Health Based Place of Safety Survey

The aim of this survey was to gather feedback from service users who had been taken to the Health Based Place of Safety in Devizes following the temporary closure of the facility in Swindon and Wiltshire.

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There was negative publicity around this at the time because of the distance to Devizes. Swindon Clinical Commissioning Group (CCG) felt it was important to speak to service users directly affected by the changes and to understand their experiences.

Healthwatch, because of its role as an independent body, was asked to carry out the survey over the phone with service users living in Swindon and Wiltshire identified by Avon and Wiltshire Mental Health Partnership (AWP). Healthwatch Swindon spoke to those living in Swindon and Healthwatch Wiltshire spoke to Wiltshire residents. The service users had given their consent.

The temporary closure relates to three single place of safety facilities in Swindon and Wiltshire; one at Fountain Way and one at Green Lane. The Health Based Place of Safety at Devizes was a new, larger unit able to accommodate up to four people with a dedicated area for children and young people.

The term 'staff' is used broadly throughout this report. The staff that are referred to are:

- Police who have powers to use a Section 136 under the Mental Health Act, and they will use an ambulance (preferably) or a Police vehicle to take the person to the Health Based Place of Safety.
- AWP mental health staff, nurses and health care workers who work at the Health Based Place of Safety.
- Social workers, Approved Mental Health Practitioners working for the Local Council who lead the mental health assessment.

The CCG was keen to understand from service users if:

- the treatment and care received was appropriate,
- they understood why they were at the Health Based Place of Safety,
- they understood the assessment and subsequent outcome of the assessment,
- the transfer to and from the Health Based Place of Safety was well managed,
- they were treated with dignity and respect and
- the environment at the Health Based Place of Safety was appropriate and what, if any, improvements could be made.



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HEADLINES:

- 1) Over the course of a week we spoke to 13 service users about their experiences of staying at the Health Based Place of Safety, the care they received and whether this was appropriate given the location. We attempted to gather views from another six people, but they either declined to complete the survey or were, for a variety of reasons unreachable. Out of the 13 who did speak to us, one person answered the first question but then decided they did not want to continue. There was opportunity during the course of the phone calls for the service users to expand on the questions they had been asked and provide us with detailed comments about what they thought did and did not work.
- 2) The majority of respondents 8 out of the 13 felt positive about their experience of being taken to the Health Based Place of Safety. If their initial experience was good, for example, how they were treated during the transfer to the facility, then the remainder of their experience was consistent with this. They provided further detailed commentary, some of which also offered constructive criticism around service provision.

A small proportion of respondents reported negative experiences. One of the respondents only answered one question and the other two. Whilst having an overall negative experience did say they understood the outcome of their respective assessments and felt that their transfer out of the Health Based Place of Safety, either to a ward or back home, was well managed. One also said that they understood the information about their mental health assessment but went on to comment, "Didn't feel believed. Has received a letter that doesn't match with further diagnosis. Has since been diagnosed with psychotic depression."

3) A further two service users stated that they felt neutral about the approach of staff and the quality of care. Their answers to subsequent questions about their experiences was a mix of positive and negative. One of the respondents commented on how brilliant the permanent members of staff were, but that the agency staff were in need of more training.

More detail about our findings can be found in the next section of the report and will conclude with Healthwatch recommendations on what can be done to improve service provision for the experience of service users.

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SURVEY FINDINGS:

How was the approach of the mental health professionals whilst at the Health Based Place of Safety?



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Of the eight service users who responded positively, four said the approach of staff and the quality of care were 'very appropriate' and 'very caring', respectively.

Some of the comments received in relation to both of these questions can be seen below:

- "I was not left on my own at all which I found very helpful. There was always someone available to talk to."
- "A very positive experience, however, two of the three doctors who came to my house were very aggressive and in my face. The police officer and the mini bus driver and assistant were brilliant. The Doctor (name removed) from the Place of Safety was brilliant."
- "They tried to calm me down and kept me in the loop to let me know what was happening."
- "I have always been treated with respect, I have been sectioned 6 times. They gave good advice and tried to help me."

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How was the quality of care?



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The other four said the approach of staff was 'appropriate'. Out of this cohort of people, two said the care was 'caring' and the other two said 'very caring'. Additional comments about the quality of care were:

- "I know I was all over the place when I first got admitted. The lady was not very good or helpful at the start. She was a bit blunt but it was quite late. The next morning there was a gentleman and he was fantastic and very helpful. He took his time, and when I had the assessment with psychiatrists, and at my request, he came in with me."
- "Caring at times they had sympathy but at the end of the assessment no further action was taken -I felt that more support could have been offered."

Out of the two people who said they felt 'neutral' about the approach and quality of care they went on to comment:

- "Basically left me to it and I had to constantly ask what was going on."
- "Depended on who you were dealing with. The duty nurse was great, wanted to engage in conversation and wanted to look after my physical and mental health. The agency/temp staff were not so caring."

