National summary of the results for the Community Mental Health Survey 2012

This national summary provides key findings from the 2012 survey of people who use community mental health services.¹ It details the key aspects of care and highlights statistically significant differences² between 2011 (the last time the survey was carried out) and the 2012 survey results. A 'statistically significant' difference means that the change in the results is very unlikely to have occurred by chance. Where comparisons are not presented, this is because there has **not** been a statistically significant change. The text states where we are not able to present comparisons for other reasons such as changes to a question or new questions in the survey this year.

The 2012 survey involved 61 NHS trusts in England, including combined mental health and social care trusts, Foundation trusts and primary care trusts that provide mental health services. Responses were received from more than 15,000 service users, a response rate of 32%. Service users aged 18 and over were eligible for the survey if they were receiving specialist care or treatment for a mental health condition and had been seen by the trust between 1 July 2011 and 30 September 2011.

Previous surveys have included service users aged 16 and over. The 2012 survey was granted approval under section 251 of the NHS Act 2006 from the National Information Governance Board (NIGB) on the basis that 16 and 17 year olds were excluded. Hence the 2011 data has been recalculated to exclude 16-17 year old respondents, to enable fairer comparison of the results. Due to this there may small differences in the results for some questions published here from those published in 2011.

The results are primarily intended for use by NHS trusts to help them improve their performance. The CQC has included data from this survey in its Quality and Risk Profiles to assess compliance with the essential standards set by the government, and has published data for all NHS trusts on the CQC website. The Department of Health will also use the results in measuring performance against a range of indicators.

A set of tables showing the year on year results for each question is available on the CQC website, along with the results for each NHS trust: www.cqc.org.uk/PatientSurveyMentalHealth2012

¹ The results from each trust are given equal weight in calculating the England (national) results. Some trusts have a higher response rate than others and would therefore have a greater influence over the England (national) average. To correct this we apply a 'weight' to the data. As a result of applying this weight, the responses from each trust have an equal influence over the England average, regardless of differences in response rates between trusts. However, please note that tables 1-8 in this document breaking down the results by CPA and survey year are based on unweighted data.

² We used a z-test to compare data between 2011 and 2012. Results are based on two-sided tests with a significance level of 0.05.

The Care Programme Approach

The term 'Care Programme Approach' (CPA) describes the framework that was introduced in 1990 to support and co-ordinate effective mental health care for people with mental health problems in secondary mental health services. Although the policy has been revised over time³, the CPA remains the central approach for co-ordinating the care for people in contact with these services who have more complex mental health needs and who need the support of a multidisciplinary team. The characteristics of those requiring CPA is set out in the policy document, *Refocusing the Care Programme Approach: Policy and Positive Practice Guidance* and trusts should assess individuals needs in accordance with this.

There are likely to be some differences in the experiences of service users for some questions depending on whether they receive community mental health services under the CPA or not. This is partly due to the different service requirements for people on CPA who, as a result, may have different patterns of care. This document presents findings separately where policy guidance sets out differences between the care pathway of those who are on CPA and those who are not.⁴

Forty two percent of the service users who responded to the 2011 survey had their care co-ordinated on CPA.

Summary

This section summarises the key findings from the survey. Where comparisons are possible, it highlights where there have been any statistically significant changes from the 2011 survey and suggests areas where further improvement is required. Some of these results are presented according to whether respondents were on CPA, or not on CPA, due to the reasons set out in the 'Care Programme Approach' section above.

Health and Social Care Workers

The majority of service users were very positive about the health or social care worker that they had seen most recently for their mental health condition with the majority 'definitely' agreeing that:

- They had been listened to carefully (79%)
- Their views had been taken into account (73%)
- They had trust and confidence in the health or social care worker seen most recently (72%)
- They had been treated with respect and dignity (87%)

³ The most recent revision to CPA policy was in 2008 with the publication of Refocusing the Care Programme Approach, available at:

www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuida nce/DH_083647

⁴ Department of Health. *Refocusing the Care Programme Approach: Policy and Positive Practice Guidance*. p.16

• They had enough time to discuss their condition or treatment (72%).

