

## **SUPPORTING BRIEFING NOTE**

### **ISSUES HIGHLIGHTED BY THE 2008 COMMUNITY MENTAL HEALTH SERVICE USERS SURVEY**

Understanding what service users think about their care and treatment is an important part of the Healthcare Commission's duty to assess and report on the quality and safety of services provided by the NHS. This is the fifth national survey of community mental health service users carried out since 2004, and was conducted in early 2008 by 68 trusts (including combined mental health and social care trusts and those foundation trusts and primary care trusts that provide mental health services) across England.

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, local community mental health team, or other community mental health services. The results from the survey should be used by trusts to improve the services that they provide to their service users. The Healthcare Commission uses the results in its assessment of NHS performance, the annual health check; results are also used to assess performance against the Department of Health's targets for service user experience. Measuring and reporting experiences in a structured way helps ensure that improving experiences remains a priority for NHS trusts.

Over 14,000 completed questionnaires were received from service users aged 16 to 65 years<sup>1</sup>, with a response rate of 35%, a slightly lower rate than in previous years. Over half of those who responded were women (57%), and the average age was 43 years. Overall, 7% of respondents were from black or minority ethnic groups. Almost nine in ten of all respondents (88%) had been in touch with mental health services for over a year, and nearly all (95%) had seen someone from mental health services within the previous six months.

The findings of the survey are similar to those from previous years, with many of the areas that had shown an improvement in previous surveys continuing to improve in 2008.

#### **The significance of changes**

This briefing reports changes in the survey results over time. These changes may appear small – often around one percentage point – but we have reported the differences that are “statistically significant”. This means that we have carried out tests to identify the changes that are unlikely to have occurred by chance. Where there has been no statistically significant change, differences or comparisons are either not described or we clearly state that there has been no change.

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<sup>1</sup> Although service users aged 16 years and older were included in the survey, only the responses from those aged 16 to 65 years are used in this report so that the results from this survey can be compared with those from previous survey years.

## Key Findings

### Improvements

- The percentage of service users that had been told who their care coordinator is has continued to increase, up to 74% in 2008, from 71% in 2007, 70% in 2006, 69% in 2005 and 67% in 2004.
- A greater proportion of service users reported that they had received a written copy of their care plan, an increase to 59% in 2008 from 55% in 2007, 53% in 2006, 50% in 2005 and 49% in 2004.
- In 2008, 55% of service users reported having a care review in the last 12 months, an increase from 53% in 2007 and 51% in 2006.
- The figures for psychiatrists “definitely” listening carefully had improved (68% in 2004, 69% in 2005, 70% in 2006, 71% in 2007 and 72% in 2008)
- There were similar improvements for service users having trust and confidence in the psychiatrist (59% in 2004, 59% in 2005, 61% in 2006, 62% in 2007 and 63% in 2008)
- The proportion who said that they “definitely” had a say in decisions about medication has improved in recent years, from 40% in 2004 and 39% in 2005 to 42% in 2006, 43% in 2007 and 44% in 2008.
- In 2008, 55% of all service users had been given the number of someone from NHS mental health services that they could contact out of office hours. This figure has risen from 49% in 2004, 48% in 2005, 49% in 2006, and 52% in 2007.

### Areas for improvement

- A total of 24% of service users had not been involved in deciding what was in their care plan.
- Eleven percent of service users did not find their care review helpful and 5% reported that they had not been given a chance to express their views at their care review.
- In 2008 16% of service users said their diagnosis had not been discussed with them.
- A large proportion of service users (43%) reported that at least one of their appointments with a psychiatrist in the past 12 months had been cancelled or changed to a later date.
- Of service users who did not receive counselling, almost a third (32%) said they would have liked to have counselling sessions.
- Just below one-third (32%) of service users who had been given new prescriptions said that they had not been told about the possible side effects, although this proportion has been falling (35% in 2004 and 2005, 34% in 2006 and 33% in 2007).

