

Mental Health Matters Public Consultation

CONSULTATION PERIOD

5 FEBRUARY – 2 MAY

Contents

| | | |
|----|---|----|
| 1. | About this document | 3 |
| 2. | Foreword | 4 |
| 3. | Developing mental health services: the background | |
| | The journey so far | 5 |
| 4. | Our proposal for future services | |
| | How the proposals were developed | 6 |
| | The proposals | 6 |
| | What will the new services look like? | 7 |
| | Similarities, changes and improvements – child & adolescent | 7 |
| | Similarities, changes and improvements – adult | 8 |
| | Similarities, changes and improvements – system wide | 11 |
| 5. | Get involved – have your say on our plans | 12 |
| 6. | What happens next? | 14 |
| 7. | Appendices | |
| | Appendix 1: List of stakeholders involved in developing these proposals | 15 |
| | Appendix 2: What difference will a new model make for people | 16 |
| | Appendix 3: Better Care Southampton – proposed cluster organisation | 17 |
| | Appendix 4: Context: national and local mental health priorities | 18 |
| | Appendix 5: Glossary | 19 |
| 8. | Feedback form | |
| | Share your views | 21 |
| | Child and adolescent mental health services | 21 |
| | Adult mental health services | 23 |
| | Some details about you | 25 |

Katy Bartolomeo

Senior Commissioner
Southampton Integrated Commissioning Unit

If you need further copies of this document or need it in a different format please contact Amanda.Luker@Southamptoncityccg.nhs.uk or telephone 023 8072 5568

1. About this document

This consultation document has been produced by NHS Southampton City Clinical Commissioning Group (CCG) and Southampton City Council. We would like your views on proposals to change the way mental health services are provided in Southampton. The proposals have been developed following feedback from service users, carers, GPs and other interested parties as a result of engagement work during August and through to October 2015.

Southampton Integrated Commissioning Unit (ICU) is a joint team for Southampton City CCG and the Council, and is responsible for identifying which services the people of Southampton want and need and for commissioning (which means planning, buying, and checking) these services on their behalf.

Southern Health NHS Foundation Trust is the main provider of working age and older adult specialist mental health services in Southampton.

Solent NHS Trust is the main provider of child and adolescent mental health services (CAMHS) in Southampton.

Dorset Healthcare University NHS Foundation Trust is the main provider of primary care psychological therapies in Southampton.

Solent NHS Trust work in partnership with **CRI***, **Society of St James**, alongside **No Limits**, to provide Southampton's integrated drug and alcohol recovery service. *From 1 April 2016, CRI is changing its name to change, grow, live (cgl).

Glossary of special terms or unfamiliar words

Words used in this document, or at events and meetings, which have special meaning or may be unfamiliar, are defined in the glossary on page 19.

Getting this document in a different language or format

If you would like this document in another language or format, please contact us on the details below. Please remember to include a telephone number or address so we can get back to you:

Amanda Luker
Commissioner
Telephone: 023 8072 5568
Amanda.Luker@Southamptoncityccg.nhs.uk



Time to Change – ending mental health discrimination

The NHS and the Council in Southampton support Time to Change, a national campaign led by Mind and Rethink aimed at ending the discrimination faced by people who experience mental health problems. For more information, please visit www.time-to-change.org.uk

2. Foreword

NHS Southampton City CCG and Southampton City Council are responsible for making sure that local people get the health and social care services they need. We are allocated a budget to achieve this and must use it to plan and buy services.

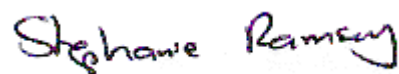
This review has been undertaken in order to make improvements in the quality and outcomes in mental health services.

Mental health has also been identified as a potential focus area in the Right Care programme of work, which looks at information that measures the investment, activity and outcomes, this information tells us that improvements need to be made.


For these reasons, we have undertaken widespread engagement to hear the views of service users, experts by experience, carers, clinicians, and voluntary sector organisations. The feedback received during the engagement period has helped us to shape the proposals set out in this public consultation.

We are now seeking your views to check that we have the detail in these proposals right before we make any decisions, please take a look at the information in this document and send us your thoughts.

We look forward to hearing from you.



Stephanie Ramsey, Director of Quality and Integration



“The CCG is responsible for making sure that local people get the health services they need, and we are committed to ensuring that services which assess and treat mental health conditions are of the same high standard as those for physical health. Mental Health Matters will ensure that people in the city that require mental health support get access to the services they need, when they need it, with the outcomes they deserve”

***Dr Sue Robinson, Clinical Chair,
NHS Southampton City CCG***

3. Developing mental health services: the background

Each year one in four of us will experience a mental health problem. Most of us will know someone who is experiencing or has experienced mental health problems.

The journey so far

Our priority across Southampton City Council and Southampton City CCG is to ensure that those people in Southampton who require mental health support get access to the services they need, when they need it, with the outcomes they deserve.

An initiative led by the Health and Wellbeing Board, a Mental Health Matters event took place in late 2014 which sought to hear people's views in relation to the city's mental health services. The main feedback from this event was that people wanted an opportunity to be part of the review of mental health provision, and have a 'blank page' approach.