Medications

These results around medication showed no statistically significant changes from the 2011 survey suggesting that there remains scope for improving information provision around medications:

- Fifty six percent said that their views were 'definitely' taken into account regarding decisions about which medication to take and 32% said they were 'to some extent'.
- Forty five percent had been prescribed new medication in the last 12 months. Of these, most said that the purpose of the medication had been explained to them either 'definitely' (68%) or 'to some extent' (26%). However, over a quarter (28%) said that they were not told about possible side effects and 15% said that they were not given information about any new medication in a way that was easy to understand.
- Almost a quarter (23%) of those who had been taking prescribed medication for 12 months or longer said that that an NHS mental health or social care worker had **not** checked how they were getting on with their medication in the last 12 months.

Talking Therapies

Two fifths of respondents (40%) said that they had received talking therapy in the last 12 months, of which 52% 'definitely' found this helpful and 38% found it helpful 'to some extent' leaving a tenth (10%) not finding it helpful.

Care Co-ordinators

The results showed that some respondents say that they do not know who their care co-ordinator or lead professional is:

- The majority of respondents on CPA said that they know who their Care Co-ordinator is (85%) leaving 15% who either do not know (10%) or are unsure (5%)
- Those **not on CPA** are less likely to know who their lead professional is, with 39% saying that either do not know (31%) or were unsure (8%).

Overall, those respondents who know who their care co-ordinator/lead professional is were generally positive and said that:

- They could 'always' contact their care co-ordinator/lead professional if they had a problem (74%)
- Their care co-ordinator/lead professional organises the care and services they receive either 'very well' (61%) or 'quite well' (31%).

Care Plans

When asked about their NHS care plan:

- 13% of respondents **on CPA** said that they do not have one. Of the remainder, 48% 'definitely' understand their NHS care plan and 31% 'to some extent' leaving 8% to say they do not understand it.
- 40% of respondents **not on CPA** said that they do not have one. Of the remainder 27% said that they 'definitely' understand it' and 23%

understand it 'to some extent' leaving 10% who say they do not understand it.

The survey results show that some respondents say they have **not** been given or offered a written or printed copy of their NHS care plan:

- A quarter (25%) of respondents **on CPA** said that they had not been given or offered a written or printed copy of their NHS care plan.
- 45% of respondents **not on CPA** said that they had not been given or offered a written or printed copy of their NHS care plan.

Of all those respondents who had an NHS care plan and who understood what was in it:

- Most said that their views were taken into account when deciding what was in their NHS care plan, either 'definitely' (54%) or 'to some extent' (36%).
- There has been an increase in the proportion to say that their NHS care plan 'definitely' set out their goals from 40% in 2011 to 43% in 2012. Of those respondents whose NHS care plan set out their goals, most thought that NHS mental health services had helped them to start achieving these goals, either 'definitely' (44%) or 'to some extent' (47%).
- Most respondents on CPA said that their NHS care plan covers what they should do if they have a crisis either 'definitely' (60%) or 'to some extent' (26%). For those not on CPA, the proportion to respond 'yes, definitely' was 49% and 'yes, to some extent' was 28%, leaving almost a quarter (23%) to say their NHS care plan did not include this.

Care Reviews

Survey results show that some respondents said they have not had a care review in the last 12 months: 5

- National guidelines recommend yearly reviews for those **on CPA**, however 24% of respondents on CPA said that they had **not** had a care review meeting in the last 12 months, though this is down from 27% in 2011.
- Those **not on CPA** should receive ongoing reviews as their needs require. Almost half (48%) of respondents not on CPA said that they had **not** had a care review in the last 12 months.

Those respondents who have had a care review meeting in the last 12 months reported that:

- They were told they could bring a friend, relative or advocate to it (79%).
- They had the chance to talk to their care co-ordinator about what would happen before the care review meeting (70%).
- They were given the chance to express their views at the care review meeting (69% 'definitely' and 26% 'to some extent').
- They found the care review helpful either 'definitely' (49%) or 'to some extent' (41%).

⁵ Respondents who had been in touch with mental health services for less than a year have been excluded from the base for this question.

• They had discussed whether or not they needed to continue using NHS mental health services (59% 'definitely' and 22% 'to some extent') though 19% said this had not been discussed.

