

Community mental health services

The views of mental health service users

Key findings from the 2007 survey

The findings of the fourth national survey of users of community mental health services are similar to those from previous years. Overall, most respondents continued to rate the care they had received from mental health services positively, with 76% describing it as “good”, “very good”, or “excellent”, 14% as “fair” and 9% as “poor” or “very poor”.

There have been some encouraging improvements in the survey, and many aspects of care continue to be well regarded by service users. The survey results also indicated, however, that there remains scope for improvement in other areas.

Key findings

Improvements made

- Service users with more complex mental health problems who are under the care of a multidisciplinary team were more likely to have been told who their care coordinator was than in previous years (89%, compared to 86% in 2006) and to have been given (or offered) a printed copy of their care plan (74%; an increase from 71% in 2006)
- A greater proportion of service users (53%) had had a care review in the last year, compared with 51% in 2006 and 47% in 2005
- There has been a steady improvement in the proportion of respondents saying that their psychiatrist “definitely” listened carefully to them (68% in 2004, 69% in 2005, 70% in 2006, and 71% in 2007) and “definitely” treated them with respect and dignity (79% in 2004, 80% in 2005, 81% in 2006, and 82% in 2007).
- Just over half (52%) had been given the telephone number of someone to contact out of hours - an increase from 49% in 2006
- Of those service users who had been given a number on which to contact someone out of hours, and who had called that number in the past 12 months, 88% were able to speak to someone within an hour (up from 83% in 2006). In addition, the proportion who did not get through to anyone fell to 5% (down from 8% in 2006)
- The proportion of service users who said they had not received the help they needed from out of hours telephone services had decreased to 17% in 2007 from 23% in 2006
- Two-thirds (65%) of service users who had been prescribed new medications within the past 12 months said that the purposes of those medications had “definitely” been explained to them (an increase from 63% in 2006), with a further 27% said that this had happened “to some extent”

Aspects that continue to be well regarded by most service users

- Seventy-two per cent of service users said that they could always contact their care coordinator if they had a problem
- Fifty-nine per cent of service users said they “definitely” understood what was in their care plan, and a further 32% said that they understood their care plan “to some extent”
- Of those who had a care review, 73% had been told they could bring a friend or relative to that meeting
- Eighty-one per cent of service users said that their community psychiatric nurse (CPN) had “definitely” listened carefully to them, and 86% said that their CPN “definitely” treated them with respect and dignity
- Just over half (52%) of those who had received counselling said that they had “definitely” found it helpful
- Of those service users who said they had visited a day centre in the last two months, 55% reported that the activities were “definitely” helpful

Improvements still needed

- Results suggest that there remains substantial unmet need for talking therapies, with over a third (35%) of service users who had not received counselling reporting that they would have liked it
- A quarter of service users (25%) said that they had not been involved in deciding what was in their care plan (23% in 2005 and 25% in 2006).
- One in three (33%) of those prescribed new medications said they were not told about their possible side effects. This proportion is, however, falling when compared with previous years (35% in 2004 and 2005, and 34% in 2006).
- Of those service users who wanted it, 50% had not received any information about local support groups
- Of those who wanted help finding work, 51% did not receive it, and 32% of those who would have liked help with benefits said they had not received it
- Two-fifths (40%) said that their relatives or carer had not had enough support from health and social services

Why the survey was carried out

This survey aimed to find out about the experiences of people using mental health services in the community. These services provide care to people who have been referred to a psychiatric outpatient clinic or local community mental health team.

Surveys are an important way of gathering information about the experiences of patients and listening to their views. The results are used by NHS trusts to help them set priorities to ensure that they are continually improving services for the people that are using them. They are also used as part of the Healthcare Commission's annual health check to help measure the quality of care being provided by NHS trusts. Results are also used to assess performance against the Department of Health's targets for service users' experiences. Measuring and reporting experiences in a structured way helps ensure that improving experiences remains a priority for NHS trusts.

The Community Mental Health Service Users Survey has run for four consecutive years, starting in 2004, as part of the national NHS patient experience survey programme. This is the largest survey of its kind and detailed findings from it are fed back to trusts to help them make improvements.