This was followed by an engagement period on the Mental Health Matters initiative that set out proposals for the future of all age mental health services in the city. This ran from 6 August 2015 to 16 October 2015.

Service user and carer feedback represented 58% of the responses received. Feedback was overwhelmingly positive for a new model of care for Southampton, and included many valuable suggestions and things to consider. The full engagement report is available on the CCG website.

www.southamptoncityccg.nhs.uk

The proposals detailed in this document will come into effect throughout 2016 and onwards into 2017. In the meantime we are committed to working with colleagues to maintain and improve mental health services in the city to ensure they are of the highest quality, and that people receive the treatment they expect and deserve.

This review is being undertaken in a time of considerable financial challenge. We want to concentrate our investment where it is most needed, for example on helping people to maintain or recover their mental health outside hospitals as much as possible.

We are committed to working with all partners to ensure that we achieve best value from all our investment and this will mean shifting resources to respond to what people have told us, what works and what gives the best outcomes.

The scope of the proposals and this public consultation excludes rehabilitation services, as these will be included in further work which includes supported accommodation.

An equality impact assessment has been completed with contribution from the Equality Reference Group to assess the impact of the proposals, and this is available on the CCG website.

4. Our proposal for future services

How the proposals were developed

We have used all of the feedback obtained locally through the engagement; additionally we have looked at good practice elsewhere and identified a number of features which are included in our proposals.

The proposals

The diagram below shows the range of services that we are looking to include in a comprehensive mental health service. There will be some new services, some of the services will stay the same, and others will change and be improved.



What will the new services look like?

We believe the proposed model will provide better care for people with mental health needs, but in some ways is not radically different from the system that currently exists. The table below gives an indication of what the key similarities, changes and improvements will be.

It is evident that some of the major changes and improvements are about culture and ethos. We do not believe that the changes will cause any disadvantage or adverse impact, the equality impact assessment supports this and we welcome your comments.

| Child and adolescent mental health services | |
|---|--|
| Similarities | Changes / Improvements |
| Family navigator role will continue to provide support to families where children or young people's attendance or attainment in education is impacted by health issues | Family navigators will be extended to include mental health navigation, providing support to patients and carers in the form of information about services in the community which can support families with mental health problems. |
| Headstart is a new project which helps children in Southampton develop the skills they need to deal with worry and anxiety, the scheme also provides emotional wellbeing training to parents, teachers and school staff | Stronger links will be made with the Headstart project which is working in schools and youth settings to develop prevention and early intervention approaches for children and young people. Along with enabling young people to access the right services quickly, by learning positive ways of coping with these common issues, children are more likely to feel able to deal with challenges in life and succeed in their education. |
| You will still have access to child and adolescent mental health services psychological therapies and No Limits counselling | Development of a young person's improving access to psychological therapies (IAPT) service which will include a better range of therapeutic and recovery focussed support. |
| You will still have access to the same range of services currently available in both child and adolescent mental health services and adult mental health services | Child and adolescent mental health services will have the flexibility to provide services for the age range 0-25 years, which is an increase from the current age range of 0-18 years. Eligibility criteria will be reviewed and improvements made to provide better transition from child to adult services. A 0-25 years' service will involve joint working between child and adult services. |

| Similarities | Changes / Improvements |
|---|---|
| You will still be able to access community eating disorder services through CAMHS | Development of dedicated community eating disorder services for young people in line with national guidance. |
| | In line with national guidance; improved perinatal mental health which provides support for women who are at risk of developing mental health problems during pregnancy and the first year post pregnancy, as well as those considering becoming pregnant. |
| | Employment workers will link into child and adolescent mental health services and No Limits to support those in further education or transitioning into employment. |
| | <p>Carers will be included and involved in discussions about treatment and care of their loved ones, and will be offered more support and education in their caring role.</p> <p>This will include access to community navigators (a way of linking people up to activities and services in the community that they may benefit from, including non-medical services providing social, practical or emotional support).</p> |

| Adult mental health services | |
|--|---|
| Similarities | Changes / Improvements |
| You will still be able to access mental health services through your GP practice | In addition to accessing services through your GP practice you will be able to seek information and support through a range of local community settings. All mental health services will be easier to access and the crisis service will be responsive and available 24 hours a day, 7 days a week. The development of a model of crisis care linked to Better Care Southampton community hubs is being considered. |
| You will still be able to access 'talking therapies' | There is already increased availability of face to face treatment, and the expansion of group treatment programmes across the service will continue. |

