following physical or mental health conditions, disabilities or illnesses that have lasted or are expected to last 12 months or more?</p> <p>Please cross X in all the boxes that apply to you.</p> <p><input type="checkbox"/> Autism or autism spectrum condition</p> <p><input type="checkbox"/> Breathing problem, such as asthma</p> <p><input type="checkbox"/> Blindness or partial sight</p> <p><input type="checkbox"/> Cancer in the last 5 years</p> <p><input type="checkbox"/> Dementia or Alzheimer's disease</p> <p><input type="checkbox"/> Deafness or hearing loss</p> <p><input type="checkbox"/> Diabetes</p> <p><input type="checkbox"/> Heart problem, such as angina</p> <p><input type="checkbox"/> Joint problem, such as arthritis</p> <p><input type="checkbox"/> Kidney or liver disease</p> <p><input type="checkbox"/> Learning disability</p> <p><input type="checkbox"/> Mental health condition</p> <p><input type="checkbox"/> Neurological condition</p> <p><input type="checkbox"/> Physical Mobility</p> <p><input type="checkbox"/> Stroke (which affects your day-to-day life)</p> <p><input type="checkbox"/> Another long-term condition</p> <p><input type="checkbox"/> None of the above</p> <p><input type="checkbox"/> I would prefer not to say</p>	<i>No change</i>	<i>No change</i>	<p>Q42: Do you have any of the following physical or mental health conditions, disabilities or illnesses that have lasted or are expected to last 12 months or more?</p> <p>Please cross X in ALL the boxes that apply to you.</p> <p><input type="checkbox"/> Autism or autism spectrum condition</p> <p><input type="checkbox"/> Breathing problem, such as asthma</p> <p><input type="checkbox"/> Blindness or partial sight</p> <p><input type="checkbox"/> Cancer in the last 5 years</p> <p><input type="checkbox"/> Dementia or Alzheimer's disease</p> <p><input type="checkbox"/> Deafness or hearing loss</p> <p><input type="checkbox"/> Diabetes</p> <p><input type="checkbox"/> Heart problem, such as angina</p> <p><input type="checkbox"/> Joint problem, such as arthritis</p> <p><input type="checkbox"/> Kidney or liver disease</p> <p><input type="checkbox"/> Learning disability</p> <p><input type="checkbox"/> Mental health condition</p> <p><input type="checkbox"/> Neurological condition</p> <p><input type="checkbox"/> Physical Mobility</p> <p><input type="checkbox"/> Stroke (which affects your day-to-day life)</p> <p><input type="checkbox"/> Another long-term condition</p> <p><input type="checkbox"/> I do not have any long-term conditions</p> <p><input type="checkbox"/> I would prefer not to say</p>
<p>Q41: Do any of these conditions reduce your ability to carry out day-to-day activities?</p> <p><input type="checkbox"/> Yes, a lot</p> <p><input type="checkbox"/> Yes, a little</p>	<i>No change</i>	<i>No change</i>	<p>Q43: Do any of these conditions reduce your ability to carry out day-to-day activities?</p> <p><input type="checkbox"/> Yes, a lot</p> <p><input type="checkbox"/> Yes, a little</p>

Round 1 question	Round 2 question	Round 3 question	Final question
<input type="checkbox"/> No, not at all			<input type="checkbox"/> No, not at all
Q42: What was your year of birth? Please write in e.g. 1964	No change	No change	Q44: What was your year of birth? Please write in e.g. 1964
The following two questions ask about your sex and gender. Your answers will help us understand whether experiences vary between different groups of the population. Your answers will be kept confidential and not linked to your medical records.	No change	No change	The following two questions ask about your sex and gender. Your answers will help us understand whether experiences vary between different groups. Your answers will be kept confidential and not linked to your medical records.
Q43: At birth were you registered as... <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Intersex <input type="checkbox"/> I would prefer not to say	No change	No change	Q45: At birth were you registered as... <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Intersex <input type="checkbox"/> I would prefer not to say
Q44: Is your gender the same as the sex you were registered as at birth? <input type="checkbox"/> Yes <input type="checkbox"/> No, please write in your gender below <input type="checkbox"/> I would prefer not to say	No change	No change	Q46: Is your gender the same as the sex you were registered as at birth? <input type="checkbox"/> Yes <input type="checkbox"/> No, please write in your gender below <input type="checkbox"/> I would prefer not to say
Q45: What is your religion? <input type="checkbox"/> No religion <input type="checkbox"/> Buddhist <input type="checkbox"/> Christian (including Church of England, Catholic, Protestant, and other Christian denominations) <input type="checkbox"/> Hindu <input type="checkbox"/> Jewish <input type="checkbox"/> Muslim <input type="checkbox"/> Sikh <input type="checkbox"/> Other	No change	No change	Q47: What is your religion? <input type="checkbox"/> No religion <input type="checkbox"/> Buddhist <input type="checkbox"/> Christian (including Church of England, Catholic, Protestant, and other Christian denominations) <input type="checkbox"/> Hindu <input type="checkbox"/> Jewish <input type="checkbox"/> Muslim <input type="checkbox"/> Sikh <input type="checkbox"/> Other

