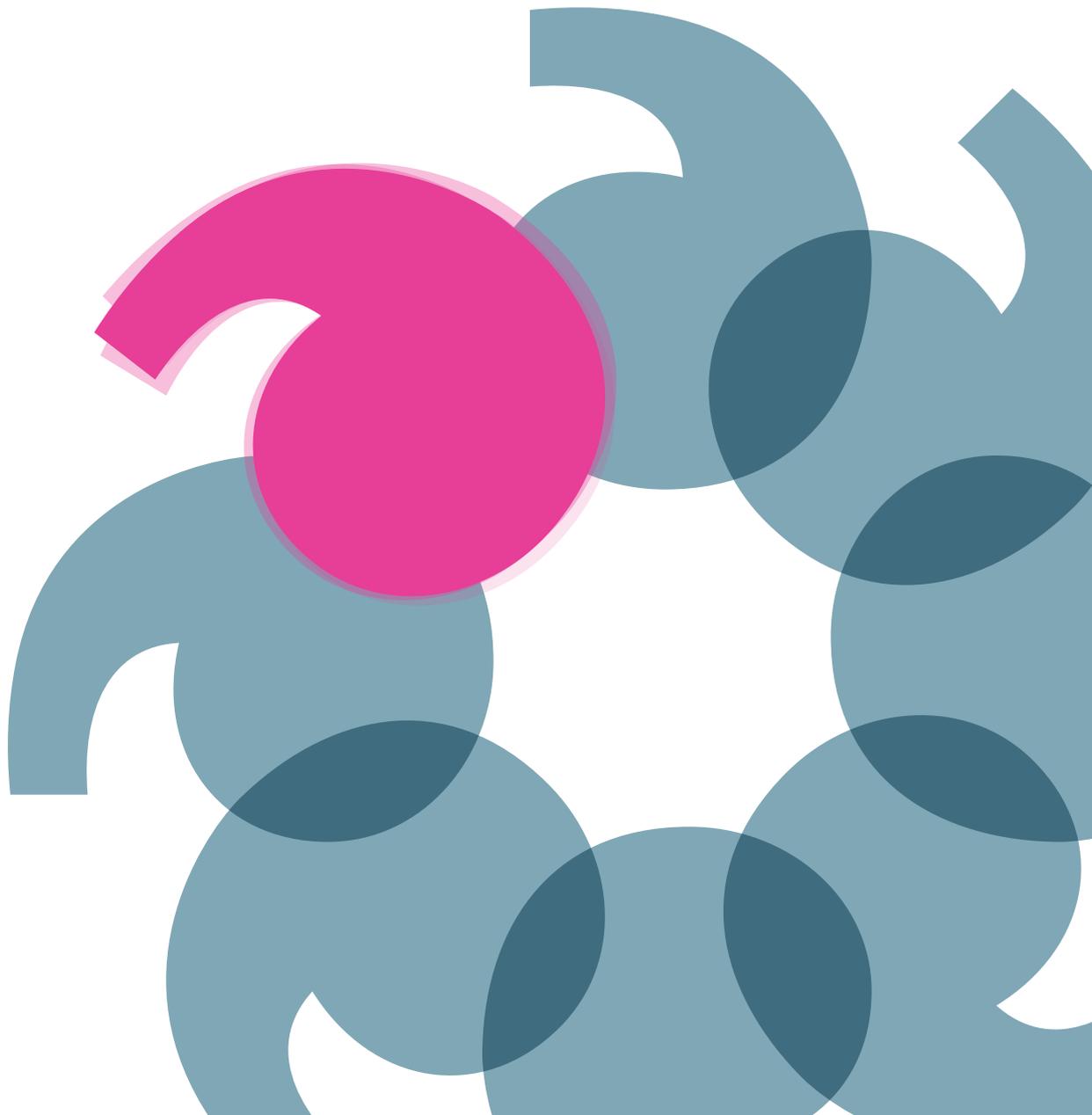


Gathering views

Mental Health Day Service Provision in Islington



Healthwatch Islington

Healthwatch Islington is an independent organisation led by volunteers from the local community. It is part of a national network of Healthwatch organisations that involve people of all ages and all sections of the community.

Healthwatch Islington gathers local people's views on the health and social care services that they use. We make sure those views are taken into account when decisions are taken on how services will look in the future, and how they can be improved.

www.healthwatchislington.co.uk

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Introduction

In 2017, the council contacted Healthwatch about gathering views to feed in to the commissioning of mental health day services. This report is written independently by Healthwatch Islington.

