

Executive Summary

This report sets out the results of an audit of a research project that was designed, delivered and evaluated by service users and carers in 2009.

The original work entitled “Service User Experience of Mental Health Provision in Leicester and Leicestershire and Rutland” was undertaken by the Service User and Carer Research Audit Network (SUCRAN). In addition the report draws upon evidence gathered from the 2011 Audit of the Mental Health Charter (SUCRAN 2011) and attempts to provide a strong evidence base of service user experience from these 3 studies.

A total sample of 407 mental health service users were interviewed, 173 achieved in the original work and 111 in this audit, across those receiving services from statutory voluntary and independent services throughout Leicester and Leicestershire and Rutland. A further 123 interviews were held to audit and review the Charter for Mental Health (2011) and provide a longitudinal vista of 3 years.

A mixed method was used, enabling quantitative and qualitative information to be gathered as a means to providing conclusive data upon which service providers and commissioners might consider future change.

SUCRAN envisaged the 2009 study would contribute to a shift in the culture of mental health service providers towards service user centred care, moving away from a culture which has been perceived as focussing upon staff needs as a primary goal. To some extent this has been achieved, but whilst this report contains many positive endorsements, there are areas where little progress has been made. This is both concerning and disappointing considering the introduction of the “Charter for Mental Health” (2008) which established organisational priorities and provided a clear set of statements for service users, carers and provider organisations about responsibilities and what should be expected from local mental health services.

The peer status of the interviewers, may have positively influenced the numbers of participants opting into the study, and consequently enhanced the richness by increasing the number and volume of answers. Evidence gathered from Research Interviewers suggested that throughout the whole process, participants felt less intimidated than if the interviewer was a professional, and the method of face to face interviews worked well across the 3 studies.

- **Referral** Over half of participants felt they should have been referred to services earlier than they were.

- **Information and finding out about services.** It appears that information about services is not and has not, been readily available to the range of disciplines who may refer into secondary mental health care, and it is of particular concern that both the GP and the service user's family, may not be in a position to assist an informed understanding because of a paucity of available and appropriate documentation. Help to find out about services appears inconsistent.
- **Medication.** Whilst most participants were taking prescribed medication their knowledge and understanding of what they are taking was reported to be inconsistent as only 33% of respondents feel they have a "good understanding" with over 50% stating they had not been told about side effects.
- **Communication with staff.** Respondents gave some very negative perceptions about how they feel they were treated by staff and despite some improvements from the 2009 study these are of particular concern. However not all participants were negative and some disciplines and services were applauded for the quality of their efforts.
- **Anxiety.** An emergent theme related to service users worries that their current provision would be negatively affected by reductions and "cutbacks" in service.
- **Ethnicity.** The uptake of services and consequently respondents from a Black and Minority Ethnic background is concerning in that, the profile of respondents does not reflect the demography of the City population, although it does reflect the adult mental health population.
- **Employment.** This on-going theme identifies that only 6% of participants were in full time paid employment and over half of participants perceived that they had lost their job as a direct result of their mental health condition.

.Recommendations for Change

- Service providers must consider the availability, quality and accessibility of information about what their service does, and how it goes about its business, for prospective users and carers. This will enable informed choices and better understanding of policy and procedure prior to any formal engagement or admission
- Service providers must consider the positive impact information about medication has on the people who take it, and endeavour to improve opportunities for service users and their carers to become informed.

- Service providers must consider improvements in the choice and alternatives of medication as this treatment modality remains a cornerstone of health intervention in Leicestershire and Rutland.
- Service providers must improve access to staff for one to one discussions about care.
- Service providers must maintain their focus upon Service Users and Carers as customers, ensuring equity in the planning delivery and evaluation of care.
- Service providers must take notice of and act upon the minimum standards set out in the Mental Health Charter, treating people as individuals who are experts by experience and have a great deal to offer in all aspects of the caring relationship.
- The Leicestershire Partnership website should be improved with links to the voluntary sector, although when considering equitable availability of information, it is important to acknowledge that service users are often not in a position to access the internet.

It is envisaged that the outcomes of this work will be considered and further analysed by providers, who may wish to disseminate outcomes for staff about their performance, and SUCRAN hope this will be a change agent for areas that need it. Furthermore, this report provides some very positive perceptions that should be seen as an opportunity to congratulate staff performance in the areas which have been well evaluated.