Two of the service users whose overall experience was negative made these comments about the approach of staff and quality of care:

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- "Was sent to another hospital after assessment because I requested CCTV, when I got there, there was no CCTV, so they lied. At Devizes they asked me to sleep with a towel over door, this is not appropriate, anyone could come in. Other doors also had towels over them."
- "Nurses ok, seemed indifferent. Felt the doctors are hostile in their approach. Felt already made decisions against my records before talking to me. Doctors uncaring, nurses' neutral."

The following recommendations have emerged as result of these comments:

- Communicating openly with the service users so that they know exactly what is happening and what to expect.
- Ensuring that quality of care is consistently high; this is paramount to making service users feel safe and listened to. If this is done correctly from the beginning it is likely the service users will have a positive experience during what is a very difficult time.
- If, and when necessary, follow up after being discharged is crucial, not least so the service user can get on the road to recovery quicker. Where this appears to be lacking our recommendation to AWP will be to ensure this is consistent and that service users are appropriately supported during and after their discharge.

Being transported to the Health Based Place of Safety

Of the 13 people who went to the Health Based Place of Safety nine were taken there by ambulance with most of them saying there were no issues, one finding it a 'bit weird' and another was 'very stressed' by the experience'. The most concerning comment being:

"Went in an ambulance with 2 police officers. I male, 1 female. The female police officer was not good and didn't understand mental health."

Of the two who went to the Health Based Place of Safety in a police van, one did not understand what was happening until a member of staff explained to them what was going on and the other respondent commented that this was 'appropriate at the time'.

One service user was transported by minivan and it was encouraging to read that:

"I was transported by mini bus and the driver and the assistant were brilliant. They stopped halfway so that I could have a cigarette as I was so stressed out."

It is worth noting that all of the responses from the service user who made this comment were of a positive nature. Adding further weight to our previous comments that a positive experience from the start, combined with a caring and welcoming attitude upon admission and during a stay are vital components to providing a high quality service.

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No comments were received regarding the location of the Health Based Place of Safety being inappropriate from either Swindon or Wiltshire service users.

Did service users understand why they were at the Health Based Place of Safety?

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Four responded 'no' to this question and eight responded 'yes'. Of the four who responded 'no', two commented they could not remember what they had been told, with one commenting further that;

"I don't really remember. Don't think so, although they said I could go home or go to another hospital because they have CCTV. I requested CCTV so that I can see what's happened if I'm accused of anything."

Of the eight who answered 'yes' to this question three commented very positively. Of the remaining responses two were neutral, two declined to comment further and one was negative.

Common themes where positive comments had been made were:

- Being 'kept in the loop'
- Being given full explanations
- The quality of the mental health professionals ("The staff were fantastic")

One of the negative comments was:

"The ambulance staff gave me this information not the staff at the Health Based Place of Safety. Once I had been booked in all they were interested in was getting out to continue playing on their phones/watch TV/drink tea and eat biscuits."

The service user who said this went on to comment about the difference in the quality of care provided by permanent staff in comparison to the agency staff, saying:

• "The facility and the permanent members of staff were amazing. Look at the agency/temporary staff and make sure they have the appropriate training."

Were service users able to understand the assessment of their mental health?

Two respondents said 'no' to this question, with one person saying they cannot remember, and another saying that they did not receive an assessment whilst there.

The remaining eight who responded to this question were generally positive. It was explained to most of them which mental health professionals they would see.

One service user with literacy issues found the assessment difficult to understand. It was not clear from further comments, which were a mix of positive and negative, if staff subsequently tried to help them with this issue.

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The most negative comment was from a service user who said that although they understood the assessment, they did not 'feel believed'. They also said in other comments throughout the survey that it was a 'character assassination' and that 'minds had already been made up'. They 'didn't feel listened' to nor that they had been asked about their low moods. There was an overall sense that this service user felt disempowered by their experience. They were also one of two service users who stated a preference for remaining at the facility in Swindon because in their opinion 'it wasn't so intimidating'.

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By contrast the other service user who would have preferred to be in Swindon was one of the four who felt the approach of the mental health professionals was 'very appropriate'. Their comment on this particular point was:

"Have been sectioned 6 times, some are good, some not so good. I get confused as to where I am. I really would like to be in Swindon, close to home, but at the time of crisis I am not really aware."

Were service users able to understand the outcomes of the assessment?

Ten of the service users said 'yes' to this. One said 'no', with one not providing further commentary. The other saying that the professionals were trying to keep them positive with a focus on what they could do in the future.

Eight of the ten felt that the outcomes had been fully explained to them with the other two stating the following;

"I was told that I would be discharged with a referral to PCLS, however, this has not happened and the incident was in Oct/Nov time and I have still not heard anything. Wiltshire do not offer psychiatric support which does not help me to deal with the reasons why it happened."

And:

"Options of coming home or going to another hospital. Was in the other hospital for one night then taken back home. They didn't have CCTV, so they had lied to me."

Did service users feel the transfer out of the Health Based Place of Safety and back home or to a ward was well handled?