The services:

Mind Spa, Ashley Road
Mind Hub, Despard Road
Mind Empower, Southwood Smith Street

What's on offer:

- ▶ A range of specific activities run by a combination of volunteers, staff and peers covering art, writing, films, music, reading etc,
- ▶ Group therapy sessions focussed on self-management of specific mental health conditions,
- ▶ One-to-one counselling sessions (donation-based),
- ▶ An affordable hot meal (free on Wednesdays) available at different centres on different days,
- ▶ 'Drop-in' sessions: Although service users can drop in to all activities without booking (except the IT course), the term 'drop-in' here is used to describe sessions where services users can simply turn up at the centres knowing that other users and staff will be on hand for company and conversation.
- ▶ One centre has a shower and washing machines, there was a pool table, computers were available at all centres, and one centre has a fully equipped music studio.
- ▶ Several respondents mentioned being able to get support with benefits information and form filling.

Healthwatch Islington had also spoken to service users in 2016. The report is available here:
http://www.healthwatchislington.co.uk/sites/default/files/islington_mind_enter_and_view.pdf

The council want to gather service users' views on current provision, engage residents in the development of a service specification, and train residents and service users to be part of a panel to select a service provider.

Who we spoke to

We spoke to 101 service users across the three centres. We spoke to whoever was willing to speak to us. Islington Mind advised us on the best times to visit to get a cross-section of users.

Gender identified	Number (out of 101)	Islington average
Female	49	51%
Male	51	49%

Ethnicity	Number (out of 101)	Islington average
Asian	4	9%
Black African/ Caribbean	28	10%
White British	34	48%
Mixed/ Other	32	33%

Age	Number (out of 101)	Islington average
25-64	89	61%
65+	7	9%

A cross section of people were using this preventative service, reflecting services users who can be over-represented in tertiary mental health services.

We didn't ask about financial status directly. 38 respondents reported receiving support accessing benefits and/or mentioned their lack of financial resources in response to the questions about signposting and donations.

Anxiety about the consultation

Respondents were quite anxious about the consultation and the potential for further reductions to these services. In particular, the thought of change, or a break away from what was known and familiar, raised anxiety. Many already experienced anxiety, depression and similar conditions, thus making discussions of a potential change worrying.

Engaging people who may not be current service users

To gather the views of non-service users we also approached two local groups Islington Borough User Group (iBUG) and Hillside Clubhouse. Both work with mental health service users.

Awareness of the services on offer

Most of the 101 respondents using Mind had been referred in to the service by a healthcare professional, either after a stay in hospital for their mental health, or through conversations with their GP.

In the iBUG group, several had used Mind services but in the Hillside group, despite seeking day activities none had found information about the Mind services or remembered being told the information by healthcare professionals. In one example, an individual had called the council's Access and Advice service looking for activities and not been told about the offer.

What people valued about these services

▶ The people

Respondents described the centres as feeling like family, as being a place to see friends, that staff were reliable and caring.

▶ Feeling safe and supported

Many respondents valued the 'safe space' that the centres offered, where they could 'be myself' around other people who understood their condition and may be in a similar situation.

'I'm not able to sustain a job, and haven't been able to for a number of years. I suffer from depression. Coming here gives me an incentive to get up in the morning. It stops me being isolated, stops hospitalisation, and is very supportive.'

Respondent 20

'I really value the service, it's quite central in my life. It supports me and stops me feeling isolated. It helped me recover and now I'm better able to cope.' [Respondent 38]

▶ An informal environment

Respondents appreciated not having to come all the time but having access to 'support when I'm not feeling brilliant' [Respondent 50]. They appreciated knowing that activities were on offer for when they felt well enough to participate, but that they could simply turn up and be around others or get a meal. Many respondents found the service they were using non-institutional.

'The lack of formal structure makes it possible for me to still participate. If I had to attend formal sessions/activities I wouldn't come.' [Respondent 13]

▶ Many respondents particularly valued what were described as drop-in sessions. Attendees can drop in to most activities, but the specific 'drop-in' sessions provide an opportunity for service users to simply turn up and chat to others. What respondents valued about this was that there wasn't pressure to 'do' something specific. They could come along, join in with activities, be around others, talk to others, whatever suited them. The lack of structure to the drop-in was seen as a positive alternative to the activities and therapy sessions. Some also stated that being able to turn up, but see others take part in activities, gave them something to aim for, that they felt was attainable.

▶ Support with forms, for benefits/ housing

'If you want to fill out a form, you don't have to struggle - can come here and get support.' [Respondent 27]

▶ Local

Several respondents mentioned the importance of the centre they used being easy to access because it was walking distance or only required one bus (see Location and travel page 11).

▶ Familiarity

Many respondents had been using the service for many years and valued the familiarity.

▶ Meals

Many of the respondents valued being able to get an affordable meal (more detail on page 16) and several valued eating together.

▶ Specific activities or facilities

Several respondents valued having access to a garden (particularly because their living space didn't offer this), having a space where they could simply drop in and chat, and specific group therapy sessions were also mentioned, as well as activities that respondents felt 'keep me occupied'.