Crisis Care

The survey results showed improvements in access to out of office hours telephone support compared with the 2011 survey:

- There was an increase in the proportion of service users reporting that they had the number of someone to call from their local NHS mental health service out of office hours from 58% in 2011 to 60% in 2012.
- Of those who had a number and had used it, half of respondents (50%) said that they 'definitely' got the help that they wanted when they called this number and 30% 'to some extent'. This leaves a fifth who said that they either did not get the help that they wanted (17%) or could not get through to anyone (3%). (This question is not comparable to 2011 due to a change made to the response categories).

Day to Day Living

Service providers should take into account the social and physical needs of service users in assessments and care planning:⁶

- Just over two thirds of respondents said that someone in NHS mental health services had ever asked them about their **alcohol intake** (68%, up from 67% in 2011).
- Less than half of respondents (49%) said that said that someone in NHS mental health services had ever asked them about their use of **non-prescription drugs**.
- 57% of respondents said that in the last **twelve months**, someone in NHS mental health services had asked them about any **physical health needs** they may have (a new question in 2012).

The survey results suggest that a considerable proportion of respondents would like more support in getting help with **some** aspects of day to day living:

- 36% of respondents who needed support from someone in NHS mental health services with getting help for their **physical health needs** said that they had not received support but would have liked it, up from 31% in 2011.
- 39% of respondents who needed support from someone in NHS mental health services with getting help with their **care responsibilities** said that they had not received support but would have liked it, up from 35% in 2011.

National guidance states that service users receiving care **on CPA** should receive support with employment, housing and finance from mental health services if they need it. For those respondents receiving services **on CPA**, in the last twelve months, and who needed help with these:

⁶ Department of Health. *Refocusing the Care Programme Approach: Policy and Positive Practice Guidance*. p.18

- 34% said that they would have liked support from someone in NHS mental health services in getting help with **finding or keeping work** but did not get this.
- 27% said they would have liked support from someone in NHS mental health services in getting help with **finding or keeping their** accommodation but did not get this.
- 26% said that they would have liked support from someone in NHS mental health services in getting help with **financial advice or benefits** but did not get this.

Although for those respondents **not on CPA**, the focus is on clinical needs rather than providing support for a wider range of needs, policy guidelines state that they should receive a full assessment, 'including risk assessment.'⁷ Some quite large differences between the two groups can be seen with around half of respondents who needed support from someone in NHS mental health services saying that they did not receive this but would have liked this for getting help with:

- finding or keeping work (51%)
- finding or keeping their accommodation (49%)
- financial advice or benefits (47%).

⁷ Department of Health. *Refocusing the Care Programme Approach: Policy and Positive Practice Guidance*. p.16

Full Results

The survey results are discussed in detail below. Where comparisons are possible, this briefing highlights notable changes from the 2011 survey and suggests areas where further improvement is required.

Contact with mental health services

Most respondents (59%) said that they saw someone from NHS mental health services in the last month, with 22% seeing someone within the last 1 to 3 months, 11% within the last 4 to 6 months, 7% in the last 7 to 12 months and 2% said that they had not seen anyone for over 12 months.

Almost a third of service users (31%) stated that they had been in contact with NHS mental health services for more than 10 years, whilst 40% had been in contact for between 1 and 5 years (up from 38% in 2011) and 13% for 6 to 10 years. One in seven (14%) had been in contact for less than a year (down from 15% in 2011). The remainder (2%) said that they are no longer in contact with mental health services.

Health and Social Care Workers

The health or social care worker seen most recently by service users for their mental health condition was a Community Psychiatric Nurse (33%) followed by: Psychiatrist (24%), Mental Health Support Worker (16%), Social Worker (8%), Psychologist (7%), Psychotherapist (4%), Occupational Therapist (3%) and 'other' workers (6%).

The majority of service users responded positively to questions about the health or social care worker that they had seen most recently:

- Seventy nine percent felt that they had 'definitely' been listened to carefully and 17% said that they had 'to some extent'.
- Almost three quarters (73%, down from 74% in 2011) stated that this person had 'definitely' taken their views into account and 22% said this was the case 'to some extent'.
- Seventy two percent said that they 'definitely' had trust and confidence in the person that they had seen and 21% responded 'to some extent'.
- Eighty seven percent said that they had 'definitely' been treated with respect and dignity and 11% said they had 'to some extent'.
- Seventy two percent said that they were 'definitely' given enough time to discuss their condition and treatment and 20% said that they were 'to some extent'.