Round 1 question	Round 2 question	Round 3 question	Final question
<input type="checkbox"/> I would prefer not to say			<input type="checkbox"/> I would prefer not to say
Q46: Which of the following best describes your sexual orientation? <input type="checkbox"/> Heterosexual / Straight <input type="checkbox"/> Gay / Lesbian <input type="checkbox"/> Bisexual <input type="checkbox"/> Other <input type="checkbox"/> I would prefer not to say	<i>No change</i>	<i>No change</i>	Q48: Which of the following best describes your sexual orientation? <input type="checkbox"/> Heterosexual / Straight <input type="checkbox"/> Gay / Lesbian <input type="checkbox"/> Bisexual <input type="checkbox"/> Other <input type="checkbox"/> I would prefer not to say
Q47: What is your ethnic group ? Please cross ONE box only. a. WHITE <input type="checkbox"/> English / Welsh / Scottish / Northern Irish / British <input type="checkbox"/> Irish <input type="checkbox"/> Gypsy or Irish Traveller <input type="checkbox"/> Roma <input type="checkbox"/> Any other White background, please write in b. MIXED / MULTIPLE ETHNIC GROUPS <input type="checkbox"/> White and Black Caribbean <input type="checkbox"/> White and Black African <input type="checkbox"/> White and Asian <input type="checkbox"/> Any other Mixed / multiple ethnic background, please write in c. ASIAN / ASIAN BRITISH <input type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Chinese <input type="checkbox"/> Any other Asian background, please write in	<i>No change</i>	<i>No change</i>	Q49: What is your ethnic group ? Please cross ONE box only. a. WHITE <input type="checkbox"/> English / Welsh / Scottish / Northern Irish / British <input type="checkbox"/> Irish <input type="checkbox"/> Gypsy or Irish Traveller <input type="checkbox"/> Roma <input type="checkbox"/> Any other White background, please write in b. MIXED / MULTIPLE ETHNIC GROUPS <input type="checkbox"/> White and Black Caribbean <input type="checkbox"/> White and Black African <input type="checkbox"/> White and Asian <input type="checkbox"/> Any other Mixed / multiple ethnic background, please write in c. ASIAN / ASIAN BRITISH <input type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Chinese <input type="checkbox"/> Any other Asian background, please write in

Round 1 question	Round 2 question	Round 3 question	Final question
<p>d. BLACK / AFRICAN / CARIBBEAN / BLACK BRITISH</p> <p><input type="checkbox"/> African</p> <p><input type="checkbox"/> Caribbean</p> <p><input type="checkbox"/> Any other Black / African / Caribbean background, please write in</p> <p>e. OTHER ETHNIC GROUP</p> <p><input type="checkbox"/> Arab</p> <p><input type="checkbox"/> Any other ethnic group, please write in</p>			<p>d. BLACK / AFRICAN / CARIBBEAN / BLACK BRITISH</p> <p><input type="checkbox"/> African</p> <p><input type="checkbox"/> Caribbean</p> <p><input type="checkbox"/> Any other Black / African / Caribbean background, please write in</p> <p>e. OTHER ETHNIC GROUP</p> <p><input type="checkbox"/> Arab</p> <p><input type="checkbox"/> Any other ethnic group, please write in</p>
<p>If there is anything else you would like to tell us about your experiences of mental health care in the last 12 months, please do so here.</p> <p>Please note that the comments you provide will be looked at in full by the NHS Trust, CQC, NHS England and researchers analysing the data. We will remove any information that could identify you before publishing any of your feedback. Your contact details will only be passed back to the NHS Trust if your comments in this section raise concerns for your own or others' safety and wellbeing.</p>	<i>No change</i>	<i>No change</i>	<p>If there is anything else you would like to tell us about your experiences of mental health care in the last 12 months, please do so here.</p> <p>Please note that the comments you provide will be looked at in full by the NHS Trust, CQC, NHS England and researchers analysing the data. We will remove any information that could identify you before publishing any of your feedback. Your contact details will only be passed back to the NHS Trust if your comments in this section raise concerns for your own or others' safety and wellbeing.</p>
<p>Online only: The Care Quality Commission (CQC) or an organisation working on behalf of CQC, may wish to contact you within the next 12 months to tell you about other surveys or research about your healthcare experience.</p>	<p>Online only: The Care Quality Commission (CQC) or an organisation working on behalf of CQC, may wish to contact you within the next 12 months to tell you about other surveys or invite you to take</p>	<i>No change</i>	<p>Online only: The Care Quality Commission (CQC) or an organisation working on behalf of CQC, may wish to contact you within the next 12 months to tell you about other surveys or invite you to take part in other</p>