Use of Mind centres and other local mental health services

Which local services do you use?

Of the 83 service users that answered this question 70 explained that they have used multiple local mental health services such as the three Mind day centres (Empower, Spa and Hub), Stuart Low Trust (24), Isledon Road (25) and Hillside Clubhouse (7). A small number (7) of respondents also mentioned that they had used the Claremont Project. Respondents also mentioned using Caxton House which is a local community centre, local housing associations, other FoodCycle projects (who provide free community meals from surplus food) and the Recovery College which offers recovery focused courses.

Some service users only used one of the Mind centres. Six service users only used services at Empower this was generally due to the accessibility of the service and them coming specifically for the Freecycle meal on a Wednesday. Altogether 44 respondents accessed services at Empower. In general they valued being able to have a hot meal and the space provided to attend without taking part in an activity through the drop-in.

17 service users primarily used Mind Hub for the specific services that take place there, such as the art and music groups and the Psychosis Therapy Project and Hearing Voices Group. 60 service users talked to us about having accessed services at Mind Hub at various times. They valued its accessibility, atmosphere and activities.

'Location of the Hub... It's a safe place to come, staff are good and happy to help.'
[Respondent 61]

'There's therapy and mindfulness, art, music, people can do stuff on their own and then carry on outside. It really is a hub.'
[Respondent 75]

Eight service users explained that they primarily access services at Mind Spa and this was often due to the specific services offered there, such as 'Outcome' (a session specifically for LGBTQI* people) on Tuesdays and Women's Day on a Thursday, or accessing therapeutic services. 43 of the service users we spoke to used Mind Spa and told us that they valued the space and the atmosphere.

'Here, I'm going to a family house. I feel respected, no-one will judge you.'
[Respondent 14]

'Helpful, friendly, great atmosphere, food is good and homely.'
[Respondent 51]

* Lesbian, Gay, Bisexual, Transgender, Queer or Questioning, and Intersex

Are there any Mind centres you prefer not to use?

29 service users told us that they preferred not to use one or more of the Mind centres for a number of reasons such as travelling, location, the environment or the building. Others spoke about finding it hard to manage change and to be flexible.

‘The [Hub] building upsets me actually. It’s very institutional and reminded me of being taken to children’s services as a kid.’

[Respondent 33]

‘I’m not keen on going to the Hub, I find it a bit clinical and it’s near Suicide Bridge where I’ve lost some friends.’

[Respondent 10]

Service users commented that they found some centres ‘too far away’ [Respondent 30, Empower] and ‘not very convenient’ [Respondent 82, Empower].

At least eight Mind service users we spoke to mentioned that they didn’t know what activities took place at each centre or they didn’t know about other centres altogether.

‘I’m not sure about the Spa, what’s on and when I can go, even though I live near there.’

[Respondent 10]

Opening times

When is it most important for you to be able to access this service? Are there times when it's less important for the centre to be open?

Although the council made it clear in the information they provided for service users on this consultation exercise, that the service would not be expanded, service users still commented that they wanted the centres to be open more often and for longer.

One theme was that 'with mental health any time is important' [Respondent 14], 'mental health is not a 9 to 5 thing' [Respondent 75]. 10 service users commented that there was never a time when it was less important for the centre to be open 'as you never know how you'll be feeling' [Respondent 40].

Eight of those we spoke to said that the current opening times suited them; 'I'm ok with occupying myself, that's not a problem' [Respondent 78]. 25 of those we spoke to felt that the opening hours were fine as they are as they are used to them and people valued being able to drop into services and attend when they feel they are able and want to.

20 service users suggested that being open all day every day was the most important time. In the iBUG group it was noted that whether activities were taking place or not, what people there wanted access to was the drop-in.

'It would be nice if there could be a drop-in every day of the week.'
[Respondent 9]

'I don't want it shut any weekday... it used to be five days a week and now it's only Tuesday and Thursday for drop-in at the Hub now.'
[Respondent 64]

'More days [for Outcome, the LGBTQI service]. I've done some mental health outreach and got feedback from people who want to come [to Outcome] but can't make Tuesday during the day.'

Respondent 34

'It's sad not to have daily drop-in... When it was five days at Ashley Road it was a family atmosphere.'
[Respondent 76]

Understandably, different service users had different preferences. Respondents were all people who are able to attend during the hours that the centres are currently open, so most reported being happy with the opening times. There was still an appetite for evening and weekend opening. However, most respondents didn't want the centres to be open less often during the week in order to enable weekend access.

Eight service users felt that mornings were the most important times to be open. However, others suggested that it wasn't so important for the services to be accessible in the morning due to their mental health conditions or medication making mornings difficult.

When is it most important for you to be able to access this service?