Medications

The results for questions around medications showed no statistically significant changes from the 2011 survey suggesting that there remains scope for improving information provision around medications.

The majority of respondents (90%, up from 89% in 2011) said that they had taken prescribed medication for their mental health condition in the last twelve months. Over half (56%) said that their views were 'definitely' taken into account when deciding which medication to take with 32% responding that they were 'to some extent'.

Over two fifths (45%) of respondents had been prescribed **new** medication in the last 12 months by an NHS mental health worker. Of these:

- More than two thirds of respondents (68%) said that the **purpose** of the medication had 'definitely' been explained to them. Just over a quarter (26%) said that this had been explained 'to some extent'.
- Less than half of respondents (42%) said that they were 'definitely' told about the possible **side effects** of the new medication, with 29% stating they were told 'to some extent'.
- Fifty two percent of service users said they were 'definitely' given **information** about their new medication in a way that was easy to understand and a third (33%) said they were 'to some extent'.

As in 2011, 87% of service users had been taking prescribed medication for 12 months or longer. Over three quarters (77%) of these respondents reported that an NHS mental health or social care worker had checked how they were getting on with their medication in the last 12 months, leaving 23% who said this had not occurred.

Talking Therapies

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There has been increasing emphasis on the importance of providing access to evidence based psychological treatments as part of personalised care planning and this is set out in *Talking Therapies: a four year plan of action*⁸ which accompanies the cross-government mental health strategy, *No health without mental health*. Respondents were asked about their experiences in this area: talking therapies, as defined in the questionnaire, included counselling, cognitive behavioural therapy (CBT), and anxiety management.

Two fifths (40%) of respondents said that they had received talking therapy from NHS mental health services in the last 12 months. Of these, 52% 'definitely' found it helpful and 38% found it helpful 'to some extent'.

Care Co-ordinator or Lead Professional

A care co-ordinator or lead professional is the main point of contact for service users. For those receiving mental health services on CPA, the role of the care co-ordinator is pivotal and involves: keeping in regular contact; co-ordinating and overseeing the service user's care plan and making sure it meets their needs; and liaising with the various professionals and agencies involved in

www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuida nce/DH_123759

their care and treatment. Service users not on CPA should only require the support of one agency and are allocated a 'lead professional' who is responsible for facilitating their care.

When asked if they know who their care co-ordinator or lead professional is, there has been an improvement for those **on CPA**, though a decline is shown for those **not on CPA**:

- The majority of respondents **on CPA** (85%) know who their Care Coordinator is and this is up from 83% in 2011.
- Those **not on CPA** are less likely to know this (60%, down from 62% in 2011) leaving two fifths who either do not know (31%, up from 28% in 2011) or were unsure (8%).

Table 1: Q19. Do you know who your Care Co-ordinator (or lead professional) is?

| CPA Status | Response | Percentage | | Significant |
|-------------------------------|-----------------------|------------|------|---------------------|
| | | 2011 | 2012 | change 2011-2012 |
| On CPA | Yes | 83% | 85% | 1 |
| | No | 12% | 10% | \downarrow |
| | Not sure | 5% | 5% | |
| | Number of respondents | 7054 | 6498 | |
| Not on CPA or status unknown* | Yes | 62% | 60% | \downarrow |
| | No | 28% | 31% | 1 |
| | Not sure | 9% | 8% | |
| | Number of respondents | 9600 | 8831 | |

(answered by all who saw someone from NHS mental health services)

(note not all percentage add up to 100 due to rounding)

 \downarrow indicates a statistically significant decrease

↑ indicates a statistically significant increase

No arrow means that any difference is not statistically significant

*for some respondents trusts' records did not show if they were on CPA or not

Overall for all respondents who know who their care co-ordinator/lead professional is, the majority were generally positive and said that:

- They could 'always' contact their care co-ordinator/lead professional if they had a problem (74%). Twenty three percent said that they could 'sometimes' contact their care co-ordinator, down from 24% in 2011.
- Their care co-ordinator/lead professional organises the care and services they need either 'very well' (61%) or 'quite well' (31%).