| Similarities | Changes / Improvements |
|---|--|
| <p>You will still have access to psychiatrists, community psychiatric nurses and other specialist mental health professionals when you need them</p> | <p>More of your care will be delivered through joint working with your GP. Specialist mental health staff will support GPs and primary care and provide more effective services at your GP practice and at a local level. This means specialist staff such as nurses and social workers will work some of the time in local settings such as your GP practice.</p> |
| <p>Your GP will still be able to refer you to more specialist services if you need them</p> | <p>You, and your GP, will be confident that these services will respond effectively and rapidly to your needs. Services will include rather than exclude – that means they will respond positively to the needs of people rather than having narrow referral criteria.</p> |
| | <p>Services will actively adopt an ‘ageless’ approach to enable an individual’s needs to be best met. This means that care and support will be provided based on need and not age alone.</p> |
| <p>Community navigators are already available to individuals living with dementia, and a number of schemes to expand this type of service are currently underway in a number of areas</p> | <p>In line with Better Care Southampton, community navigator roles will be developed to provide a way of linking people up to activities and services in the community that they may benefit from, including non-medical services providing social, practical or emotional support. They will have strong links to primary care and will work with people before diagnosis and also support them when they have been transferred to primary care from specialist mental health services.</p> |
| <p>You will still have access Community Mental Health Teams (CMHT) when you need them</p> | <p>CMHTs will be aligned to Better Care Southampton local teams, which mean they will be delivering care closer to your home in a local setting within the cluster (delivered around GP practice populations called clusters).</p> |
| | <p>A better range of therapeutic and recovery focused support, including the development of services and support for personality disorder, with a therapeutic community being considered. A therapeutic community is a specially designed programme where you work with a group of others experiencing mental health problems to support each other to recover.</p> |

| Similarities | Changes / Improvements |
|--|---|
| Work is underway in the community to enhance health and wellbeing | Links will be made to extend current work into mental health support, with the aim of improved access to local community resources, including the development of more peer support groups to address isolation and loneliness. |
| | Services will actively promote recovery, resilience and wellbeing for individuals and they will encourage co-production which means that the patient and clinician will work together to improve the patient's mental health. |
| | Services will be established for adults of working age with developmental disorders such as ADHD, high functioning autism and Asperger's. |
| You will still be able to access a dedicated, supported employment worker who will provide you with early help | Employment workers will work within each Community Mental Health Team; they will provide support to everyone in contact with hospital based or specialised mental health services, including Brief Interventions and Early Intervention Psychosis (EIP). For those who are not in contact with such services there are 18 separate work clubs, community based supported employment and regular employability training delivered within priority areas throughout Southampton as well as employment support provided by IAPT. |
| | Improved access to psychiatric liaison services within Southampton General Hospital will ensure that if you attend A&E, or are admitted for a physical health condition but also have a mental health problem you will be given information and advice about services to meet your mental health needs. |
| | Services will be locally focused and more responsive to the diverse cultural needs of people and communities. |
| | <p>Carers will be included and involved in discussions about treatment and care of their loved ones, and will be offered more support and education in their caring role.</p> <p>This will include access to community navigators (a way of linking people up to activities and services in the community that they may benefit from, including non-medical services providing social, practical or emotional support).</p> |

| System wide | |
|--------------|--|
| Similarities | Changes / Improvements |
| | Greater focus on outcomes (the result or visible effect of an event, intervention or process; any change in a person’s state of health after a period of treatment, ideally improvement in symptoms or resolution of a problem) across all services, specifically a focus on the outcomes that matter most to people. |
| | Creation of Mental Health Alliance where health, social care, community and voluntary organisations will be represented. The alliance will lead development work and improvements across mental health services. The alliance will also take collective responsibility towards the continuation of city wide anti-stigma work, and ensuring mental health is valued equally with physical health. |
| | Health, social care, community and voluntary organisations will consider and contribute towards service user networks being established, funded and supported to play an active role and contribute towards improving services. |
| | There will be greater opportunity for the teams who provide mental health services to work in partnership with voluntary sector organisations. This will form an essential part of local mental health services and will ensure continuity of care for those who use the services. |

“Here in Southampton we are committed to working to support both children and adults with mental health issues and are placing much more focus on early intervention, recovery and resilience. This will enable people throughout the city to have a better quality of life, despite experiencing a mental health problem, and will ensure we’re not simply treating or managing their symptoms”

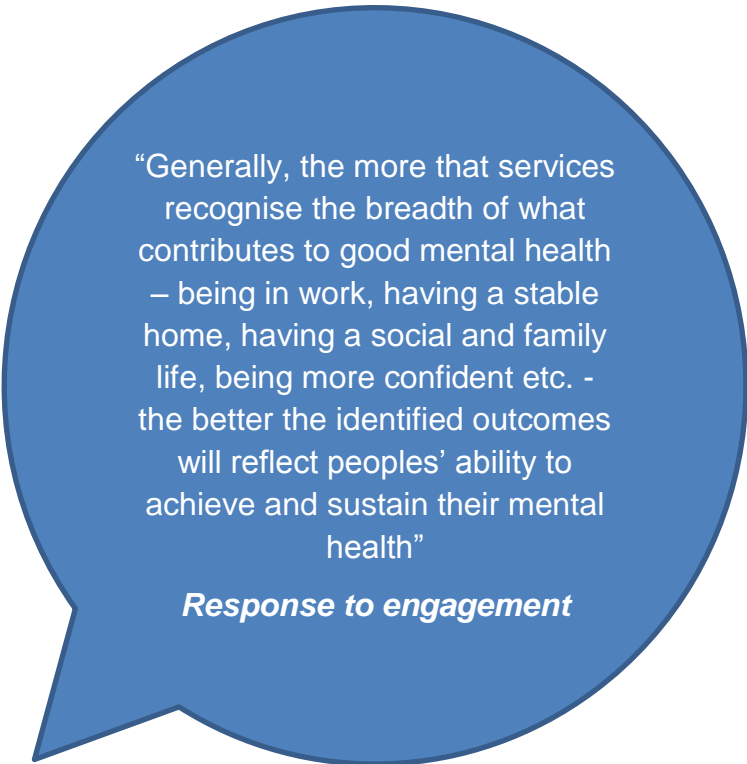
Councillor David Shields, Chair of the Health and Wellbeing Board

5. Get involved

Have your say on our plans

Your views are extremely important and we would like you to get involved by telling us what you think of our plans.