'Mornings. It's really important to have this reason to leave the house.'
[Respondent 3]

'Morning - it gets you out of bed. By the afternoon you can't be bothered.'
[Respondent 5]

'Mornings - Because it gives me the purpose to get up and get out.'
[Respondent 28]

'It would be good to have something on the weekend, when it can get quite lonely.'
[Respondent 13]

'The weekend is very lonely if you don't have anyone.'
[Respondent 14]

'Maybe also Sundays because they can drag on and it can be a really lonely day.'
[Respondent 27]

'I struggle during the weekends as I feel very lonely, and I get really anxious as I can't stop thinking, so I try to do things.'
[Respondent 94]

Are there times when is it less important?

'I'd say the morning, because medication taken for mental health conditions can make it hard to engage in the morning.'
[Respondent 18]

'It's hard to come in the mornings. My OCD routines mean it takes me a long time to get ready.'
[Respondent 20]

'Early morning because I'm groggy, because of the medication.'
[Respondent 69]

'I don't need the service on the weekends because I stay with my daughter then.'
[Respondent 2]

'The service has never been available on the weekend, so there's no expectation.'
[Respondent 3]

'The staff are overworked so on the weekend I do the best I can.'
[Respondent 10]

'Sundays I go to Isledon Road, so I already have activities and something to do on Sundays.'
[Respondent 97]

19 service users commented that accessing services at the weekend was important to them. However, 18 others said they didn't need to access it at the weekends as they had other things on or had ways of managing that time.

12 service users suggested that evenings were the time it was most important to have a service available, ideally in addition. (We did make people aware of the Friday evening service at the Stuart Low Trust).

'There's absolutely nowhere to go at evenings and weekends. I think the evenings and weekends are when most people are in distress and nowhere else is open.'
[Respondent 42]

'There should be evenings too. It's when people get loneliest.'
[Respondent 19]

'Between 4 and 6pm there I feel a void in my life, it's when you would come home from school or work, I usually end up going to sleep. If it could be open until 6 or 7pm that would be amazing.'
[Respondent 33]

A couple of service users highlighted that the current opening times and days make it less accessible for those who are working. 'It would be good if it was open a bit later for people who work.'
[Respondent 90]

'9 till 7 would be good, if that's unrealistic then maybe until 4pm and then one evening would be good as it allows people who are working.'
[Respondent 91]

What do you do currently if you need support when this centre is closed?

80 participants responded to this question. 15 of those who answered said they would seek support from friends or family if the service wasn't available when they needed it.

'My heart sinks for a start. I haven't arranged anything. I'd go to bed. I do have a very supportive family and a small network of friends.'

Respondent 33

'Contact friends, keep myself busy.'
Respondent 90

About a fifth of those who answered this question seemed to imagine the worst case scenario and said that they would contact the Crisis Line, Samaritans or another crisis service if the Mind centres were closed.

Six others said they would contact their doctor, while 11 said they would stay at home and a further five said they would do nothing and wait for the service to become available again.

'That is a big problem - wait until they open and give me help.'
Respondent 39

Four service users said they would go to another Mind centre and another nine said they would go to another local service for support instead.

Location and travel

Would you be able and willing to travel to use this service at a different centre if it was open at a time that suited you?

Yes	No	Depends	No answer	Total
31	44	13	13	101

Many comments highlighted that change can be very difficult to manage and that the familiar is highly valued because it is safe. Many of the service users we spoke to came with someone else when they first accessed the Mind services which ultimately helped them to become settled.

Of the 88 who answered this question, 44 service users responded that they would not be willing or able to travel to another centre even if it was open at a time that suited them. Ten of those we spoke to specifically highlighted transport or travelling as a barrier to attending other centres, this included proximity to bus stops and main transport routes, distance, the barrier of having to change routine and how people's condition might influence their ability to travel and manage change.

'Because of my illness... If I get lost I have a panic attack. I'm not good at mixing with people in an unfamiliar environment.'
[Respondent 4]

'No. I'm not very good with change.'
[Respondent 20]

'I suffer from anxiety. I'm not good in crowded spaces, or on buses and tubes.'
[Respondent 10]

'I can travel but doing it regularly is difficult, so I can't establish a routine.'
[Respondent 8]

- ▶ The building where the centre is located was also important to many respondents.

'It's not just about the staff and the food it's about the property it's in.'
[Respondent 13, Spa]

'I think it's a really good building'
[Respondent 38, Hub]

'I like where it is, away from the main road... It's calm and more private'
[Respondent 48, Empower]

31 said they would be willing and able to access the service at a different centre if the one they preferred was closed. Three service users stated that they already used all three centres and were used to travelling to them, a couple of service users had freedom passes which they felt made it easier, whereas others 'don't have a freedom pass so it's quite difficult' [Respondents 99 and 16].

Most of the other service users who said they were willing to travel did also note that it would be more difficult to travel to a different centre.