Care Plans

A care plan sets out service users' assessed health and social care needs and how these will be met. In line with national guidance, there are different practice expectations for service users on CPA and those not on CPA. Service users on CPA should have a comprehensive formal written care plan detailing their care and treatment. In the case of those who are not on CPA, there is no formal requirement to have a written care plan or review. However the guidelines recommend that there should be some form of recorded agreement with the service user about how their treatment will be carried out and by whom.

When asked about their NHS care plan, 13% of respondents **on CPA** said that they do not have one (16% in 2011). Of the remainder, over half understand their NHS care plan, either 'definitely' (48%, up from 44% in 2011) or 'to some extent' (31%). For those **not on CPA**, two fifths (40%) said that they do not have an NHS care plan. Of the remainder, 27% 'definitely' understand their NHS care plan (29% in 2011) and 23% understand it 'to some extent'.

| CPA Status | Response | Percentage | | Significant |
|-----------------|---------------------------|------------|------|---------------------|
| | | 2011 | 2012 | change 2011-2012 |
| On CPA | Yes, definitely | 44% | 48% | \uparrow |
| | Yes, to some extent | 31% | 31% | |
| | No, I don't understand it | 9% | 8% | \downarrow |
| | I do not have a care plan | 16% | 13% | \downarrow |
| | Number of respondents | 6286 | 5781 | |
| Not on CPA or | Yes, definitely | 29% | 27% | \downarrow |
| status unknown* | Yes, to some extent | 23% | 23% | |
| | No, I don't understand it | 8% | 10% | \uparrow |
| | I do not have a care plan | 39% | 40% | |
| | Number of respondents | 8417 | 7617 | |

 Table 2: Q22 Do you understand what is in your NHS care plan?

 (answered by all who saw someone from NHS mental health services)

(note not all percentage add up to 100 due to rounding)

 \downarrow indicates a statistically significant decrease

↑ indicates a statistically significant increase

No arrow means that any difference is not statistically significant

*for some respondents trusts' records did not show if they were on CPA or not

There has been an increase in the proportion of respondents **on CPA** to say that they were given or offered a written or printed copy of their NHS care plan in the last year from 56% in 2011 to 60% in 2012. There have been corresponding decreases in the proportions to say that they were either given or offered a copy more than one year ago (17% in 2011 and 15% in 2012) or that they were not given or offered a copy of their NHS care plan (27% in 2011 and 25% in 2012).

Of those respondents **not on CPA**, over half said they had been given or offered a written or printed copy of their NHS care plan, either in the last year (39%) or more than a year ago (16%). More than two fifths (45%) said that they had not been given or offered a copy, an increase from 43% in 2011.

Table 3: Q27 Have you been given (or offered) a written or printed copy of your NHS care plan?

| CPA Status | Response | Percentage | | Significant |
|-------------------------------|-----------------------------|------------|------|---------------------|
| | | 2011 | 2012 | change 2011-2012 |
| On CPA | Yes, in the last year | 56% | 60% | \uparrow |
| | Yes, more than one year ago | 17% | 15% | \rightarrow |
| | No | 27% | 25% | \rightarrow |
| | Number of respondents | 5185 | 4882 | |
| Not on CPA or status unknown* | Yes, in the last year | 41% | 39% | |
| | Yes, more than one year ago | 16% | 16% | |
| | No | 43% | 45% | \uparrow |
| | Number of respondents | 5105 | 4501 | |

(answered by all who had a care plan)

(note not all percentage add up to 100 due to rounding)

 \downarrow indicates a statistically significant decrease

↑ indicates a statistically significant increase

No arrow means that any difference is not statistically significant

*for some respondents trusts' records did not show if they were on CPA or not

Of all those respondents who had an NHS care plan and who understood what was in it:

- Fifty four percent said that their views were 'definitely' taken into account when deciding what was in their NHS care plan and 36% responded 'to some extent' (36%).
- Forty three percent said that their NHS care plan 'definitely' set out their goals, up from 40% in 2011. A further 40% said 'yes, to some extent'.
- Of those whose NHS care plan set out their goals, 44% of service users said that NHS mental health services had 'definitely' helped them start achieving these goals and 47% said they had 'to some extent'.