## **The Care Programme Approach (CPA)**

The Care Programme Approach (CPA) was adopted in 1991 and provides a structure for mental health care. Under CPA all service users should be given a written copy of their care plan, which identifies their needs and explains their care. CPA is divided into 'standard' and 'enhanced' categories. The latter is aimed at those with more complex mental health problems who are likely to require support from multidisciplinary teams. As in previous years, most people in the survey (61%) were on standard CPA. The proportion of people allocated to each category varies widely from trust to trust.

All service users on CPA should have a designated care coordinator - often a community psychiatric nurse or social worker. A care coordinator is the person responsible for managing the care that people receive from different sources and for liaising with the service user and other professionals and services. The percentage of service users that had been told who their care coordinator was continued to increase, up to 74% in 2008 from 71% in 2007, 70% in 2006, 69% in 2005 and 67% in 2004. Of those service users on enhanced CPA, 90% knew who their care coordinator was compared with 64% on standard CPA.

Of those who knew who their care coordinator was, 72% said that they could "always" contact that person if they had a problem, and 24% said they could contact them "sometimes". Only 3% said they could not contact their care coordinator.

Under the CPA, service users should have a care plan to identify their needs and explain their care. The number of service users who reported that they had received (or been offered) a written copy of their care plan, continued to increase to 59% in 2008 from 55% in 2007, 53% in 2006, 50% in 2005 and 49% in 2004. The provision of care plans was much more common among those on enhanced CPA (74%) than those on standard CPA (49%).

Service users should be involved in deciding their care plan. In 2008, 40% said that they had "definitely" been involved, 36% said they had been involved "to some extent" and a further 24% had not been involved.

Sixty percent of service users said that they "definitely" understood what was in their care plan and 31% said they understood it "to some extent". The proportion saying "no, I do not understand it" continued to fall: from 10% in 2005, to 9% in 2006 and 2007, and now to 8% in 2008.

Under the CPA, service users' care plans should be reviewed regularly. In 2008, the percentage of service users having a care review in the last 12 months had increased to 55%, from 53% in 2007 and 51% in 2006.

In preparation for a care review, service users should be informed that they can bring a friend or relative to the review. There was another slight improvement in the proportion being told that they could bring someone to the review (68% in 2004, 70% in 2005, 72% in 2006, 73% in 2007 and 73% in 2008). Service users should also be able to talk to their care coordinator about what would happen at the review: 73% had been given a chance to talk to their coordinator before the meeting.

As in previous years, around half (49% in 2008) of those who had a review said they "definitely" found the review helpful. An additional 40% found the review useful "to some extent", but 11% did not find the review helpful.

Sixty-eight percent said that they were “definitely” given a chance to express their views at this meeting and a further 27% “to some extent”. One in twenty service users (5%) however still reported that they had not been given a chance to express their views at the meeting.

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: 43% said that they “definitely” had enough say in decisions about their care and treatment, and another 43% said that they had enough say “to some extent”, with 14% not being sufficiently involved.

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”. However, 16% of service users said that their diagnosis had not been discussed with them.

## **Contact with health and social care professionals**

The majority of service users had seen a psychiatrist in the last 12 months (84%) and over half (57%) had seen a community psychiatric nurse (CPN). In addition, over half of service users saw other types of health and social care professionals (56%) in the last 12 months. The other professionals identified included social workers (30%), psychologists (23%), and occupational therapists (16%). These results are similar to previous years except for those regarding with the proportion who had seen a CPN in the last 12 months, which had fallen from 61% in 2004.

Most service users said that their psychiatrist had “definitely” listened carefully to them (72%) 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, 71% in 2007 and 72% in 2008) and “definitely” treating service users with respect and dignity (79% in 2004, 80% in 2005, 81% in 2006, 82% in 2007 and 2008). There was a similar trend of improvement in service users’ ratings of “definitely” having trust and confidence in the psychiatrist (59% in 2004 and 2005, and 61% in 2006, 62% in 2007 and 63% in 2008). As in previous years, however, service users who had seen a different psychiatrist at their previous two appointments (27%) were less likely to say that they had trust and confidence in the last psychiatrist they saw (49% said “definitely”), compared with those who had seen the same psychiatrist at each appointment (68% said “definitely”).