'Yes, I could go but it would make it a little more difficult.'
[Respondent 14]

'I'd give it a go, but I think this is the nearest one.'
[Respondent 22]

'Could, but this one is convenient.'
[Respondent 81]

If no, what about if someone who uses the centre was travelling with you?

Yes	No	Depends	Don't know	No answer
4	21	4	1	14

We asked the 44 service users who said no they wouldn't travel to a different centre, whether they would change their mind if someone else who used the centre travelled with them. For most, this didn't make much difference.

21 of those we spoke to stated that they would still not be able or willing to travel to a different centre even if they were accompanied by another service user;

'I'd feel pressured and that might affect them as well. If I didn't come they'd start their day feeling let down.' [Respondent 18]

Four service users said that travelling with someone else 'could help' [Respondent 66] and 'would make it easier' [Respondent 43]. However, it was also suggested that this could create a lot of responsibility.

'Yes, but only if there are people that can take me there. If I am alone I can't. If the friend says she can't come one day then I cannot attend.' [Respondent 96]

Four others said that it would depend. Again the view was expressed that relying on other service users was not an appropriate solution,

'A lot of service users are not well and not reliable, and I'm not always reliable.' [Respondent 20]

What's more important to you; the location of the service or what's on offer?

- ▶ Most respondents stated that both location and offer were equally important.

Respondents saw the two things as connected, that what was on offer was about more than just a building or a series of activities but about the whole package. One participant talked particularly about the sense of safety created by the service which she connected with the building as well as the people and activities on offer. She described how she was able to take this sense of safety with her and how it was slowly enabling her to feel more resilient at home, where she had not been feeling particularly safe. Other respondents felt frustrated by the question, that they were being led to make an over-simplified choice.

'There's no point having activities but it's too much of a struggle to reach, and vice versa - there's no point coming here and having nothing to do.' [Respondent 18]

For those who did express a preference, the split was fairly even between 'location' (21 respondents) and 'what's on offer' (25 respondents). Those that favoured location generally mentioned that the centre was easy to reach on foot, or without having to change buses.

For those that gave a different answer, what was most important to them was generally the people, the staff and the other service users.

Some expressed concerns that activities being cut previously had already led to people dropping out of the service, and we noted at the IBUG meeting several people no longer used Mind, not because they were unhappy with the service provided but because it was no longer able to offer a specific service they had used, or the change in opening hours had meant they could no longer attend.

Peer support

Do you attend any peer-supported sessions or groups at this service?

Peer-supported sessions are activities that are led by service users rather than by members of staff. At the centres these were often based on the interests of the service users who led them. Examples included retro video gaming, reading group, film club, meditation, and jewellery making.

45 respondents said no they hadn't attended any service user led sessions. 32 respondents said yes they had. 3 said that they were unsure and 21 either did not answer the question, or answered in a way that was inconclusive.

► Reasons given for not attending peer-supported sessions

Of those that made further comment, some said they were not well enough to attend activities, irrespective of how they were led,

No. I don't attend any activities at the moment. I want to but I'm not well enough to use them. [Respondent 3]

Others said they preferred the expertise of trained members of staff,

'No. I need an expert to understand... I need someone who understands my music, a specialist.' [Respondent 21]

Some respondents felt that when activity was not led by staff, it became less engaging,

'I think it's better when it's led by staff. People have more interest. They seem to lose interest when it's just ordinary people.' [Respondent 22]

A similar observation was made by activity leaders, 'Peer to peer support is weaker. If staff organise something, others turn up. If I do, they don't.' [Respondent 91]

What works well in these groups?

Those that had participated saw a number of benefits to service user led groups. It increased the variety of activities on offer, 'getting different types of group that you wouldn't get otherwise.'

Respondents also felt that leading an activity helped the process of recovery, 'It's good for them to share ideas and talents/ gives you self esteem, helps you move on/ not just reliant on the centre, but can contribute.'

These sessions were seen as empowering for the participants as well,

'If you can trust a service user and they can lead you from experience, it's fantastic. It shows others they can also lead, take it in turns.'

Respondents felt that the shared experience between service users, 'the similarities that erode communication borders' made service user led activity easy to relate to and engage with. 'There's a level of understanding - honest, open.' Service users were 'supportive towards each other.' There was a 'feeling of solidarity.' Participants were keen to see activity leaders succeed.

[Quotes from respondents 8, 64, 80, 78, 75, 44, 59]

Reservations and concerns

'It can work if the person is well and they've been trained appropriately.' [Respondent 13]

Respondents warned that leading an activity wasn't appropriate for everyone, and not all activities were suited to being service user led.

- Staff support was still considered essential.

For example, one respondent commented on an activity that was usually led by a counsellor, but was being temporarily led by service users,

'We don't have the objectivity she offers, we don't have the insight she offers. It feels a bit dangerous, sharing feelings with peers. They're not always well enough to take it.'

