

Improving Mental Health in Portsmouth - workshop one results

The workshop:

Workshop one was delivered across three locations in Portsmouth: Portsmouth Central Library, Cosham Community Centre, and The Holiday Inn Hotel in Southsea. Attendees included people with lived experience, carers, and staff from across Health and Social Care.

Attendees were given an overview of the Improving Mental Health in Portsmouth project, including the background and context of the Community Mental Health Framework. The scope of the workshop was specifically focused on "access and short-term support", some supporting diagrams were provided to support attendees with understanding the scope of the workshop.

Attendees were sat in groups and asked three questions which they responded to as part of a group discussion. Facilitators supported the discussion and took notes to ensure all feedback was captured. Attendees were then asked to agree which items discussed were their "top three", these "top three" were then summarised on separate pages and placed on the wall of the room for everyone to see. At the end of the workshop attendees were invited to vote on which of the "top three" from each discussion they considered to be the best ideas or most important.


The feedback captured at these workshops is below. The project group will analyse this feedback and use it to form the basis of the discussion for the next workshop, due to take place in May.

Question one:


If you or a loved one needs mental health support for the first time...

- How do you, or other people in the community, know what to do?
- Where can people get information from?
- Where do people go? Who do they talk to? How easy is it to get to the right place first time?
- What are the difficulties in accessing the right help?
- How might we improve this?
- How can we make sure our communities can access the right support when they need it?


You said:




Mental Health Peers in various locations across the community



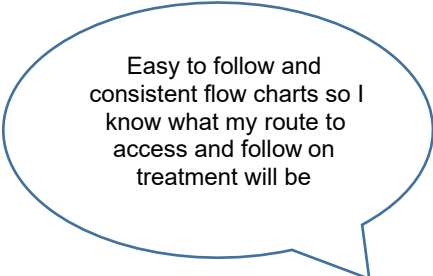
A single point of access phonenumber for Mental Health




At my GP Practice (supported by someone who is not my GP)



Utilise technology and join up systems



Easy to follow and consistent flow charts so I know what my route to access and follow on treatment will be