All service users on CPA should have explicit crisis and contingency plans set out in their NHS care plan which explains what they should do in a crisis (for example, if they are not coping or if they may need to be admitted to a mental health ward). Although there is not the same policy requirement for service users not on CPA, they should be aware of who to contact in the event of a crisis. When asked if their NHS care plan covered what they should do in a crisis:

- There has been an improvement in the proportion of those **on CPA** to respond 'yes definitely' from 56% in 2011 to 60% in 2012.
- There has been no change from 2011 in the results for those **not on CPA** with less than half (49%) responding 'yes, definitely.'

Table 4: Q26 Does your NHS care plan cover what you should do if you have a crisis (e.g. if you are not coping or if you may need to be admitted to a mental health ward)?

| CPA Status | Response | Perce | entage | Significant |
|-----------------------------|-----------------------|-------|--------|---------------------|
| | | 2011 | 2012 | change 2011-2012 |
| On CPA | Yes, definitely | 56% | 60% | \uparrow |
| | Yes, to some extent | 28% | 26% | |
| | No | 17% | 13% | \downarrow |
| | Number of respondents | 5142 | 4869 | |
| Not on CPA or | Yes, definitely | 49% | 49% | |
| status unknown [*] | Yes, to some extent | 28% | 28% | |
| | No | 23% | 23% | |
| | Number of respondents | 5005 | 4378 | |

(answered by all who had a care plan and who understood what was in it)

(note not all percentage add up to 100 due to rounding)

↓ indicates a statistically significant decrease

↓ indicates a statistically significant increase

No arrow means that any difference is not statistically significant

*for some respondents trusts' records did not show if they were on CPA or not

Care Reviews

A care review is a meeting between a service user and those involved with their care to discuss their needs and review their care plan. Policy guidelines suggest that service users receiving care on CPA should receive a formal review at least once a year, although this could be needed more regularly. Those not on CPA should receive ongoing reviews as their needs require. However, the survey results show that some respondents say that they have not received this:⁹

- For those **on CPA**, 24% said that they had **not** had a care review meeting in the last 12 months to discuss their care, though this is an improvement from 27% in 2011.
- For those **not on CPA**, 48% said that they had not had a care review meeting in the last 12 months.

⁹ Respondents who had been in touch with mental health services for less than a year have been excluded from the base for this question.

Table 5: Q28 In the last 12 months have you had a care review meetingto discuss your care?

| CPA Status | Response | Perce | Percentage | |
|-------------------------------|---|-------|------------|---------------------|
| | | 2011 | 2012 | change 2011-2012 |
| On CPA | Yes, I have had more than one | 40% | 42% | <u>↑</u> |
| | Yes, I have had one | 33% | 34% | |
| | No, I have not had a care review in the last12 months | 27% | 24% | \downarrow |
| | Number of respondents | 6306 | 5231 | |
| Not on CPA or status unknown* | Yes, I have had more than one | 27% | 27% | |
| | Yes, I have had one | 25% | 25% | |
| | No, I have not had a care review in the last12 months | 48% | 48% | |
| | Number of respondents | 8261 | 6358 | |

(answered by all who saw someone from NHS mental health services)

(note not all percentage add up to 100 due to rounding)

Respondents who have been in touch with mental health services for less than a year have been excluded from this question

↓ indicates a statistically significant decrease

↑ indicates a statistically significant increase

No arrow means that any difference is not statistically significant

*for some respondents trusts' records did not show if they were on CPA or not

Those respondents who have had a care review meeting in the last 12 months reported that:

- They were told they could bring a friend, relative or advocate to it (79%).
- They had the chance to talk to their care co-ordinator before the care review meeting about what would happen (70%).
- They were given the chance to express their views at the care review meeting, either 'definitely' (69%) or 'to some extent' (26%).
- They found the meeting helpful, either 'definitely' (49%) or 'to some extent' (41%).
- They 'definitely' (59%) or 'to some extent' (22%) discussed whether they needed to continue using NHS mental health services.