'It doesn't really work well. We end up talking socially - and if people bring a lot of anger to the group and it's peer-led, people are frightened. It's unsafe actually.'

Respondent 20

Another respondent shared feelings of anxiety and disappointment about not being able to help lead an activity,

'It's really difficult to commit to assist every week and I can't. It's not a very nice feeling to not be able to commit to be a part of something in a bigger way. It's just not nice.'
[Respondent 11]

Other respondents noted that these activities would benefit from more structure, higher attendance, and rotating the activity leaders.

Could peer support be better used in the drop-ins?

'No, not really, I think everyone's quite 'easy come, easy go'. It's nice just to have the space and not have to do anything.' [Respondent 26]

'Chatting is peer support. People here are supportive.' [Respondent 31]

Many service users did not participate in activities. They valued the drop-in sessions where they could simply spend time in the centre and socialise, without having to do anything more. Respondents were happy for drop-in sessions to remain as they were.

Overall sentiments toward peer supported activities.

38 respondents were positive about peer supported activities. Six respondents were negative, six expressed mixed sentiments, one was unsure, and two had no strong feeling either way. The remaining 48 respondents expressed no opinion.

There was no call for service user led activities to be increased at the expense of staff led activities. Staff led activities were greatly valued.

Financial contribution

Would you consider making a donation for some of the sessions here?

Yes	No	Don't know	No answer	Total
34	41	19	7	101

Service users already make some financial contributions. They pay for their lunches at the drop-in sessions, or make a donation when FoodCycle provide the meal. They make a financial contribution towards counselling sessions, donate materials for art and craft sessions and donate their time volunteering on reception and leading peer support sessions. Services users clearly supported each other in the drop-in sessions we attended too.

'No. If I had the money, like I won the lottery or something, I would give it to them, I find this place so useful. We already make donations for the art group as we bring materials and stuff ourselves.'

Respondent 100

'What if I can't afford it? Am I'm valued for me or my wallet? It's better to return your time, sit on reception or as a leader of a group/ session. We're here to give and take, don't corrupt it.'
[Respondent 75]

'I would. It all depends on how much expense I have on the weekend. Sometimes I have to go to an osteopath for arthritis, and my neck locks.'
[Respondent 19]

'Any donation would become a fee. Some wouldn't be able to afford a donation and then they would be cut out. So I'm going to say no.'
[Respondent 33]

28 respondents said that they had no money to make a donation, although they really valued the service. Of these 5 said they would consider making a donation anyway, 4 were unsure and 19 said they couldn't. Healthwatch interviewers had a sense that the question some respondents were answering was 'Do you find the sessions here of value?'

Five respondents said they would feel happier about making a donation if it were tied to a particular service, such as counselling, day trips, or cinema trips.

Meals

74 respondents stated that they had a meal at the centres and of those 74, 65 said that the meal was important to them. For those who said it was important this was often because they found it difficult to get the energy to get their shopping and then cook a meal or their depression made them lose their appetite or physical conditions such as arthritis made cooking difficult. Some had limited facilities for this. Many said the meal helped them to eat more healthily. Several valued being able to eat with others.

'Yes. That's the only good meal I get. The rest of the time I eat microwave food and rubbish.'
[Respondent 4]

'Because I'm getting a home cooked dinner and that contact with people that I don't get at home.' [Respondent 3]

Although some brought their own food, and a couple of respondents found the meals expensive, most thought that what was on offer was 'Good value and good quality' [Respondent 56]. The Hub offers a bring-and-share lunch once a week.

Conclusions and thoughts for the service specification

Personalisation

The service offered is flexible to the needs of different service users. This needs to continue. The service needs to be flexible in terms of:

- ▶ times that services are available,
- ▶ the range of activities that are on offer,
- ▶ the recognition of drop-in as an 'activity' in itself that helps people access services when they are feeling less confident,
- ▶ being open-access and not requiring a referral, so that people can come when they are ready without needing to wait,
- ▶ activities that are led by staff but with options for service users to take on responsibility too as appropriate,
- ▶ a range of affordable food being available across the centres on different days of the week,
- ▶ there is a diversity of venues and identities for each of those venues.

Social model of care

The service creates opportunities for user-led activity and for users to support each other. In addition, most service users also found staff very accessible and supportive.

Finance

It was really positive that this preventative service is commissioned to be free at the point of access. Many service users would not be able to pay for this service.

Awareness of the service

Any future provider should at least work with services such as the Access and Advice Service, GPs, Mental Health workers who are based in primary care services, ICOPE and Job Centres to promote the service as widely as possible. It would also be good if commissioners made a summary document of the various services

available to service users, bringing this together in one place.

