

**Mental Health Community Service Model – outcomes of co-production**

Co-production activities began in July 2022 and remain ongoing.

This report provides a summary of co-production outcomes to date (as at 20.9.22). A range of activities have been undertaken, using different approaches.

**1. Online survey, carried out in partnership with Rotherham and Barnsley Mind**

160 surveys were sent out to a cross section of Mind service users who live in Rotherham and have lived experience of services in their local area.

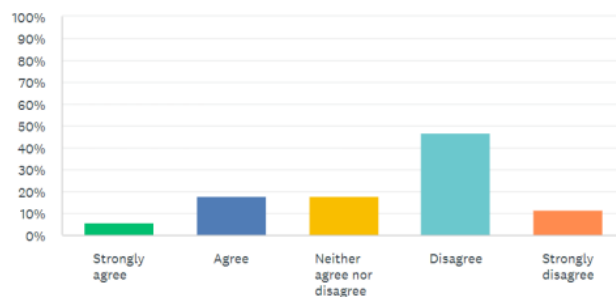
Response rate: 42.5% (68 responses).

Summary of responses:

- 18% said they are currently using other mental health support services (in addition to Mind).
- 35% first accessed mental health support services as a self-referral, 36% were referred by a health professional, 29% other.
- When asked ‘how easy or difficult it was to get the help they needed’, responses included:
  - ‘My referral was through my GP and it was relatively easy’
  - ‘I had to continually chase for updates on my referral’
  - ‘I was on a very long waiting list and had to wait for help’
- When asked whether they ‘feel supported enough to live independently’, 62% of respondents answered yes, 7% no, 31% not applicable.
- When asked how much they agreed with the statement ‘I feel that mental health support services are available and can be accessed when I need them’, 47% disagreed and 11% strongly disagreed (see table 1 below for all responses).

Table 1

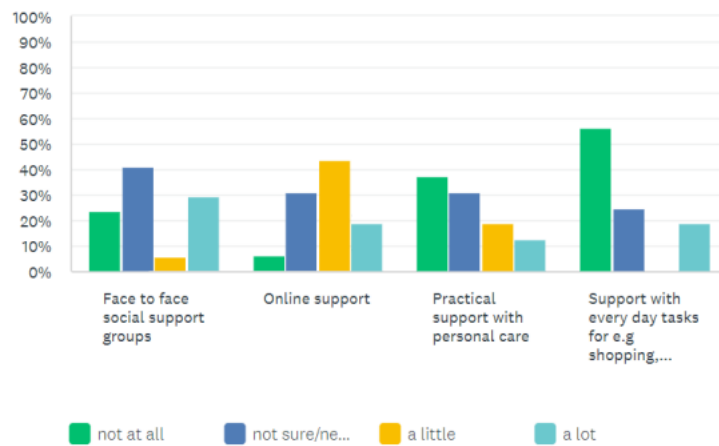
How much do you agree with the following statement: I feel that mental health support services are available and can be accessed when I need them



- Respondents were asked about different activities/services and how much they thought they could help to support or improve their mental health (see table 2 below for all responses):
  - 35% said face to face and social groups would help to support / improve their mental health.
  - 60% said online support would help to support / improve their mental health.
  - 30% said practical support with personal care would help to support / improve their mental health.
  - 18% said support with every day tasks would help a lot to support / improve their mental health.

Table 2

How much would the options below help to support or improve your mental health?



## 2. Face to face group sessions, carried out in partnership with Rotherham and Barnsley Mind

Three group sessions with a total of 38 Mind service users and one group session with 6 Mind staff were held at Mind. Mind staff facilitated the sessions with service users, RMBC commissioning staff facilitated the session with mind staff.

Summary of responses:

### Service user sessions

- Service users feel that there is a lack of awareness of support services that are available to them and this is particularly relevant following a stay in hospital or when supporting someone living independently.
- Attendees talked about a lack of information that is available to know where to turn in a time of need and an over reliance on their GP for support and referrals.
- Most commonly service users are heavily reliant on their family or friends for day to day help with their needs.
- Many service users have challenges with accessing services or support networks due to a lack of digital capability and are therefore unfamiliar with accessing support through websites or don't have equipment to access support networks.
- Timescales and backlogs result in people not being able to access the support they need in a timely fashion. Feedback from all groups commented that time delays were the largest contributor to individuals mental health challenges.
- People expressed their lack of knowledge and that much of their information comes from word of mouth and sharing of experiences from friends, family and neighbours.
- Many service users have challenges accessing information and don't know where to go for support.
- It was thought that many services work in isolation and there is a need for a more joined up approach to better connect people to the help they need through a variety of support networks.

### Mind staff session:

- It was felt that currently there are limited mental health support options available for people.
- Interim crisis support and services to support people after discharge from hospital were felt to be particularly lacking.
- Strong support for more supported living, floating support, the flexible use of hours for home care support, step up /step down support.

- Need for greater information sharing amongst professionals and training across pathways was highlighted.
- Importance of managed peer support groups as preventative services.
- Difficulty reaching out to BAME service users.
- Concern expressed about service users who fall between 'criteria' based support.

### **3. Face to face discussions, carried out by Absolute Advocacy**

Eighteen individual face to face discussions have been held with people receiving acute service provision. The Mind survey was used as a basis for discussions.

Summary of responses:

- Support which was identified by people as being needed to live independently:
  - Keyworker support
  - More places to go and leisure activities
  - Banking and domestic support
  - Help with money and going out
- When asked 'do you feel supported enough to live independently', 39% said no, 44.5% yes, 11% not applicable, 5.5% did not answer.
- 67% said face to face and social groups would help to support / improve their mental health.
- 17% said online support would help to support / improve their mental health.
- 56% said practical support with personal care would help to support / improve their mental health.
- 33% said support with every day tasks would help to support / improve their mental health.
- 44% said 'strongly disagree' and 17% said 'disagree' to 'I feel that mental health support services are available and can be accessed when I need them'.

### **4. Face to face group session with RDASH/RMBC Mental Health Team/Brokerage Support Service staff**

A group session was held with six staff (practitioners / professionals) supporting people living with mental ill health.

Summary of responses:

- Attendees discussed the need for more supported living, floating support, the flexible use of hours for home care support, step up /step down support.
- Importance of understanding the client group and their needs, to ensure the right service is put in place.
- Training standards to be made clear to providers.
- Training needed more widely for staff on services available / pathways.

### **5. Short survey at Rotherham Show, carried out by Rotherham and Barnsley Mind**

82 members of the public were surveyed at the Rotherham Show (3 and 4 Sept).

Summary of responses:

- 38% of people commented that they had suffered with their mental health over the last 2 years.
- The pandemic was referenced as the greatest impact as this had resulted in being separated from loved ones and had impacted job security.

- Of the 38%, 18% had received support through primary care or services such as Mind. Many said they had looked to family and friends for support or had not felt able to talk about the challenges with their mental health.
- Consistently people said that the timescales to receive support are the most significant barrier to receiving help.
- Lack of awareness of services and not knowing where to go for support were also referred to.

## **6. Market engagement event with providers, run by RMBC**

Supported living services registered with the Care Quality Commission were invited to attend a market engagement event on 9 September. 20 people (15 providers) attended. As part of this event, providers were asked what a good supported living service for people with mental ill health looks like, and what barriers they face in delivering a service of this nature to support individuals to achieve their desired outcomes. This feedback will help to inform future service design.