We are keen to hear from as many people as possible, and we will be working with community and voluntary groups to try and involve people whose views are not always heard.



“Generally, the more that services recognise the breadth of what contributes to good mental health – being in work, having a stable home, having a social and family life, being more confident etc. - the better the identified outcomes will reflect peoples’ ability to achieve and sustain their mental health”

Response to engagement

We are asking for your comments on:

- the proposals for future services set out on page 6
- the key similarities and difference or improvements that we have provided on pages 7 to 11
- any other options or ideas that you would like us to consider.

There is a feedback form for you to give your views at the end of this document. There are a number of ways you can find out more, get involved, and tell us what you think.

Please note that this consultation is not asking for feedback on rehabilitation services. We are currently undertaking a review on these services and there will be an opportunity to share your views on rehabilitation at a later date.

Public meetings and events

We will attend as many existing groups and forums as possible to engage with service users, staff and stakeholders. If you would like an individual meeting, or run a community group and would like us to attend and talk about our plans, please call us on 023 8072 5568.

Feedback form

Please use the feedback form at the end of this document to tell us about your views and give comments. Alternatively, you can write, email or telephone:

Amanda Luker
Commissioner
Southampton City CCG
NHS Southampton HQ
Oakley Road
Southampton SO16 4GX

Amanda.Luker@Southamptoncityccg.nhs.uk
Telephone: 023 8072 5568

Online

During the consultation more information will be made available on our website:

www.southamptoncityccg.nhs.uk

You will also be able to give your feedback online.

Deadline for feedback

The public consultation is running from 5 February 2016 to 2 May 2016

The deadline for you to share your views is 12:00 midday on Monday 2 May 2016



6. What happens next?

It is important that this consultation process is transparent and that the NHS is accountable for the decisions it makes.

What happens to the responses?

During the consultation, all the feedback and responses, along with notes of any meetings or forums attended, will be collated and analysed. At the end of the consultation a report will be produced identifying the themes and issues raised.

The report will go to the Commissioning Partnership Board to help them decide how to proceed, and will then follow the NHS Southampton City CCG the Council governance process.

Decision making process

The final decision will be made by the CCG Governing Body, once they have had the time to consider the consultation feedback and responses.


The role of the Health Overview and Scrutiny Panel (HOSP)

The way we have developed our proposals, and the way we will reach a decision on them, is being overseen by Southampton Health Overview and Scrutiny Panel (HOSP) made up of local councillors.

The HOSP has the power to refer both the outcome of the consultation and the decision making process to the Secretary of State for independent review.

The role of Healthwatch Southampton

Healthwatch Southampton is the organisation with statutory responsibility for ensuring the voice of service users and the public is heard. They are responsible for finding out what people think, making recommendations to the people who plan and run services and referring issues to HOSP where they feel it necessary.



“People working in the service were and are very good at their jobs and doing their best, but working within a system that doesn’t enable them to take the time and have a joined up approach”

Respondent to engagement

Appendix 1:

List of groups and organisations we have spoken to in developing these proposals:

- Service users and carers:
 - Steps to Wellbeing Peer Support Group
 - Bipolar Support Group
 - Psychosis Group
 - Depression Alliance Group
 - Homelessness Group
 - Creative Options Group
 - Antelope House peer support worker facilitated service user feedback
 - Children and adolescent mental health services (CAMHS) Attachment Group
 - Attendance within a number of waiting rooms; Brookville, Orchard, College Keep
 - Support group for parents of children and young people with eating disorders
 - Teen Safe House project
- Carers in Southampton
- Members of the Mental Health Partnership Board
- Southampton GPs
- Southern Health NHS Foundation Trust
- Solent NHS Trust
- Dorset University NHS Foundation Trust
- Healthwatch Southampton
- No Limits
- Solent Mind services, and service user forum
- Supporting people housing providers
- Providers of Southampton drug and alcohol recovery service
- Southampton City Council housing teams
- Southampton City Council employment
- Members of 0-19 Board
- Members of the Headstart project group and providers
- Members of Southampton mental health forum
- Southampton schools
- Youth Options
- Members of the equality and diversity reference group
- Members of Consult and Challenge