Round 1 question	Round 2 question	Round 3 question	Final question
<p>This will not affect the care you receive in any way. The answers you have provided in today's survey are still valuable regardless of whether you agree to be contacted about future research.</p> <p>If you do agree for your answers to be linked to your contact details, this will not be shared with any health professionals involved in your care. Your survey answers will remain confidential. Agreeing to be contacted does not mean that you have to take part in any future research.</p> <p>Are you willing for your answers to be linked to your contact details?</p> <p><input type="checkbox"/> Yes, I am happy for my answers to be linked to my contact details and to be contacted (I understand that this does not mean that I would have to take part in any future surveys or research)</p> <p><input type="checkbox"/> No, I would not like to be re-contacted</p>	<p>part in other research about your healthcare experience.</p> <p>This will not affect the care you receive in any way. The answers you have provided in today's survey are still valuable regardless of whether you agree to be contacted about future research.</p> <p>If you do agree for your answers to be linked to your contact details, this will not be shared with any health professionals involved in your care. Your survey answers will remain confidential. Agreeing to be contacted does not mean that you have to take part in any future research.</p> <p>Are you willing for your answers to be linked to your contact details?</p> <p><input type="checkbox"/> Yes, I am happy for my answers to be linked to my contact details and to be contacted (I understand that this does not mean that I would have to take part in any future surveys or research)</p> <p><input type="checkbox"/> No, I would not like to be re-contacted</p>		<p>research about your healthcare experience.</p> <p>This will not affect the care you receive in any way. The answers you have provided in today's survey are still valuable regardless of whether you agree to be contacted about future research.</p> <p>If you do agree for your answers to be linked to your contact details, this will not be shared with any health professionals involved in your care. Your survey answers will remain confidential. Agreeing to be contacted does not mean that you have to take part in any future research.</p> <p>Are you willing for your answers to be linked to your contact details?</p> <p><input type="checkbox"/> Yes, I am happy for my answers to be linked to my contact details and to be contacted (I understand that this does not mean that I would have to take part in any future surveys or research)</p> <p><input type="checkbox"/> No, I would not like to be re-contacted</p>
<p>If you would like us to tell you about the results of this survey, please provide your email address below.</p>	<p>If you would like us to tell you about the results of this survey, please provide your email address below.</p>	<p><i>No change</i></p>	<p>If you would like us to tell you about the results of this survey, please provide your email address below.</p>

Round 1 question	Round 2 question	Round 3 question	Final question
FREE TEXT BOX FOR EMAIL ADDRESS <input type="checkbox"/> No, don't tell me about the results	FREE TEXT BOX FOR EMAIL ADDRESS <input type="checkbox"/> No, don't tell me about the results		FREE TEXT BOX FOR EMAIL ADDRESS <input type="checkbox"/> No, don't tell me about the results

During testing a number of changes were made throughout the three rounds to refine proposed questions, and to address potential areas of misinterpretation. The rationale behind specific question changes are outlined below:

- **Interpretational issues for the waiting time for the service users' first appointment with the NHS mental health team:** during the first round of cognitive testing participants were confused about the meaning of 'your first appointment with the NHS mental health team'. The description respondents provided about 'your first appointment' (questions Q3, Q4, Q5, Q6 as per table above) suggested that they did not have a clear understanding of what was meant, and they were not reporting their experience of waiting times accurately. The questions were reworded from 'first appointment' to 'between your assessment with the NHS mental health team and your first appointment for treatment' to provide clarity to the respondent that the question was focused on a specific timeframe.
- **Clarification issues with young people who have only transferred some of their services to Adult services from Children services:** We looked at this question in detail following feedback from young service users during cognitive testing and the mental health organisation Young Minds. It was made clear that young service users who are due to move from CAMHS to Adult services, only transition part of their services when the trust does not offer the same service for Adults. We were informed that the use of both Adult and Children services may continue until the service user reaches 25 years of age. To this end, we amended the response option of the question (online Q8) from 'Yes' to 'Yes, all of my services have moved' and 'Yes, some of my services have moved'. This was intended to add clarity to the question for participants who are using both services and inform trusts.
 - In the same section, we looked at questions online Q9 and online Q10 and the response options were more balanced and consistent with other questions within the survey. For both questions the response changed to 'Yes, definitely', 'Yes, to some extent', 'No', 'Don't know / can't remember'.
- **Additional clarification and new question about care plan:** One new question was added to the 'Your care' section. Feedback from service users during cognitive testing indicated that questions relating to a care plan in the 'Your care' section were not understood as intended. A new question was added for round 2 asking 'do you have a care plan?'. This was intended for analysis purposes to inform trusts. Following round two of testing, an instruction was added explaining what a care plan is 'This is a plan for any care and treatments you will receive'.
- **Amendment of delivery of services question:** We looked at the question on how services are delivered in more detail. For CMH23 the question stem was reworded from 'did you agree that your care and treatment would be delivered ...' to 'how has your care

and treatment been delivered?'. The question was also moved from 'Your care and treatment' section in CMH22 to 'Your care' section this year. For CMH22, the question was intended to measure change in the mode of treatment delivery and whether this was in agreement between the mental health team and the service user. For CMH23, the question was revised to capture how care and treatment was delivered. To capture all new delivery modes in the post-Covid 19 era, after round two of cognitive testing two response options were added 'Online course(s)' and 'Digital applications'.

- **Clarification about GP prescribed medication:** A new question was added during cognitive testing on who to think about when answering questions about medication in 'Your treatment' section, as GPs, Community Mental Health Trusts or both could be responsible for the prescription of mental health medication. The new question 'who prescribed medication for your mental health needs' is intended to capture who prescribed medication for the service users' mental health needs. By capturing this information, it allows the following questions to be attributed to either the Community Mental Health Trust or the GP. Subsequent questions will be scored dependent on the respondent's answer.
- **Interpretational issues for talking therapies questions:** The initial question 'thinking about the last time you received any NHS talking therapies, did you feel you were given enough time with the mental health professional?' was replaced by a waiting times question 'how do you feel about the length of time you waited between your assessment with the NHS mental health team and your first talking therapies appointment?'. This was intended to be in line with other questions on waiting times in the survey. The question stem was revised to enable respondents to provide an accurate response of their experience regarding waiting times.
 - Following feedback from trusts that the question 'thinking about the last time you received NHS talking therapies, were you given enough privacy to talk comfortably' should be amended in order to capture those who are at home and not at the trust, the question stem was amended to 'thinking about the last time you received NHS talking therapies, did you have enough privacy to talk comfortably?'. This is intended to cover people who are treated at home, and trusts won't be held accountable for home treatment as they might have little control over this.
- **Filter question for analysis and trusts to pinpoint improvement:** Following feedback from trusts that the questions around crisis care did not have a timescale attached to them, a new question was added to filter respondents who accessed crisis care services in the last twelve months. The new question 'in the last 12 months, have you contacted this person or team?', is intended to be in line with other questions with a timescale within the survey, and ensure that the data collected relates to recent service user experience.
- **Clarification issues for the overall scoring question:** We looked at this question following feedback from cognitive interviewing as some respondents seemed confused about what the overall score was about. The question was redeveloped in line with other patient surveys, to ensure it was suitable for an online survey, from a horizontal scale to a vertical scale which is recommended for device agnostic surveys. The question stem

was also reworded to include the question wording, and some explanatory text about the scale.

- **Amendment of the reasonable adjustments question:** Following feedback from cognitive interviewing, the response options for question 36 on reasonable adjustments 'what support do you need to access your care and treatment' were amended to include 'Other, please specify'. This was intended to identify what specific needs service users may have and will be revisited for CMH24 to possibly include new response options.
- **Changes in line with other NPSP surveys:** A change that had already implemented in other patient surveys, was to remove the routed question Q42 in the 'About you' section, 'Do you have any physical or mental health conditions, disabilities or illnesses that have lasted or are expected to last for 12 months or more?'. Once the question was removed, the response option 'None of the above' of Q43 was replaced by 'I do not have any long-term conditions'.