Crisis Care

The survey results showed improvements in access to telephone support out of office hours compared with the 2011 survey: there was an increase in the proportion of service users reporting that they had the number of from their local NHS mental health service that they could phone outside of office hours from 58% in 2011 to 60% in 2012.

Of those who had a number, 37% had called it in the last twelve months. Half (50%) of the respondents who had called this number said that they 'definitely'

got the help they wanted and 30% said they did 'to some extent'. The remainder said they either did not get the help they needed (17%) or could not get through to anyone (3%). This question is not comparable to 2011 due to a change made to the response categories.

Day to Day Living

The Care Programme Approach requires service providers to take into account the social and physical needs of service users in assessments and care planning.⁷

- Just over two thirds of respondents said that someone in NHS mental health services had ever asked them about their **alcohol intake** (68%, up from 67% in 2011).
- Less than half of respondents (49%) said that said that someone in NHS mental health services had ever asked them about their use of **non-prescription drugs**.
- Fifty seven percent said that in the last **twelve months**, someone in mental health services had asked them about any **physical health needs** they may have (a new question in 2012).

The survey results suggest that a considerable proportion of respondents would like more support in getting help with **some** aspects of day to day living.

Of those respondents with physical health needs, almost two thirds said that they had received support from someone in NHS mental health services in getting help with their physical health needs in the last twelve months either definitely (34%) or 'to some extent' (31%, down from 34% in 2011). There has been an increase in the proportion of respondents to say that they did not receive any support but they would have liked this from 31% in 2011 to 36% in 2012.

Of those respondents with caring responsibilities, 61% of service users said that they received support from someone in NHS mental health services in getting help with this in the last twelve months, either 'definitely' (30%) or 'to some extent' (31%, down from 34% in 2011). There has been an increase in the proportion of respondents to say that they did not receive any support but they would have liked this from 35% in 2011 to 39% in 2012.

National guidance states that service users receiving care **on CPA** should receive support with employment, housing and finance from mental health services, if they need it. These needs should be identified in an initial assessment which should cover all needs and risks to the service user.¹⁰

Two thirds (66%) of respondents **on CPA** who wanted support said that they had received help from someone in mental health services in the last twelve months with finding or keeping work, either 'definitely' (34%) or 'to some

¹⁰ Department of Health. *Refocusing the Care Programme Approach: Policy and Positive Practice Guidance*. p.18

extent' (32%). Over a third (34%) said that they would have liked support but did not receive any.

Table 6: Q42 In the last 12 months, have you received support from anyone in NHS mental health services in getting help with finding or keeping work (e.g. being referred to an employment scheme)?

(answered by all who saw someone from NHS mental health services. Respondents who said that they do not need any help have been excluded)

| CPA Status | Response | Percentage | | Significant |
|---|----------------------------|------------|------|---------------------|
| | | 2011 | 2012 | change 2011-2012 |
| On CPA | Yes, definitely | 31% | 34% | |
| | Yes, to some extent | 34% | 32% | |
| | No, but I would have liked | 35% | 34% | |
| | support | | | |
| | Number of respondents | 1739 | 1685 | |
| Not on CPA or status unknown [*] | Yes, definitely | 23% | 22% | |
| | Yes, to some extent | 29% | 26% | |
| | No, but I would have liked | 48% | 51% | |
| | support | | | |
| | Number of respondents | 1894 | 1695 | |

(note not all percentage add up to 100 due to rounding)

indicates a statistically significant decrease

↑ indicates a statistically significant increase

No arrow means that any difference is not statistically significant

*for some respondents trusts' records did not show if they were on CPA or not

Seventy three percent of service users **on CPA** reported they had received support from someone in the NHS mental health services in getting help with finding and/or keeping their accommodation in the last twelve months, either 'definitely' (45%) or 'to some extent' (28%). This leaves just over a quarter (27%) who would have liked this support but did not receive it.