This document reports the main national findings from the 2007 survey. Although service users aged 16 years and older were included, only those aged 16 to 65 years are covered in this report so that the results can be reliably compared with those from previous years.

Where appropriate, comparisons are made with results from the 2004, 2005 and 2006 surveys. If comparisons are not presented, this means that no meaningful change has been observed between survey years. Differences in the results over time may appear to be small, but can nevertheless be significant since the numbers of respondents involved are large.

More detailed results, including the results of the survey for each trust, can be found at www.healthcarecommission.org.uk/PatientSurveysMentalHealth2007.

How the survey was carried out

The survey was carried out in spring 2007 by 69 trusts (including combined mental health and social care trusts and those primary care trusts that provide mental health services) across England. Only one trust providing such services did not take part in the survey: this was because it was unable to draw a large enough sample to enable its inclusion¹.

The survey involved service users on the Care Programme Approach (CPA) that was introduced in 1991 and that provides a structure for mental healthcare. Under the CPA all service users should be given a written copy of their care plan, which identifies their needs and explains their care.

¹One mental health trust is exempt from the survey as it has insufficient numbers of service users on its CPA register.

Service users aged 16 years or older, who received services under the Care Programme Approach between 1 September 2006 and 30 November 2006 but who were not inpatients, were eligible for inclusion in the sample. The survey asked people a series of questions about their experiences of services within the community as well as about getting help in finding work, and support being provided for their families or carers.

Over 15,900 completed questionnaires were received from service users aged 16 to 65 years, giving an overall response rate of 38%. The overall profile of respondents to the survey was similar to previous years: over half of those who responded were women (57%), most were aged 36 years or older (79%), and 7% were from black or minority ethnic groups. Almost nine in 10 of all respondents (87%) had been in touch with mental health services for over a year, and nearly all (96%) had seen someone from mental health services within the previous six months.

The Care Programme Approach

The Care Programme Approach (CPA) is classified into “standard” and “enhanced”. The latter is aimed at those with more complex and enduring mental health problems who need the care of a multidisciplinary team. As in previous years, most people in the survey (64%) were on standard CPA, although the proportion of people allocated to each type varied from trust to trust². Since the needs, and experiences, of the two groups may differ, some of the subsequent results are presented separately for each.

All service users on CPA should have a designated care coordinator – usually a community psychiatric nurse. A care coordinator is the person responsible for managing the care that people will receive from different sources and for liaising with the user of services and other healthcare professionals.

More service users on enhanced CPA had been told who their care coordinator was than in previous years (86% in 2006, and 89% in 2007.) For those service users on standard CPA there was no change (62% in 2006 and 2007). It is possible that this may be because some service users receiving standard CPA have only one person involved in their care, and as such this person may not describe themselves as a coordinator. Of those who knew who their care coordinator was, 72% said that they could “always” contact that person if they had a problem, and 25% said they could contact them “sometimes”. As in previous years, only 4% said they were not able to contact their care coordinator.

²The proportion of respondents on enhanced CPA within each trust ranged from 7% to 78%. Additionally, the profile of CPA status was different for men and women and for respondents of different ages. Men were more likely to be on enhanced CPA than women (40% of men compared with 33% of women). Respondents aged 16 to 35 and 36 to 50 were equally likely to be on enhanced CPA (38% of both age groups), compared with 34% of those aged 51 to 65.

Under the CPA, service users should have a care plan to identify their needs and explain their care. In 2007, 55% of service users reported that they had received (or been offered) a written copy of their care plan, continuing the increase seen in previous years (49% in 2004, 50% in 2005, and 53% in 2006). The provision of care plans was much more common among those on enhanced CPA (74%) than those on standard CPA (46%) and had only increased for service users on enhanced CPA since 2006 (71%). It should be noted that feedback from some trusts indicates that those on standard CPA may receive a less formal care plan – in the form of a letter, for example. It may be, therefore, that some service users do not recognise the term ‘care plan’.

Service users should be involved in deciding their care plan. In 2007, 40% said that they had “definitely” been involved and 35% said they had been involved “to some extent” while 25% said that they had not been involved (23% in 2005, and 25% in 2006). Fifty-nine per cent of service users said that they “definitely” understood what was in their care plan and 32% said they understood it “to some extent”. The proportion saying “no, I do not understand it” was 9% in 2007 and 2006, and 10% in 2005.