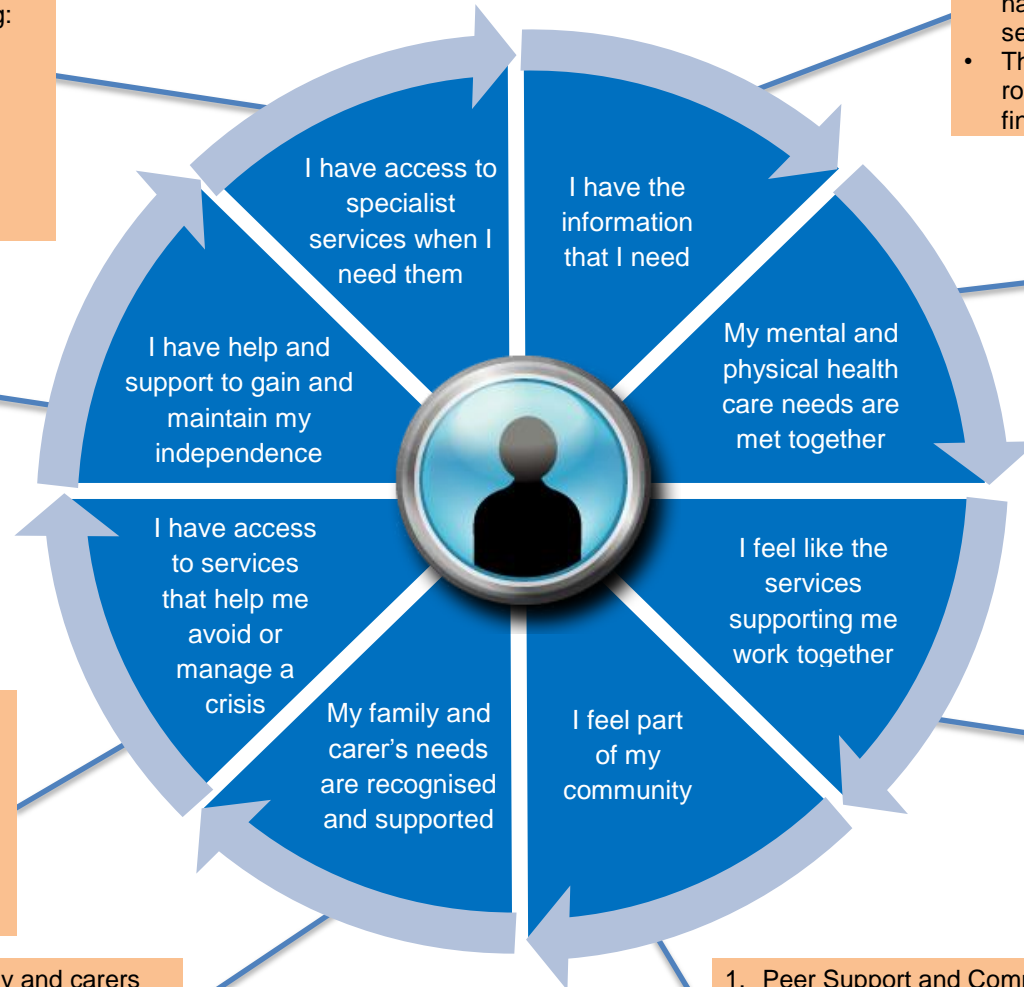
Appendix 2: What difference will a new mental health model make for people?

- I am assessed quickly, services will be age appropriate, and there will not be different eligibility criteria for different age groups
- National waiting time standards are met meaning I have timely access to specialist services including:
 - Early intervention in psychosis
 - Community & residential rehabilitation
 - Inpatient beds
 - Eating disorder (all ages)
 - Perinatal
 - Developmental disorder (all ages)
 - CAMHS, BRS, SEND

- My needs are looked at holistically and the recovery ethos is embedded throughout all services
- I am able to have choice and controls over the support I need using personal health budgets and direct payments
- Advocacy is available if I need it
- Services that help me stay independent include:
 - Psychological therapies (all ages)
 - Employment and training
 - Housing support to obtain and maintain accommodation and tenancies

- Early intervention and prevention services help me to avoid a crisis
- Flexible community crisis prevention services work flexibly to increase support when and where I need it
- I have support to avoid hospital admissions
- Services are available when I need them, not just 9-5

- Stronger partnerships between services and family and carers
- Carer assessments and support services are more widely available
- Access to information and support is available for my carers