Six responded 'yes' to this question and three said 'no'. One comment highlighted a swift follow up by the mental health crisis team after discharge was:

"They got me a taxi home. I was told to call the mental health crisis team when I got home and they came out to my home that evening"

One service user indicated that there was some confusion about whether or not their partner was coming to pick them up - they did not want them to - and it was agreed they would take the bus. There was, however, an hour long wait to resolve this which made the experience of being discharged a stressful one for them.

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Another servicer user said:

"I was not sure where I was going after the 136 as waiting for an available bed either in Devizes or Salisbury"

Key recommendations from these findings are:

- Agreeing on how the service user is discharged is as seamless as possible with minimal wait times.
- Ensuring staff are in agreement over how the discharge is done before consulting with the service user to minimise potential distress.
- Ensuring that those being transferred to another ward, or site, are kept informed of progress. In addition to this service users are kept informed of when and where they are going, and how they will be transferred.

Did service users feel they were treated with dignity and respect?

Two of the service users said 'no' and were unequivocal in their responses, with one of them saying that they were 'treated better by the porter'.

Seven of the service users said 'yes' and the overall sentiment from them was that whilst some could do better and be more welcoming, they did treat them with dignity and respect.

Did service users feel the environment of the Health Based Place of Safety was appropriate?

Three answered 'no' to this, with one citing the fact that they witnessed a violent outburst whilst there, although this was quickly stopped by staff. Another saying 'it felt like a prison from the outside'.

Six people responded with a 'yes', with one acknowledging that there was a genuine reason for them being there and as result the setting was appropriate. Others commented that it was quiet, 'sometimes eerily so' and one saying that Swindon felt 'too claustrophobic and made me more anxious'.

How did service users feel the Health Based Place of Safety could be improved?

One person said that staff could be more welcoming and another said they were not given a pillow or a blanket and that it was cold. Another, whose overall experience was negative, said:

"Very difficult question - keeping someone safe and making it look comfortable. Not really sure how to answer. Think it's a good idea that they let you vape. Would really like to smoke - especially when you are in this situation."

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Another service user thought it was better than Swindon. Another, whose overall experience was positive, and in keeping with this sentiment, answered 'no' to this question, and said:

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"It made me feel that I don't want to go back there. It was a good place to get sorted and I'm on the road to recovery now under the Recovery Team rather than the Crisis Team."

To conclude, Healthwatch recognise that the mental health professionals and other staff, such as the police, work hard and provide an invaluable service under what can often be trying circumstances.

It is therefore encouraging to read the positive comments made by the service users. Where negative feedback has been given these should be taken on board and the necessary improvements made, where possible.

SUMMARY OF RECOMMENDATIONS:

- A common theme which emerged was that service users did not feel fully informed. We would recommend that staff are open with the service users and give them as much information as possible throughout each stage.
- Ensure that, if necessary, the service user is given support to understand their assessment, for example, one service user given a written assessment had literacy problems.
- Ensure the Health Based Place of Safety is welcoming and the quality of care is consistently high. Healthwatch recognise that that most of the feedback was positive and that staff work hard to ensure service users feel safe during a very difficult time.
- Include service users in discussions about their situation (where possible) to give them a sense of control over what is happening to them.
- Provide basic mental health training for police officers and non-clinical front line staff to ensure that they are able to respond to someone having a mental health crisis appropriately.
- Provide more training for agency staff ensuring it is consistent with permanent staff.
- Ensure that the service user understands their assessment at the point of discharge and know when and how they will be discharged.
- Ensure that recommendations of treatments or referrals are followed through, where necessary.

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COMMENT FROM PROVIDERS:

Avon and Wiltshire Mental Health Partnership (AWP) NHS Trust responded:

"We have worked closely with Healthwatch to ensure the views and opinions of those who have used the Health based Place of Safety were represented as part of the consultation undertaken by Swindon and Wiltshire Clinical Commissioning Groups (CCGs).

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"We welcome the findings of the report and thank Healthwatch for their feedback and recommendations. Hearing from our service users about their experiences is extremely useful and their feedback will form part of the final recommendations for NHS England and NHS Improvement, who will make the final decision regarding future provision of Health based Places of Safety within the AWP area."

Feedback from Wiltshire Police

"We are pleased to see that the feedback is generally positive. Wiltshire Police have introduced the two day mental health training package from the College of Policing and the People Development department is continuing to roll this out to all frontline officers. Training for police officers is however just a small piece of the jigsaw and improved access to healthcare through the provision at the Bluebell Unit for those in mental health crisis is essential, so that use of police powers (Section 136) under the Mental Health Act is only ever as a last resort".

Healthwatch Swindon recognises the limitations of drawing significant conclusions from feedback received from a small cohort of respondents. This is due to the fact the Home Based Place of Safety is only used by a small number of people and where it has been necessary to section them under the Mental Health Act.

Healthwatch Swindon would like to thank the service users and all staff involved in sharing views and gathering information for the purposes of this report.