Table 7: Q43. In the last 12 months, have you received support from anyone in NHS mental health services in getting help with finding and/or keeping your accommodation?

| CPA Status | Response | Perce | Percentage | |
|------------------------------------|------------------------------------|-------|------------|---------------------|
| | | 2011 | 2012 | change 2011-2012 |
| On CPA | Yes, definitely | 44% | 45% | |
| | Yes, to some extent | 29% | 28% | |
| | No, but I would have liked support | 27% | 27% | |
| | Number of respondents | 2248 | 2164 | |
| Not on CPA or status unknown | Yes, definitely | 28% | 28% | |
| | Yes, to some extent | 24% | 22% | |
| | No, but I would have liked support | 48% | 49% | |
| | Number of respondents | 2002 | 1745 | |

(answered by all who saw someone from NHS mental health services. Respondents who said that they do not need any help have been excluded)

(note not all percentage add up to 100 due to rounding)

↓ indicates a statistically significant decrease

↑ indicates a statistically significant increase No arrow means that any difference is not statistically significant

*for some respondents trusts' records did not show if they were on CPA or not

Almost three quarters (74%) of respondents **on CPA** who wanted support said that they had received help from someone in mental health services in getting financial advice or benefits (such as Housing Benefit, Income Support or Disability Living Allowance) in the last twelve months, either 'definitely' (46%) or 'to some extent' (28%). This leaves just over a quarter (26%) who said that they had not received any support but would have liked some.

Table 8: Q44. In the last 12 months, have you received support from anyone in NHS mental health services in getting help with financial advice or benefits?

(answered by all who saw someone from NHS mental health services. Respondents who said that they do not need any help have been excluded)

| CPA Status | Response | Perce | entage | Significant |
|------------------------------------|----------------------------|-------|--------|---------------------|
| | | 2011 | 2012 | change 2011-2012 |
| On CPA | Yes, definitely | 47% | 46% | |
| | Yes, to some extent | 26% | 28% | |
| | No, but I would have liked | 27% | 26% | |
| | support | | | |
| | Number of respondents | 3943 | 3735 | |
| Not on CPA or status unknown | Yes, definitely | 30% | 29% | |
| | Yes, to some extent | 24% | 24% | |
| | No, but I would have liked | 46% | 47% | |
| | support | | | |
| | Number of respondents | 4264 | 3906 | |

(note not all percentage add up to 100 due to rounding)

 \downarrow indicates a statistically significant decrease

↑ indicates a statistically significant increase

No arrow means that any difference is not statistically significant

*for some respondents trusts' records did not show if they were on CPA or not

Although for those respondents **not on CPA**, the focus is on clinical needs rather than providing support for a wider range of needs, policy guidelines state that they should receive a full assessment 'including risk assessment' to identify if they have these needs.¹¹ Some quite large differences in the results for these questions between the two groups can be seen with around half of respondents who wanted support from someone in NHS mental health services saying that they did not receive this but would have liked this for getting help with:

- Finding or keeping work (51%).
- Finding or keeping their accommodation (49%).
- Financial advice or benefits (47%).

Overall

Respondents were asked to rate the overall care they received from mental health services in the last 12 months: 30% said it was 'excellent', 30% 'very good', 20% 'good', 12% 'fair' (13% in 2011), 5% 'poor' and 4% said it was 'very poor'.

Half (50%) of all respondents said that NHS mental health services 'definitely' involved a member of their family or someone else close to them as much as

¹¹ Department of Health. *Refocusing the Care Programme Approach: Policy and Positive Practice Guidance*. p.16

they would like, up from 49% in 2011. Just over a quarter (27%) responded 'to some extent'.

Further information

The full national results for the 2012 survey are on the CQC website, together with an A to Z list to view the results for each trust (alongside the technical document outlining the methodology and the scoring applied to each question):

www.cqc.org.uk/PatientSurveyMentalHealth2012

The results for the 2010 and the 2011 community mental health survey can be found on the NHS surveys website at: **www.nhssurveys.org/surveys/290**

Full details of the methodology of the survey can be found at: **www.nhssurveys.org/**

More information on the programme of NHS patient surveys is available at: www.cqc.org.uk/public/reports-surveys-and-reviews/surveys

More information on Quality and Risk Profiles (QRP) can be found at: www.cqc.org.uk/organisations-we-regulate/registered-services/qualityand-risk-profiles-qrps