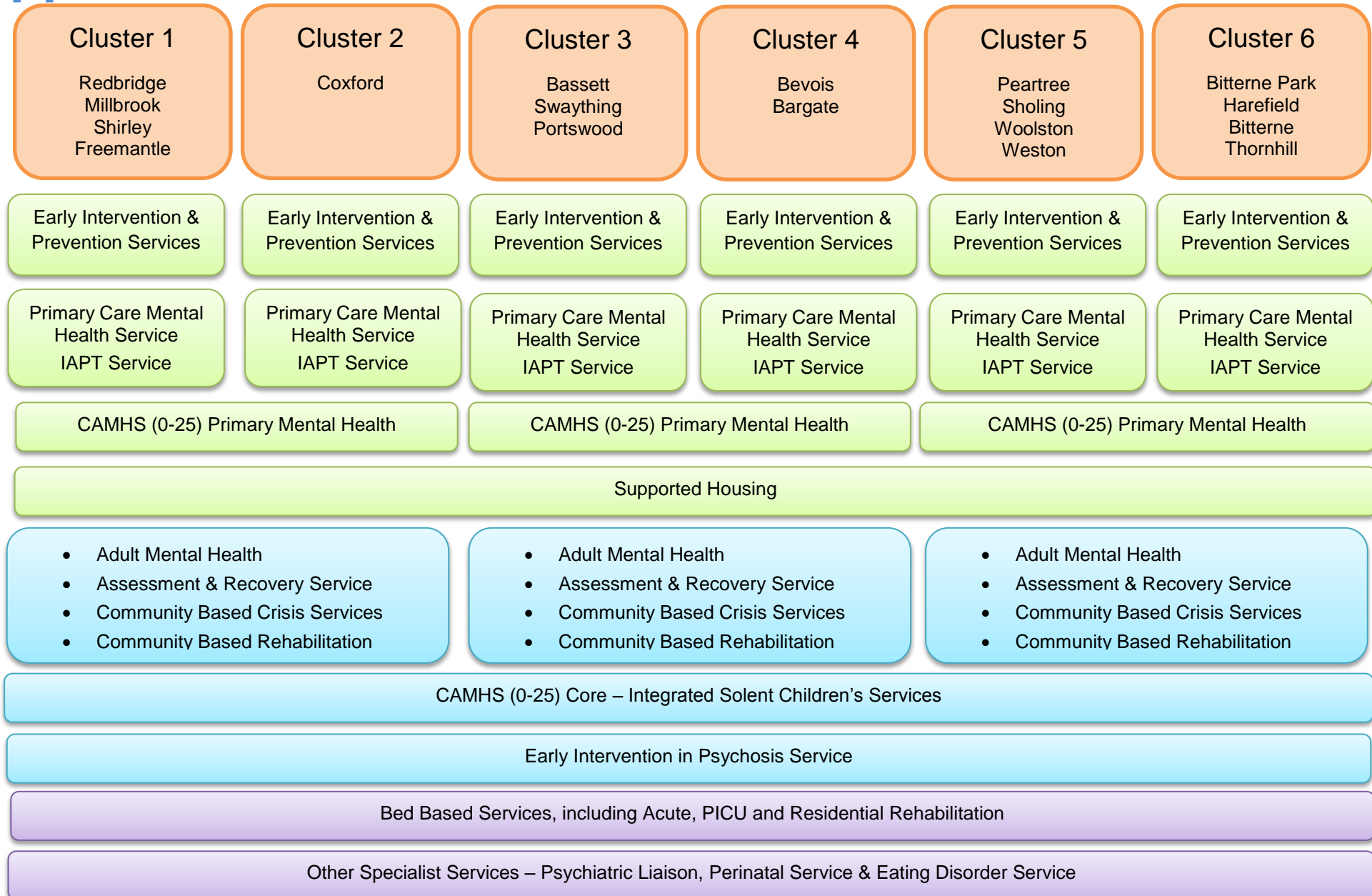
- More people have an awareness of mental health and can provide the help and information I need wherever I go
- There is someone to help me with navigation, advice and signposting to the services I need
- There are clearly defined and accessible routes into services so I know where I can find help when I need it

- Mental health and primary care services develop a shared care plan to support me
- Psychiatric liaison within UHS will help meet mental health needs for adults and children
- Integrated care teams with physical and mental health professionals will work together to deliver the support I need

1. Statutory and voluntary services work as one team to meet my needs
2. Increased integration of services and pooling of budgets will mean I'm not bounced between services
3. Services improve their IT and how they share information about me
4. Better transition between children and adults services
5. Stronger links with schools and education to support younger people

1. Peer Support and Community Navigators help me to access community based services, maintain social networks and be active in the community
2. Services delivered around GP practice populations (called clusters) close to my community

Appendix 3: Better Care Southampton – proposed cluster organisation



Appendix 4:

Context: national and local mental health priorities

The proposals in this document have been developed using the feedback obtained locally through the engagement, and by national and local mental health policies and strategies:

Achieving Better Access to Mental Health Services by 2020, Department of Health, 2014. Introduction of access standards and waiting time standards

Closing the Gap: Priorities for essential change in mental health, Department of Health, January 2014

No Health Without Mental Health: A Cross-Government Mental Health Outcomes Strategy for People of All Ages, Department of Health, February 2011

Everyone Counts, NHS England, December 2013
<http://www.england.nhs.uk/everyonecounts/>

Valuing mental health equally with physical health or “Parity of Esteem”, NHS England, 2013
<http://www.england.nhs.uk/ourwork/qual-clin-lead/pe/>

NHS atlas of variation in healthcare: reducing unwarranted variation to increase value and improve quality, Right Care, 2013

Better Care Southampton, health and social care, along with community and voluntary organisations and other partners working together on a programme to join up your care.

The Mental Health Crisis Care Concordat is a national agreement between services and agencies involved in the care and support of people in crisis.

NICE Clinical Guidelines for mental health (www.nice.org.uk)

Local Transformation Plans for Children and Young People’s Mental Health and Wellbeing, supports improvements in children and young people’s mental health and wellbeing.

The NHS Outcomes Framework, alongside the **Adult Social Care** and **Public Health Outcomes Frameworks**, sits at the heart of the health and care system providing a national overview of how well the NHS is performing, and improves quality throughout the NHS by encouraging a change in culture and behaviour focused on health outcomes not process.