Two-thirds of service users (66%) said that they had “definitely” been given enough time to discuss their condition and treatment with their psychiatrist, while around a quarter (24%) said that they had “to some extent”. The proportion who said that they had not had enough time with their psychiatrist declined from 2004 until 2007 but has remained unchanged in 2008 (13% in 2004, 12% in 2005, 11% in 2006, and 10% in 2007 and 2008). A large proportion of service users (43%) still reported that at least one of their appointments with a psychiatrist in the past 12 months 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 health and social care 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 (86%) said that their CPN “definitely” treated

them with respect and dignity and 75% said that they “definitely” had trust and confidence in their CPN.

## **Counselling**

The proportion of service users who had received counselling (such as talking therapy) from NHS mental health services in the past 12 months has declined over the years (42% in 2004, 40% in 2005, 39% in 2006 and 2007, and 38% in 2008). This figure is 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, 55% in 2007 and 54% in 2008). As in previous years, around half of those who had received counselling said that they had “definitely found it helpful” (52%). Of service users who did not receive counselling, almost a third (32%) said they would have liked to have counselling sessions.

## **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 has fallen over the years (47% in 2004, 46% in 2005, 45% in 2006, 43% in 2007, and 42% in 2008).

Of those service users who took prescribed medications, 44% 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 who said that they “definitely” had a say has improved in recent years, from 40% in 2004 and 39% in 2005 to 42% in 2006, 43% in 2007 and 44% in 2008. 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, 2007 and 2008).

Just less than one-third (32%) of service users who had been prescribed 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, 34% in 2006 and 33% in 2007). 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, 63% in 2006 and identical to the figure in 2007. The proportion saying the purposes had not been explained has been falling (11% in 2004, 9% in 2005 and 2006, and 8% in 2007 and 2008).

## **Support in the community**

Of those service users who said they had visited a day centre in the last two months, 57% reported that the activities were “definitely” helpful and 35% said they were helpful “to some extent”. One in five (18%) visited a day centre most days, while 57% visited once or twice a week, and 25% once or twice a month.

Of those service users who wanted information about local support groups, half (50%) had received it. Around a fifth of service users (19%) were in paid work: half of those who would have liked help finding work received it (50%), and around two-thirds (69%) of those who would have liked help with benefits received it.

## **Crisis care**

Provision of out of hours services has improved again, and in 2008 55% of all service users said that they had been given the number of someone from NHS mental health services that they could contact out of office hours, up from 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 was 37%. In the 2008 survey the majority of callers reached someone immediately (66%) or within an hour (23%). However, 4% could not get through at all when they called the out of hours number, a figure that has not significantly changed since 2007. Similarly, there has been no significant change in the quality of service reported, with the same proportion of service users saying that they had 'definitely' received the help they needed when using out-of-hours services as in 2007 (47%).

## **Support for family members**

Asked whether family members or other people close to them had received information from health and social services about their mental health problems, 41% of service users said "yes, definitely", whilst 32% said "yes, to some extent" and 27% said that they had not but that they would have liked some. Service users were also asked whether their family or someone else close to them had received enough support from health and social services if this had been necessary: 31% said "yes, definitely", 32% said "yes, to some extent", and 38% said "no".

## **Overall**

Overall, most respondents continued to rate the care they had received from mental health services highly, with 78% describing it as "excellent", "very good" or "good", 13% as "fair" and 9% as "poor" or "very poor".

## **Next steps**

From October 2008 the CPA is being changed with only one level of CPA being used and with new criteria for inclusion of service users. The Healthcare Commission will assess the implications of the changes to the CPA review before any further surveys of people receiving mental health care in the community are undertaken.

**Full details on the survey can be found at:**

<http://www.healthcarecommission.org.uk/PatientSurveysMentalHealth2008>

## **Contact details:**

Healthcare Commission press office on 0207 448 0868