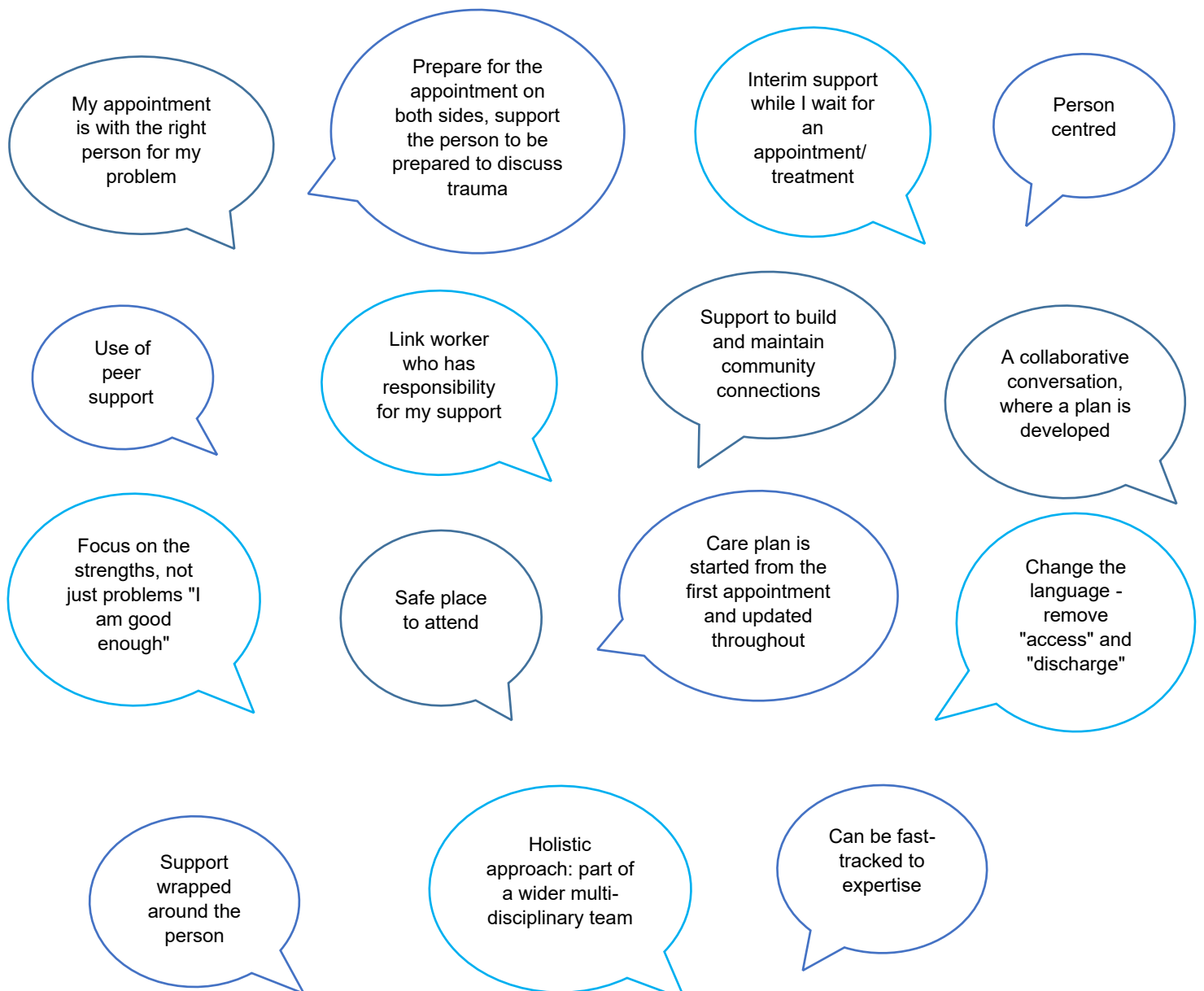
An online hub / App

Question two:

At the Initial Appointment...

- Who is or would be helpful at this time? Talking therapy, peer support, treatment by a healthcare team? Anything else?
- How would you/do patients like to access services:
 - Digital, face-to-face, self-led online, groups etc
- What type of support should be offered? Talking therapy, occupational therapy, peer support, practical support, medication.
- For how long should a service be provided? At what point should a service come to an end?
- How would you like decisions about support and treatment to be made?
- What would a great service look and feel like?
- What would be a great service offer?

You said:

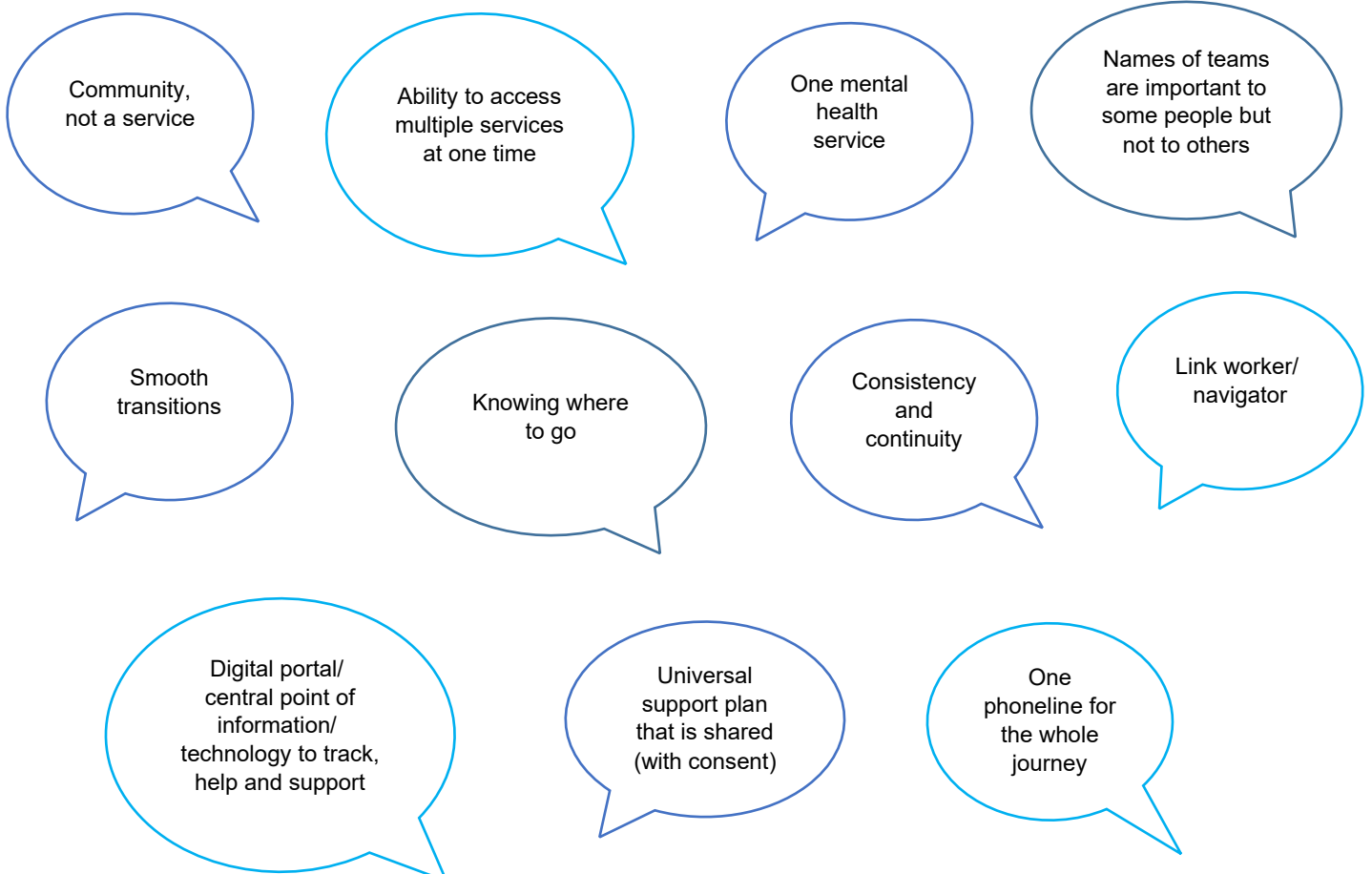


Question three:

When moving between services...

- Following an initial appointment, how do people move on to receive ongoing care and support?
- Does this feel joined up?
 - If not, why not?
 - What might make a difference?
- How important are team names? Do people using services care? Would it be better just to refer to all services as mental health services?
- How do people move between differing intensity of support?
- How does it feel when people are discharged back to their GP?
- What would make this better?
- What would need to happen to ensure people receive support again quickly when needed?

You said:



Other feedback captured:

Question one

How do you, or other people in the community, know what to do?

- Word of mouth
- Education settings
- Job centre/housing
- Health Visitors/Midwives
- Faith Leaders
- Street Pastors
- GP first
- Young people = online first
- Speak to family and friends
- Use lived experience
- Employers (Mental Health First Aiders)

Where can people get information from?

- GP
- Talking Change
- Emergency services
- Social media
- Community organisations
- Samaritans
- Employers (Mental Health First Aiders)
- Food projects
- 111 Mental Health Practitioners
- Safe Havens
- Charity shops
- Care agencies
- Community centres

Where do people go? Who do they talk to? How easy is it to get to the right place first time?

- So many services - which one should be used?
- Difficulties getting an appointment with GP
- Family and friends
- Education settings
- Job centre/Housing Health Visitors/Midwives
- Faith Leaders
- Street Pastors

What are the difficulties in accessing the right help?

- No joined up system including IT, communication
- No continuation of care
- No communication regarding dual diagnosis
- Consent
- GP can be a blocker
- Substance misuse joining up
- Individual feels worthless
- Difficulties getting an appointment with GP
- It is a complex journey to accept something is wrong and help is needed
- Confusing terminology
- Can feel ashamed or scared
- Feeling not recognised or validated

How might we improve this?

- Needs a sympathetic response
- Local good news sharing
- Provide neuro-diverse service
- Peers
- PositiveMinds expansion and drop-ins
- Be an expert, listen to me
- One assessment, tell story once
- "Health out of Mental Health"
- Upskill the first line support
- Join up IT
- In reach Mental Health Workers
- Join up services - co-locate them
- Use of Voluntary, Community and Social Enterprise when an individual doesn't want to engage
- Increase social prescribers
- Use of non-statutory help

How can we make sure our communities can access the right support when they need it?