5. Changes to Accessibility

For CMH23 survey, the move to mixed mode provided the opportunity to review accessibility options for both the online and paper accessible formats. The online survey has been built to meet accessibility guidelines and the survey is available in nine non-English languages and British Sign Language, while the paper version is also available in Braille and Easy Ready formats.

5.1 Accessible formats available via online survey

The online survey is set up to be device-agnostic, meaning that it automatically adapts to the device the survey is opened on, such as mobile phones, tablets, and desktops. Participants are either able to click the link provided in the text message (SMS) reminders, or log in using the details provided in their letter. The online survey has been tested successfully with service users to make sure it is easy for them to access and navigate. The accessible formats that will be offered for the 2023 online survey are detailed below:

- Respondents will be able to change the font size and background colour of the survey, and the survey is screen reader compatible. They can choose between three different font sizes and five different background colours: white, beige, blue, green, and grey.
- The online survey has been translated into nine non-English languages (Arabic, Bengali, French, Gujarati, Polish, Portuguese, Punjabi, Spanish, Urdu) and British Sign Language.
- Participants can request a telephone assisted complete in English or in a non-English language using the helpline provided.

5.2 Accessible formats available via contractors on request

The paper questionnaire will be offered in accessible formats on request. The availability of large print, Easy Read and Braille questionnaires has been signposted on the letters and will be available at the request of the service user.

Appendix: changes to the questionnaire

The following table provides a summary of the CMH22 questions that were removed from CMH23 and the rationale that led to the decision to remove them.

CMH22 vs CMH23 Questions removed

CMH22 Number	2022 Question wording	Reasoning
Q3	In the last 12 months, do you feel you have seen NHS mental health services often enough for your needs? (This includes contact in person, via video call and telephone). <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> It is too often <input type="checkbox"/> Don't know / can't remember	Feedback from stakeholders and trusts suggested that this question does not provide any significant information that they could use.
Q4	In the last 12 months, have you and someone from NHS mental health services agreed how your care and treatment would be delivered? (i.e. in person, via video call or telephone). <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure	Question removed as there was no need to capture this data. This was used when the delivery of treatment was forced to change from in person to other modes due to COVID-19 restrictions.
Q6	Have you received your care and treatment in the way you agreed? <input type="checkbox"/> Yes, always <input type="checkbox"/> Yes, sometimes <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember	Removed as this was lower priority with a new focus on service user involvement and being in control of their own care.
Q8	Did the person or people you saw understand how your mental health needs affect other areas of your life? (This includes contact in person, via video call and telephone). <input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, to some extent <input type="checkbox"/> No <input type="checkbox"/> Don't know / can't remember	Question removed, with a new focus placed on how areas of their life impact their mental health instead, accepting that many people will have poor mental health as a direct result of their personal circumstance/situation.

Q10	<p>Have you been told who is in charge of organising your care and services? (This person can be anyone providing your care, and may be called a “care coordinator” or “lead professional”).</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Not sure</p>	<p>Feedback from stakeholders and trusts suggested to remove this question. They highlighted that service users may not be aware of who is in charge of their care and usually it is a team and not a person.</p>
Q11	<p>Is the main person in charge of organising your care and services...</p> <p><input type="checkbox"/> A GP</p> <p><input type="checkbox"/> Another type of NHS health or social care worker (e.g., a community psychiatric nurse, psychotherapist, mental health support worker etc).</p> <p><input type="checkbox"/> Don't know / not sure</p>	<p>Based on feedback this question did not provide useful information as a mental health team is in charge of care and not a person. It was also reflected that the service user should be in control of their own care.</p>
Q12	<p>How well does this person organise the care and services you need?</p> <p><input type="checkbox"/> Very well</p> <p><input type="checkbox"/> Quite well</p> <p><input type="checkbox"/> Not very well</p> <p><input type="checkbox"/> Not at all well</p>	<p>Feedback from stakeholders and trusts suggested that this question does provide useful information. One significant angle that should be explored is whether the service users feel empowered in organising their own care.</p>
Q13	<p>Do you know how to contact this person if you have a concern about your care?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Not sure</p>	<p>Questions added to explore communication and delivery of services from the mental health team not an individual.</p>