Under the CPA, service users’ care plans should be reviewed regularly. The proportion of service users who had had a care review in the last year was higher than previously (49% in 2004, 47% in 2005, 51% in 2006, and 53% in 2007). This was true for service users on standard CPA (41% in 2006, and 43% in 2007) as well as those on enhanced CPA (71% in 2006, and 72% in 2007).

In preparation for a care review, service users should be informed that they can bring a friend or relative to the review. There has been a steady improvement in the proportion being told that they could bring someone to the review (68% in 2004, 70% in 2005, 72% in 2006, and 73% in 2007). Service users should also be able to talk to their care coordinator about what will happen at the review: In 2007, 73% had been given a chance to talk to their coordinator before the meeting.

As in previous years, around half (50% in 2007) of those who had a review said they “definitely” found the review helpful (49% in 2004, 47% in 2005, and 49% in 2006). Sixty-nine per cent said that they were “definitely” given a chance to express their views at this meeting and a further 26% “to some extent”. One in 20 service users (5%), however, still reported that they had not been given a chance to express their views at the meeting (5% in 2004 and 2005, and 4% in 2006).

As in previous years, most people rated the overall care they had received from mental health services positively, with 76% describing it as “good”, “very good”, or “excellent”, 14% as “fair” and 9% as “poor” or “very poor”. Most service users reported having at least some say in decisions about their care, although many of these would have liked to have been more involved: 42% said that they “definitely” had enough say in decisions about their care and treatment, and 44% said that they had enough say “to some extent”.

Overall, 46% of service users said that their diagnosis had “definitely” been discussed with them, and 37% said it had been discussed with them “to some extent”. In 2007, a lower proportion said their diagnosis had not been discussed with them: 17% compared with 18% in 2004, 19% in 2005, and 18% in 2006.

Contact with healthcare professionals

The majority of service users had seen a psychiatrist in the last 12 months (84%) and over half (56%) had seen a community psychiatric nurse (CPN). Over half of service users saw other types of health professionals (56%) in the last 12 months. The other professionals identified were social workers (28%), psychologists (24%), and occupational therapists (17%)³. These results are similar to previous years except for those regarding sessions with CPNs, which had fallen from 61% in 2004, 58% in 2005, and 57% in 2006.

Most service users said that their psychiatrist had “definitely” listened carefully to them (71%) and “definitely” treated them with respect and dignity (82%). The figures have been steadily improving for psychiatrists “definitely listening carefully” (68% in 2004, 69% in 2005, 70% in 2006, and 71% in 2007) and “definitely treating service users with respect and dignity” (79% in 2004, 80% in 2005, 81% in 2006, and 82% in 2007).

Once again, around six in ten service users said that they “definitely” had trust and confidence in the psychiatrist (59% in 2004 and 2005, and 61% in 2006 and 2007). As in previous years, however, service users who had seen a different psychiatrist at their previous two appointments (26%) were less likely to say that they had trust and confidence in the last psychiatrist they saw (50% said “definitely” and 36% “to some extent”), compared with those who had seen the same psychiatrist at each appointment (64% said “definitely” and 9% “to some extent”).

Two-thirds of service users (65%) said that they had “definitely” been given enough time to discuss their condition and treatment with their psychiatrist, while a quarter (25%) said that they had “to some extent”. The proportion that said that they had not had enough time with their psychiatrist continues to fall (13% in 2004, 12% in 2005, 11% in 2006, and 10% in 2007). A large proportion of service users (43%), however, still reported that in the past 12 months at least one of their appointments with a psychiatrist had been cancelled or changed to a later date.

The vast majority of service users continue to report having good relationships with their CPN and other healthcare professionals. Eighty-one per cent of service users said that their CPN had “definitely” listened carefully to them. As in previous surveys, most service users said that their CPN “definitely” treated them with respect and dignity (85% in 2004 and 2005, and 86% in 2006 and 2007) and 74% said that they “definitely” had trust and confidence in their CPN.

³The remaining 30% were categorised as “someone else”.