Potential changes

Change really raises anxiety. Any proposed changes will need to be clearly communicated, and depending on the nature of the change, transition arrangements will need to be considered (respondents noted how the last round of reductions meant some service users had dropped out of using these services altogether). This would need to be more than just a letter or leaflet giving information, and asking another service user to support someone may not work – several respondents talked about this potentially increasing their anxiety. Currently Mind are very proactive about calling people to encourage them to attend the service and help motivate them.

'What would happen then if it was closed? Sometimes when I lock myself away it's like being in prison. That's what happened after Pine Street until [staff member] found me and showed me this place.' [Respondent 22]

Restricting access

Only one service user talked about being denied access to a service. However, when all services are delivered by the same provider, being denied access to one centre often means being denied access to all centres. The commissioning model (of commissioning all mental health day services together) will need to consider how to balance denying someone access if they break the rules, with denying them access to any service at all.

Next steps

Healthwatch will host a meeting of service users and the commissioner for mental health to work on the draft specification. We will ensure that findings from this report feed in to that process.

Appendix one - Islington Council FAQs



ISLINGTON


Islington
Clinical Commissioning Group

Reviewing our Mental Health Community Support Service – Frequently Asked Questions (FAQs)

As part of our review of the Mental Health Community Support Service in Islington, we want to consult with as many service users as possible to gather views and opinions about the current service and to get your ideas for the service in the future. These Q&As will help answer some of your initial questions about the service review and how you can get involved and have your say.

1. Why do you need to review the service?

Islington Mind has been delivering mental health day services on behalf of the council since 2010. The contract is due to be renewed in 2017. We are taking this opportunity to speak to service users to help make sure we are making the most of our limited resources to continue to deliver the best mental health day services that we can for the people that use them.

We want to make sure our services support people in the future so they can stay well in the community and avoid reaching a crisis. If someone does need to go to hospital, we want to ensure that they have access to support once they are well enough to return home.

2. Which services are being reviewed?

The council is reviewing the Mental Health Community Support Service. This is often referred to as the mental health day service. Specifically, we are looking at the services currently delivered by Islington Mind from the following locations:

- Ashley Road (Mind Spa),
- Despard Road (Mind Hub),
- Southwood Smith St (Mind Empower)

In the meantime there will be no changes to these services and people will be able to access them as normal. Any changes to the services will not come into effect until 2018.

3. Will the way I access the Mental Health Community Support Service be changing?

No. We want it to remain the same. The service will still be universal, which means it will be accessible to anyone who is concerned about their mental wellbeing.

Anyone accessing the service for the first time will have an assessment with a member of staff. This will help us to understand what and how much support each person needs and to agree realistic goals that will help people to realise the outcomes they want to achieve. Service users will continue to very much be a part of this assessment and any decisions on the support offered is jointly agreed with the service user.

4. Will the activities on offer at the Mental Health Community Support Services be changing?

We will be consulting with service users to find out which activities are most helpful to their recovery, so we can make sure these are still available in the future. Service users at the Community Support Services already told Healthwatch Islington in 2016 that they really value the service, particularly the different creative activities that are on offer.

We also know that there are some service users who have used mental health services in Islington and who may be able to provide support to others who are going through similar experiences.

We want to look at delivering new activities which make the most of this service user expertise to provide peer support to others. We would work together with you and the managers of the service to develop any new services, and understand how this could best work in the future.

5. Will the opening times be changing?

There may be some changes to opening times. We would like to hear your thoughts about the current opening times and about when you think it is most important for the centres to be open. It may not be possible to increase the opening hours but we may be able to change them so that you can access support at the times when you most need it.

6. Will the staff team change?

As far as possible we expect the current staff to remain the same, however, the organisation providing the service may change. This is because the Islington Mind contract is coming to an end and other organisations will have an opportunity to bid to deliver the service.

7. How can I take part in the consultation?

There will be a number of opportunities for you to have your say, both face to face and over the telephone. The consultation will be led by a local independent organisation, Healthwatch Islington. Further information about when you can speak with Healthwatch is enclosed.

8. How will my feedback be used?

Your feedback will help us to understand what is most important to you about the Community Support services, how it helps with your support needs, what does not work and what could be done better. This will help us to develop the proposals for the service.

We will include as much of your feedback as we can, but it may not be possible to include everything you have said you would like. Where we are not able to make changes you have suggested, we will explain why.

We will also be inviting service users to make decisions about the service with us.

9. What will happen after the consultation?

Once we have received your feedback we will finalise the proposals and organisations will be asked to bid to deliver the service. This is called a procurement. We will keep you informed of any changes, and we will invite service users to join the decision making panel, but do not expect to make a decision before December 2017. We expect the new service to be in place in 2018 and will keep you updated as we work towards this.

10. Can I get involved in developing the new service?

As part of the procurement process, you will be able to apply to be part of the commissioning panel. The panel will decide which organisation will deliver the service in the future. Further details of how to apply will be made available at a later date.