Q9	<p>Did the person or people you saw appear to be aware of your treatment history? (This includes contact in person, via video call and telephone).</p> <p><input type="checkbox"/> Yes, completely Yes, to some extent</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Don't know / can't remember</p> <p><input type="checkbox"/> Not applicable - I had no treatment prior to this</p>	<p>This question was removed, and a new question was added capturing whether the service user has to repeat their mental health history. This followed feedback from stakeholders and trusts suggesting to focus on communication between service users and the mental health team.</p>
Q16	<p>Were you involved as much as you wanted to be in deciding what care you will receive?</p> <p><input type="checkbox"/> Yes, definitely</p> <p><input type="checkbox"/> Yes, to some extent</p> <p><input type="checkbox"/> No, but I wanted to be</p> <p><input type="checkbox"/> No, but I did not want to be</p> <p><input type="checkbox"/> Don't know / can't remember</p>	<p>Question removed as new questions were added to capture whether service users decided on their treatment together with the mental health team.</p>
Q17	<p>Did decisions on what care you will receive take into account your needs in other areas of your life?</p> <p><input type="checkbox"/> Yes, definitely</p> <p><input type="checkbox"/> Yes, to some extent</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> No, but I did not want / need them to</p> <p><input type="checkbox"/> Don't know / can't remember</p>	<p>Removed as new questions were added on decisions, support, and involvement in care.</p> <p>Feedback from stakeholders and trusts agreed that this question was similar to question 8 and should be removed.</p>
Q25	<p>Have the possible side effects of your medicines ever been discussed with you?</p> <p><input type="checkbox"/> Yes, definitely</p> <p><input type="checkbox"/> Yes, to some extent</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Don't know / can't remember</p>	<p>Question removed because a new grid question was introduced that included it.</p>
Q26	<p>Have you been receiving any medicines for your mental health needs for 12 months or longer?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Not sure</p>	<p>Question removed as there is another question asking if service users have received any medication in the past 12 months.</p>

Q29	<p>Were these NHS talking therapies explained to you in a way you could understand?</p> <p><input type="checkbox"/> Yes, completely</p> <p><input type="checkbox"/> Yes, to some extent</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> No explanation was needed</p>	<p>Feedback from trusts suggested that we should remove the Talking Therapies section as not all trusts provide these therapies. Other trusts, however, did make use of these results. This question was removed as the section is now shorter and more succinct.</p>
Q30	<p>Were you involved as much as you wanted to be in deciding what NHS talking therapies to use?</p> <p><input type="checkbox"/> Yes, definitely</p> <p><input type="checkbox"/> Yes, to some extent</p> <p><input type="checkbox"/> No, but I wanted to be</p> <p><input type="checkbox"/> No, but I did not want to be</p> <p><input type="checkbox"/> Don't know / can't remember</p>	<p>Question was removed as a result of redeveloping the section on Talking Therapies, where access and privacy were prioritised.</p>
Q31	<p>Do you feel your NHS talking therapies have helped your mental health?</p> <p><input type="checkbox"/> Yes, definitely</p> <p><input type="checkbox"/> Yes, to some extent</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Not sure</p>	<p>Question removed as trusts had highlighted this data did not prove actionable.</p>
Q34	<p>In the last 12 months, did NHS mental health services give you any help or advice with finding support for financial advice or benefits?</p> <p><input type="checkbox"/> Yes, definitely</p> <p><input type="checkbox"/> Yes, to some extent</p> <p><input type="checkbox"/> No, but I would have liked help or advice with finding support</p> <p><input type="checkbox"/> I have support and did not need help / advice to find it</p> <p><input type="checkbox"/> I do not need support for this</p>	<p>Question was removed because a grid question was created that included it.</p>
Q35	<p>In the last 12 months, did NHS mental health services give you any help or advice with finding support for finding or keeping work (paid or voluntary)?</p> <p><input type="checkbox"/> Yes, definitely</p> <p><input type="checkbox"/> Yes, to some extent</p> <p><input type="checkbox"/> No, but I would have liked help or advice with finding support</p> <p><input type="checkbox"/> I have support and did not need help / advice to find it</p> <p><input type="checkbox"/> I do not need support for this</p>	<p>Question was removed because a grid question was created that included it.</p>

	<input type="checkbox"/> I am not currently in or seeking work	
Q40	<p>Do you have any physical or mental health conditions, disabilities or illnesses that have lasted or are expected to last for 12 months or more?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p>	Question was removed as a decision was made to replace this filter question and add response option 'None of the above' to the physical or mental health conditions question.