

Healthwatch East Sussex

August
2015

**Navigating Mental
Health Services in
East Sussex - What
we found out?**



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Executive Summary

This report brings together a summary of what Healthwatch found out during its journey looking at how mental health services in East Sussex meet the needs of local people.

About the Provider - **Sussex Partnership NHS Foundation Trust** provides specialist mental health, in-patient substance misuse and learning disability services. They are an integral part of the health and social care network for the people of Sussex.



Methodology

We held five Listening Events across the county, to hear directly from people who use these services about their experiences; what's good about their service, what roadblocks if any, they encounter and what suggestions they have for any improvements to services. Some key findings included:

- The response of the mental health crisis out of hours service requires closer monitoring; e.g. the general issue of the availability of services at the weekend. Feedback suggests that only the Mental Health line, the Samaritans, and/ or A&E appeared to be available
- There were several references to shortages of local mental health beds for acute patients. These resulted in placements out of county, isolating the patient from family support and increasing the stress on carers. Attendees indicated this to be highly important and possibly a key resource issue

The full report can be viewed here:

<http://www.healthwatcheastsussex.co.uk/our-work/our-reports/>

We signed up to the **East Sussex Crisis Care Concordat** and will use our influence at the **Health and Well-being Board** to ensure action plans are delivered.

We **learnt** about some of the mental

health episodes people experience. Experts from Sussex Partnership NHS Foundation Trust (SPFT) came to talk to us about why some patients require a spectrum of services to meet their mental health needs. This was a particularly useful activity to undertake before we started to engage with people and patients who use services.

We carried out two **Focused activities**; one looking at young people, their families and carers experiences using **Child and Adolescent Mental Health services (CAMHS)**.

We found out that: “it’s a difficult journey, but a fantastic service once you get there”

The full report can be viewed here:

<http://www.healthwatcheastsussex.co.uk/our-work/our-reports/>

There is also a link to East Sussex Child and Adolescent Mental Health Services (CAMHS) Needs Assessment below:

<http://www.eastsussexjsna.org.uk/JsnaSiteAspx/media/jsna-media/documents/comprehensiveneedsassessment/CAMHS-Needs-Assessment-2014.pdf>

The second activity looked at **Telephone Support Services** available for people with mental health needs, particularly in crisis. This service area is also identified as a gap in the Crisis Care Concordat and forms part of their action plan.

Healthwatch East Sussex (HWES) was pleased to learn, after sharing their findings with Sussex Partnership NHS Foundation Trust, a review of the service will be launched.

The full report can be viewed here:

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A series of **Orientation visits** were planned in partnership with SPFT and The Priory Hospital at Ticehurst. These visits enabled staff leading on this project, (authorised visitors and mental health champions) to understand the type of service provided; to hear about some of the challenges and talk to people using the service where possible.

We visited the following services and teams:

- **Care Home In reach Team**
Woodside, The Drive, Hellingly, BN27 4EP
 - **Triage Team** Newhaven
Rehabilitation Centre, Hillrise,
Newhaven, East Sussex BN9 9HH
 - **The Priory Hospital** (Independent provider for adult and young people acute mental health) High Street, Ticehurst, East Sussex, TH5 7HU
- Whilst setting up these visits, we received prompt friendly responses to our requests from senior staff and their administration teams, both at the trust and The Priory Hospital. No service was “off limits” to Healthwatch. Where safeguards needed to be in place (either before the visit or during) due to the needs of the patients, this was all dealt with very efficiently by the staff teams. Our **key findings** include:
- At the **Department of Psychiatry**, we visited the Section 136 suite (Place of Safety). There was a patient using this facility at the time. After permission was obtained from the patient, we entered the suite; the facility was locked, spacious and airy. The person was able to lie down and had access to snacks, drinks and toilet facilities. The person commented that they were being well looked after, although they would have liked a television to be part of the furniture.
 - During our first visit to the **Priory Hospital at Ticehurst** we heard about the challenges in supporting the needs of people who present with personality disorders. This appears to be due to a gap in who commissions and delivers this service.

- **Department of Psychiatry**
(Adults), Kings Drive, Eastbourne, East Sussex, BN21 2UD
- **Chalkhill** (Young People’s inpatient Resource Centre), Princess Royal Hospital Site, Lewes Road, Haywards Heath, West Sussex, RH16 4NQ
- **Woodlands** (Acute Care) Conquest Hospital, The Ridge, St Leonards On Sea, East Sussex, TN37 7PT
- **The Hellingly Centre** (Secure and Forensic Services), The Drive, Hailsham, BN27 4EP

We returned to the Priory Hospital at Ticehurst as part of our focussed activity to engage with young people using that service. On both occasions visitors and our commissioned researcher were made very welcome.