- Choice
- Increase individuals' confidence
- Use of experts
- Utilise pharmacies for initial support/point of access, expand Mental Health First Aiders for Pharmacists and use as a trusted referrer. Talking Change could provide the training
- Single point of access to help you find the right person to speak to
- Single point of access phone number
- No wrong referrer
- Advice line
- App/online
- HIVE Portsmouth
- Portsmouth City Council website
- GP website
- Earlier intervention, with a dual approach with physical health (not always physical first)
- GP practices used differently, not just to see GP but mental health focused support
- Clear, promoted pathway
- Translation services offered at appointments
- Community focus rather than medical, use of peers and social solutions instead
- Personal Health Budgets
- Whole family approach
- Holistic support (not just looking at medical mental health support)

Question 2

Who is or would be helpful at this time?

- Social Prescribers
- Best person for the needs
- Has a good understanding who knows all of the options
- Expert knowledge & a champion
- Care navigator
- Joint services assessment with staff joint working around person model

How would you/do patients like to access services?

- Appointment reminders
- Tell story only once
- Have access to own records
- Central hub i.e. PositiveMinds with holistic support and advice
- Digital app to include care plan, passport, menu of support, big white wall
- Quick access
- Improved patient choice and flexibility (face-to-face, digital, close to home, comfort, safe)
- Generic form with a clear pathway
- Drop-ins to inform of services and provide safe space

What type of support should be offered?

- Tools to keep well
- Check-ins
- Peers in waiting areas
- One telephone support
- Only ask what is relevant, focus on the here and now
- Assertive outreach to help support attendance

How long should a service be provided?

- Goal focused time frame not time limits
- Remove the work discharge/people to stay open virtually to avoid re-referral
- As long as is needed

How would you like decisions about support and treatment to be made?

- Jointly
- Honest and open
- Consent to share information with family/friends
- Collaboratively

What would a great service look and feel like?

- Less steps to get to the right person
- Passport
- Increase confidence and feel good enough
- Cultural sensitivity
- Person-centred/collaborative
- Feeling heard
- Prepare person for conversation
- Compassion
- More joined-up working
- Hope offered by peers
- Support alongside initial appointment
- Listen to person
- Less form filling

What would be a great service offer?

- Interim support whilst waiting
- No eligibility criteria
- Support bus around city

Question 3**Following an initial appointment, how do people move on to receive ongoing care and support?**

- Moved to a waiting list
- GP

Does this feel joined up? If not, why?

- Services need to be more joined up

What might make a difference?

- Clear communication so person knows and understands what will happen next
- Need directory of services and kept up to date
- Admin processes should sit in background and not include service user
- Holistic
- Person is empowered to lead
- Person-centred, what is important to them
- Information sharing
- All should be prepared
- Menu to choose from
- Educate the community, reduce bullying and increase kindness
- Pre-recorded courses as an option instead of group class
- Access when needed
- When people are on waiting lists, touch base
- Triage by a person with expert knowledge
- Handover for me
- Continuity of services when moving in/out of area

How important are team names?

- Clear names/services
- Consistency of a person rather than a "team"
- Navigator - wider than mental health
- Names don't matter
- Names matter to some people

How do people move between differing intensity of support?

- Warm transfer to other services, peers to be a link alongside
- Peer support sit alongside check ins
- "Referrals" are obstacles
- Professionals to have more knowledge of the community offer
- Navigator
- Signposting

How does it feel when people are discharged back to their GP?

- GP is not the right place necessarily
- People don't like the word "discharge" - feels like the end
- Lose continuity

What would make this better?

- Hub always there
- Positive signposting
- Making it easy to return to the right place for increased support
- One assessment that travels with you
- Don't lose continuity

What would need to happen to ensure people receive support again quickly when needed?

- Multiple professionals working with the person at the same time with a named lead who has most contact with individual
- Multi-agency multi-disciplinary team scheduled or when needed
- The option to receive different interventions at the same time
- Choice
- Ageless - 16+
- App containing recovery plan including a chat function
- WhatsApp
- Align physical and mental health treatment
- One system