Living well with dementia: A National Dementia Strategy, Department of Health, February 2009

Prime Minister’s challenge on dementia 2020, Department of Health, February 2015

The Care Act 2014, Department of Health, April 2014 provides guidance covering the care needs and rights to support of both adults with social care needs and adult informal or family carers.

Autism Joint Commissioning Strategy Southampton, published December 2015

Appendix 5:

Glossary

We have tried to make sure that we have not used any jargon or unfamiliar words in this document. However, you may come across some words you are not familiar with and may hear some of the following terms used in discussions about the proposals:

Acute - a disorder or symptom that develops suddenly. Acute conditions may or may not be severe and they are usually of short duration.

Adults of working age - adults aged 18-65.

Assessment - a process to identify the needs of an individual and evaluate the impact of their condition on their daily living and quality of life.

Better Care Southampton – health and social care, along with community and voluntary organisations and other partners are working on a programme to join up your care.

Carer - a relative or friend who voluntarily looks after someone who is unwell, disabled, vulnerable or frail, on a part-time or full-time basis.

Child and adolescent mental health services (CAMHS) - services for children and young people under the age of 18 who experience a mental health problem.

Clinician – someone who provides healthcare and treatment to patients, such as a doctor, nurse, psychiatrist or psychologist.

Cluster - services delivered around GP practice populations (called clusters) close to your community.

Commissioners – a team of people responsible for identifying what healthcare services local people want and need and for

commissioning (which means arranging and buying) these services on their behalf from providers such as Southern Health NHS Foundation Trust. The term is usually used to refer to Clinical Commissioning Groups (CCGs).

Community solutions – is an initiative, part of Better Care Southampton, which aims to join up health, social care and the voluntary sector. It is made up of organisations and individuals from across city communities, from residents groups to local charities providing services, support groups and clubs that can enhance health and wellbeing.

Crisis - a mental health crisis is a sudden and intense period of severe mental distress.

Governing Body – the decision-making group representing the GP membership of Southampton City CCG. It is made up of a clinical chairperson, and accountable chief officer, accountable chief finance officer, two lay members, a nurse lead and a secondary care lead.

GP – stands for general practitioner, the doctor based in your local community.

Health and wellbeing board – brings together the local NHS, public health, adult social care and children services to plan how best to meet the needs of local people, and tackle health inequalities. They are hosted by the local authority and members include elected councillors and Healthwatch (see definition below).

Healthwatch – provide information to service users, carers and the public about local health and care services and how to find their way around the system. It represents the views and experiences of service users, carers and the public on health and wellbeing boards (see definition above).

Health Overview and Scrutiny Panel (HOSP) – a Southampton City Council committee made up of local councillors who are responsible for studying the details and implications of decisions about changes to health services, as well as the process used to reach those decisions.

Independent / Voluntary sector – care providers that are private companies, social enterprises, charities or run by volunteers.

Inpatient services – services where the patient/service users stay in hospital accommodation on a ward, and receive treatment there from specialist health professionals.

Outcomes – the result or visible effect of an event, intervention or process; any change in a person's state of health after a period of treatment, ideally improvement in symptoms or resolution of a problem.

Perinatal mental health services – provide support for women who are at risk of developing mental health problems during pregnancy and the first year post pregnancy, as well as those considering becoming pregnant.

Psychotherapy or psychological therapies – treatment of mental and emotional problems such as anxiety, depression or trauma by psychological methods. Patients talk to a therapist about their symptoms and problems with the aim of learning about themselves.

Primary care – services which are the main or first point of contact for patients, usually GPs and pharmacies.

Rehabilitation services – therapy and support designed to restore independence and confidence and reduce disability. Rehabilitation may include occupational therapy to help with the domestic and vocational skills that people need to live independently.

Right Care programme - looks at information that measures the investment, activity and outcomes. This information can tell us which areas are in need of improvement.

Secondary care – hospital or specialised care that a patient is referred to by their GP or other primary care provider.

Service user – this is someone who uses health services. Some people use the terms patient or client instead.

Stakeholder – anyone with an interest in what we do. Stakeholders are individuals, groups or organisations that are affected by the activity of the business.

Stigma – society's negative attitude to people, often caused by lack of understanding. Stigma is a major problem for people who experience mental ill health.

Therapeutic community – therapeutic communities are structured, psychologically informed environments – they are places where the social relationships, structure of the day and different activities together are all designed to help people's health and well-being.

8. Feedback form

Share your views

We are very interested in hearing your views; please take a few minutes to let us know what you think. You do not need to answer all of the questions; just those that you feel are **relevant to you**.

You do not have to provide your name.