- Our visit to the **Secure and Forensic** service at Hellingly, was largely a very positive experience. Hellingly is a medium secure unit for people between 18 and 65 who have mental health problems and who have become involved with the criminal justice system. It assesses and manages people whose conditions cannot be safely treated other than in a secure or supervised environment.

The centre has four specialist wards; each looked after by staff from a range of different backgrounds. At the beginning of our visit, we followed a robust security process and were offered individual alarms for our safety.

- We found the staff to be knowledgeable and very caring. We heard about excellent examples of regular **Peer Review** meetings happening within the unit and the benefits they made to engaging patients in their care and treatment. The meetings are also used to gather feedback about the service. Healthwatch see these existing patient/peer groups held at the centre, as an opportunity to hear more from patients about their experiences and would want to work with the Trust to follow this up.

- We visited the multi faith room at the centre. The unit has good links with many faiths from the community and the Ward Manager was proud to share how the resource is well respected and used.

- When talking to patients, a patient approached us to share their views about what they believed to be, their inappropriate detention at the centre. The staff did not intervene or steer the conversation in any way, they allowed the individual to have their say and speak with us freely. The individual spoke about all the meetings and multi agencies involved in their case at length. We were assured by the Ward manager that patients have access to systems that seek to resolve any conflicts about their care and treatment; although at the time of the visit, we did not see or were offered to view evidence where this is recorded and acted upon.

- During the visit we observed inconsistencies from staff on the unit adhering to the Locked Door Policy. On five occasions, we observed staff walk away from the door without waiting to check it was securely locked. (There is self-locking mechanism in place in all secure areas). Each time this happened it was reported to the Ward manager who escorted us.

- We were told about the plans to improve facilities at the site. These include a new suite for patients who need to have time away from the ward and communal areas, (Seclusion Rooms) that will include a shower facility (currently not provided). We

were also made aware of a potential concern with some members of staff regarding appropriate siting of furniture i.e. the position of the bed to protect patient's safety and that of the staff.



What else did we find out?

We found when talking to patients in **Accident and Emergency (A & E)** departments, that A & E is not always the best place for people with episodes of mental health crisis to go, but is often where people are signposted to receive help.

<http://www.healthwatcheastsussex.co.uk/our-work/our-reports/>

People also told us, through our work with **Patient Participation Groups in Primary Care** that not all GP's have experience or training when seeing patients with mental health needs.

East Sussex Better Together (ESBT)

Waiting for text HWES invites the ESBT Board to set out how they plan to include people who use or need to access mental health services; including how joined up health and social care services can best meet their needs.

Care Quality Commission (CQC) Report following their Inspection in January 2015 of SPFT services

Here is the link to the CQC reports of all the services inspected. Please note the findings are across the service delivery not specific locations.

<http://www.cqc.org.uk/provider/RX2>



Recommendations

1. **Healthwatch East Sussex** invite **Sussex Partnership Foundation Trust (SPFT)** to respond to the key findings from the orientation visits, including options for follow on activity
2. **East Sussex Healthcare NHS Trust (ESHT)** to update HWES on the progress made towards meeting the needs of people with mental health crisis who present at A & E Departments in acute hospitals
3. For **Crisis Care Concordat Partners** to receive the full reports and update the relevant sections of the Action Plans where appropriate
4. **East Sussex Better Together Programme (ESBT)** to confirm how the shared plan will include people with mental health needs in a sustainable health and social care system over the next five years
5. East Sussex **Child and Adolescent Mental Health Services Needs Assessment** team to receive the full report and respond to HWES on its findings
6. For **Healthwatch East Sussex** to follow up responses and monitor any changes made to services as an outcome of this activity



Disclaimer

Please note that this report relates to findings observed on the specific dates set out in the report. Our report is not a representative portrayal of the experiences of all service users and staff, only n account of what was observed and contributed at the time.



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We will be making this report publicly available by 30th May 2015 by publishing it on our website and circulating it to Healthwatch England, CQC, NHS England, Clinical Commissioning Group/s, Overview and Scrutiny Committee/s, and our local authority.

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