# 2025 Community Mental Health Survey Trust Webinar 2 Q&A

Survey Overview

Sampling and contact approach

Q: It sounds like there's no changes to the Sampling rules/criteria from last year. Is that right?

A: That is correct, no changes have been made to the sampling rules / criteria for CMH25, compared to the previous survey iteration.

Q: Just to be clear we shouldn't start to draw the sample yet.

A: Section 251 approval was granted on the 19th June 2025 following this webinar, and you can start drawing your sample from the 01st July. Your contractors will be in contact to confirm your submission date.

Potential sampling errors

Q: Will there be any sessions for trusts with sampling queries?

A: There are no sessions arranged, but trusts are encouraged to share their queries with their contractor. If their contractor has further queries, they will contact SCC. Trusts are also encouraged to reach out to SCC (mentalhealth@surveycoordination.com) if they have any further questions that the contractor cannot answer.

Service-user facing materials

Q: Just checking that the dissent leaflets should no longer be displayed? Wasn't it only April-May to opt out?

A: They needed to be displayed during the sample months (April-May 2025). However, they can remain in place to help promote the survey, along with promotional materials provided by the SCC to help us hear back from as many people as possible.

Questionnaire development: survey questions

Q: Should we be including NHS 111 services in the sample, although likely to be one of telephone contacts?

A: The sampling approach is still the same as in CMH24. Anyone who used any of the following services / teams at your Trust should be included in your sample:

* Outpatients services
* Day therapies services
* Adult services
* Services for older people
* Crisis teams
* Complex needs services
* Assertive outreach teams
* Early intervention and short-term intervention teams
* Recovery teams.
* Home treatment teams
* Rehabilitation support teams.
* Service users with dementia (this does not include service users primarily accessing memory clinics)
* Child and Young People’s Mental Health Services (CYPMHS). But only CYPMHS service users who are 16 years of age or over on the date the sample is drawn

The already-sampled participants might have utilised NHS 111 to access crisis care support, but we are not purposefully sampling for this.

Q: Would keeping the questions the same for say 3 years before a review ever be considered? I understand why new questions are added, some omitted and others re-worded but when this happens every year it makes comparisons with previous results/our progress against them difficult.

A: We have tried to limit any changes or amends as much as possible, with the majority of the questionnaire remaining unchanged for comparability with previous years. There are some questions that required amending or updating as there are new priorities in the sector from stakeholders and service users.

Q: For the new diagnosis question, is there anything in the options or in how the question will be analysed to reflect that some service users may still be undergoing assessment, therefore we would not yet expect them to have a diagnosis at this stage?

A: This has not yet been covered by a response option, but we will be able to break the question down by how long service users have been accessing mental health services. This is valuable feedback, and we will ensure that this is reviewed for the 2026 survey.

Q: Should autism liaison services be included?

A: The only services we ask Trusts to exclude for their sample are the following individuals:

* Anyone seen only once ever for an assessment (for example, those who were seen by a duty worker or a psychiatrist for a single assessment).
* Anyone seen for assessment only through a liaison service, even if they were seen more than once1.
* Service users who have only been in contact via email and have not been seen in person at all (or via video conferencing or telephone).
* Anyone primarily receiving care in the following mental health services:
  + Drug & alcohol
  + Learning disability
  + Specialist forensic
  + Psychological treatments from NHS Talking Therapies (formerly known as Improving Access to Psychological Therapies (IAPT))
  + Chronic fatigue/Myalgic Encephalomyelitis (ME) services
  + Psychosexual medicine (sexual dysfunction)
  + Gender identity
  + Memory Clinics

We do not state that Autism liaison services should be directly excluded, therefore if they meet the other sampling criteria they should be included in the sample.

Timelines: The CMH25 sampling period is April-May. Please refer to the survey handbook for more details on the timelines. Your contractor will be in contact with you to confirm the sample submission deadline.