To what extent do you agree or disagree with these comments?

| Child and adolescent mental health services | Strongly agree | Agree | Disagree | Strongly disagree | Don't know |
|---|----------------|-------|----------|-------------------|------------|
| Child and adolescent mental health services should cover 0-25 years | | | | | |
| Young persons' improving access to psychological therapies service (IAPT), and community eating disorder services for young people should be developed | | | | | |
| Perinatal mental health which provides support for women who are at risk of developing mental health problems during pregnancy and the first year post pregnancy, as well as those considering becoming pregnant should be improved | | | | | |
| Services should be established for adults of working age for developmental disorders, such as ADHD, high functioning autism and Asperger's | | | | | |
| Mental health services shall be aligned to Better Care Southampton clusters, with care provided closer to my home | | | | | |
| There should be more services that support me outside of secondary care mental health services, such as in primary care or in ordinary community services | | | | | |

| | Strongly agree | Agree | Disagree | Strongly disagree | Don't know |
|--|----------------|-------|----------|-------------------|------------|
| Community navigators should be developed in all settings to help me access a range of services that will allow me to maintain my own health and wellbeing | | | | | |
| There should be improved access to local community resources, including the development of more peer support groups should be part of my care plan | | | | | |
| Carers should have improved access to support and access to education in their caring role, this will be achieved through community navigators and community solutions | | | | | |
| Service user networks and alliances should be developed and they should play an active role in improving services | | | | | |
| Some resources should be shifted from secondary care mental health services into services such as community navigators, peer support groups | | | | | |
| The proposals will improve services | | | | | |
| The proposals focus on the right things | | | | | |

Please tell us about any other options or ideas you would like us to think about in relation to child and adolescent mental health services for the future?

To what extent do you agree or disagree with these comments?

| Adult mental health services | Strongly agree | Agree | Disagree | Strongly disagree | Don't know |
|---|----------------|-------|----------|-------------------|------------|
| Mental health services should be aligned to Better Care Southampton clusters, and should be provided closer to my home in a local setting within the cluster | | | | | |
| There should be more services that support me outside of secondary care mental health services, such as in primary care or in ordinary community services | | | | | |
| Community navigators should be developed in all settings to help me access a range of services that will allow me to maintain my own health and wellbeing | | | | | |
| There should be improved access to local community resources, including the development of more peer support groups should be part of my care plan | | | | | |
| Services should adopt an 'ageless' approach, and my care should be based on my needs and not my age alone | | | | | |
| Perinatal mental health which provides support for women who are at risk of developing mental health problems during pregnancy and the first year post pregnancy, as well as those considering becoming pregnant should be improved | | | | | |
| Services should be established for adults of working age for developmental disorders, such as ADHD, high functioning autism and Asperger's | | | | | |
| Helping me get employment should be part of my care plan | | | | | |

| | Strongly agree | Agree | Disagree | Strongly disagree | Don't know |
|--|----------------|-------|----------|-------------------|------------|
| Carers should have improved access to support and access to education in their caring role, this will be achieved through community navigators and community solutions | | | | | |
| Service user networks and alliances should be developed and they should play an active role in improving services | | | | | |
| Some resources should be shifted from secondary care mental health services into services such as community navigators, peer support groups | | | | | |
| The proposals will improve services | | | | | |
| The proposals focus on the right things | | | | | |

Please tell us about any other options or ideas you would like us to think about in relation to adult mental health services for the future?

Some details about you

We want to make sure that everyone has an opportunity to be part of the review and to contribute towards the design of mental health services in Southampton. To make sure we have reached a wide range of people, it would be helpful if you could provide us with a few confidential details about yourself to help us see who has responded.

Are you?

- A service user A carer A GP or Practice Nurse
 NHS Staff Member Other Representing an organisation

If you chose NHS staff member, which NHS organisation do you work for?

- Southern Health NHS Foundation Trust
 Solent NHS Trust
 University Hospital Southampton NHS Foundation Trust
 Dorset Healthcare University NHS Foundation Trust
 Other NHS organisation

What is your role?

If you chose representing an organisation, please state the organisation:

Please tell us your postcode (first four digits only)

Are you? Male Female Rather not say

What is your age?

- Under 20 20-29 30-39 40-49 50-59
 60-69 70-79 89-89 90+ Rather not say

How would you describe your ethnic group?

- White:** British Irish Any other white background
- Mixed:** White and Black Caribbean White and black African
 White and Asian Any other mixed background
- Asian or Asian British:** Asian Indian Asian Pakistani Asian
 Bangladeshi Any other Asian background
- Black or Black British:** Black African Black Caribbean
 Any other Black background
- Other ethnic groups:** Chinese Other ethnic group
 Rather not say

Thank you for your feedback. The key themes compiled from all the responses will be one of the pieces of evidence that we will consider when making decisions about next steps.

Please return your form to:

Amanda Luker
Integrated Commissioning Unit
NHS Southampton City Clinical Commissioning Group and Southampton City Council
NHS Southampton HQ
Oakley Road
Southampton
SO16 4GX

Comments can also be emailed to: Amanda.Luker@Southamptoncityccg.nhs.uk
The deadline for feedback is 12:00 midday on Monday 2 May 2016.

Thank you for your comments.

Privacy

Any personal information you give to us will always be processed in accordance with the UK Data Protection Act 1998. We will only use the personal information you provide to deliver the services you have requested, or for our lawful, disclosed purposes.

We will not make your personal details available outside our organisation without your consent, unless obliged by law. Please be aware that any comments given on this form may be published in the report. However, Southampton Integrated Commissioning Unit will endeavour to remove any references that could identify individuals or organisations.