Counselling

As in 2006, around two-fifths of service users (39%) had received counselling (such as talking therapy) from NHS mental health services in the past 12 months. This figure was lower than it had been in previous years (42% in 2004, and 40% in 2005) but this was consistent with a fall in the proportion of service users who said that they had wanted counselling (59% in 2004, 57% in 2005 and 2006, and 55% in 2007). As in previous years, 52% of those who had received counselling said that they had “definitely found it helpful”. Of service users who did not receive counselling, over a third (35%) said they would have liked to have counselling sessions. This has not changed since the 2006 survey.

Medication

As in previous years, 93% reported taking prescribed medications for mental health problems in the last 12 months. The proportion of service users being prescribed new medications in the past 12 months had fallen (47% in 2004, 46% in 2005, 45% in 2006, and 43% in 2007).

Of those service users who took medications, 43% said that they had “definitely” had a say in decisions about their medication, and 39% said that they had had a say “to some extent”. The proportion that said that they “definitely” had a say has improved in recent times, from 40% in 2004 and 39% in 2005 to 43% in 2006 and 2007. The proportion saying that they did not have any say in decisions has fallen correspondingly (20% in 2004, 19% in 2005, and 17% in 2006 and 2007).

One-third (33%) of service users who had been given new prescriptions said that they had not been told about the possible side effects. However, this proportion has been falling (35% in 2004 and 2005, and 34% in 2006). Sixty-five per cent of service users with new prescriptions said the purposes of the medications had “definitely” been explained to them. This is an improvement from 60% in 2004, 62% in 2005 and 63% in 2006. The proportion saying the purposes had not been explained has been falling (11% in 2004, 9% in 2005 and 2006, and 8% in 2007).

Support in the community

Of those service users who said they had visited a day centre in the last two months, 55% reported that the activities were “definitely” helpful and 37% said they were helpful “to some extent”. One in five (18%) visited a day centre most days, while 60% visited once or twice a week, and 22% once or twice a month.

Of those service users who wanted information about local support groups, half (50%) had received it. A fifth of service users (20%) were in paid work: this is similar to the proportion in 2005 (21%). Around half of those who would have liked help finding work received it (47% in 2004, 48% in 2005, 50% in 2006, and 49% in 2007), and around two-thirds (68%) of those who would have liked help with benefits received it.

Crisis care

Provision of out-of-hours telephone services has increased, and in 2007 over half of all service users had been given a telephone number that they could use to contact someone from NHS mental health services out of office hours (49% in 2004, 48% in 2005, 49% in 2006, and 52% in 2007). The proportion of people calling this number in the past 12 months has been rising (36% in 2004, 38% in 2005, 39% in 2006, and 38% in 2007).

In 2007 the majority of callers reached someone immediately (65%) or within an hour (23%), but 5% reported not getting through at all when they called an out-of-hours number (5% in 2004 and 2005, and 8% in 2006). The reported quality of service was higher than before, with fewer people saying that they had not received the help they needed (18% in 2005, 23% in 2006, and 17% in 2007).

Support for family members

Asked whether family members or other people close to them had received information from health and social services, 39% of service users said "yes definitely", while 31% said "yes to some extent" and 29% said that they had not but that they would have liked some. Results are very similar to 2006, where 39% said that their family or carer had "definitely" been given enough information, while 32% answered "to some extent", and 31% said that they had not received enough information.

Service users were also asked whether someone close to them had received enough support from health and social services if this had been necessary: 29% said "yes definitely", 31% said "yes to some extent", and 40% said "no". Again, results are similar to 2006 where 27% said that their family or carer had "definitely" received enough support, 32% responded "to some extent" and 41% said that their family or carer had not been given enough support.

Next steps

All trusts have received their own results for this survey, along with detailed information about how their results compared with those of other trusts.

These findings are also being used as part of the Healthcare Commission's annual health check for 2006/2007, which assesses whether healthcare organisations are meeting the standards and targets set by the Government. They should also be used by NHS trusts to identify and address areas for improvement in the care and treatment of community mental health service users.

The next survey of community mental health services will be carried out in spring 2008.

Healthcare Commission
Finsbury Tower
103-105 Bunhill Row
London EC1Y 8TG

Helpline 0845 601 3012
Facsimile 020 7448 9222

Email feedback@healthcarecommission.org.uk
Website www.healthcarecommission.org.uk

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