We will also ensure that whichever organisation provides the service in the future involves service users in the development and delivery of the service. There are lots of ways you could be involved, for example:

- Deciding with staff and commissioners what activities should be on offer.
- Running peer support and peer led activities.
- Helping commissioners to monitor the service in the future.

As part of the consultation, we want to hear your ideas about how you want to be involved in developing and delivering the service in the future.

11. Who do I go to if I have any more questions?

If you have any queries, please speak to the staff from Islington Mind. You can also contact the Joint Mental Health Commissioning Team by email:

Mhcommissioning@islington.gov.uk .

Appendix two - survey questions



SERVICE USERS

As part of Islington Council’s review of the Mental Health Community Support Service in Islington, we want to consult with as many service users as possible to gather views and opinions about the current service and to get your ideas for the service in the future.

As we go along I’ll be taking notes of what you’ve said and I may stop to clarify anything I am unsure of. I am listening, even if I’m looking down at the page for a moment.

Everything you tell us will be treated as confidential. We will write up a summary of the views given and report this to the commissioners. Nothing that identifies you will be included. However, if you told me something that made me worried that you or other people here were in danger, I may need to report that.

Are you happy to take part?

I haven’t taken part in this review already at this centre (or any other).

Service User ID:		
Interview Location:		
Session attended (if applicable):		
Date and Time:		
1.0	What attracted you to this centre?	
1.1	What keeps you coming back?	
1.2	What do you use the centre for? (what sessions do they attend, do they also have lunch or attend drop-in sessions)	

SERVICE USERS



1.3	Do you come along for a meal? Is this important to you? Why?	
1.4	What about the sessions you take part in do you most value?	
1.5	Is there anything that would improve the sessions for you?	
1.6	Are there any sessions not offered that you'd like to see?	
1.7	Do you use any other MIND centres or local services like this one?	<input type="checkbox"/> Empower <input type="checkbox"/> Hub <input type="checkbox"/> Spa <input type="checkbox"/> Isledon Road <input type="checkbox"/> Stuart Low Trust (Upper Street, Fridays) <input type="checkbox"/> Claremont Project (White Lion Street, weekdays) <input type="checkbox"/> Hillside Clubhouse <hr/> What do you like about those services?

SERVICE USERS

	M	Tu	W	Th	F	S	S
Morning							
Afternoon							
Evening							
2.2	Would you be willing and able to travel to attend these sessions at a different centre if it was open at a time that suited you?						
			<i>See map of the centres</i>				
2.3	If no, what about if someone who uses the centre was travelling with you?						
2.4	What do you do currently if you need support when this centre is closed? (are you aware of other services?)						
Peer Support							
3.0	Do you attend any peer-support (service-user led) sessions or groups at this service?						
3.1	If yes, What works well in these groups/sessions? If no, why not						

SERVICE USERS

3.2	<p>How could these groups/ sessions be improved?</p> <p>Is there anything missing?</p>	
3.3	<p>Could peer support be better used in the drop-in's?</p>	
Paying for sessions		
3.5	<p>Would you consider making a donation for some of the sessions here?</p>	<p style="text-align: right;">If yes, how much If no, why not</p>
Other needs		
4.0	<p>If you have needs this service cannot meet are staff able to direct you to relevant services?</p> <p>Mental health & non-mental health services</p>	<p>[prompt - if no, what does this mean - they don't need that help, they don't need the directions, the staff don't help?]</p>
5.0	<p>What's more important to you; the location of the service or what's on offer?</p>	<p style="text-align: right;">Explore why.</p>

SERVICE USERS

5.1	Is there anything else you would like to say?	
<p>CONTINUED INVOLVEMENT</p> <p>When the service is commissioned, we will be recruiting service users to take part in designing the specification document (this is a description of what kind of service is wanted) and to sit on the procurement panel (the judging panel that decides which provider to appoint).</p>		
6.0	Would you be interested in taking part?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Name	
	Email	
	Phone number	

Equality Monitoring

Healthwatch Islington is funded by the Department of Health. As such we are required to monitor who we speak to. This is to ensure that we are involving a diverse range of people. Any answers given are confidential but you do not have to answer the following monitoring questions.

Sex

Please specify:

Male Female Prefer not to say

SERVICE USERS

Do you consider yourself to have a disability?

Yes No

Do you consider yourself to have a long term health condition?

Yes No

Age

16 - 24	<input type="checkbox"/>
25 - 44	<input type="checkbox"/>
45 - 64	<input type="checkbox"/>
65 - 80	<input type="checkbox"/>
80+	<input type="checkbox"/>
Prefer not to say	<input type="checkbox"/>

Ethnicity

Prefer not to say--	<input type="checkbox"/>	Black or Black British - any other	<input type="checkbox"/>
Black or Black British - Caribbean	<input type="checkbox"/>	Asian or Asian British - Bangladeshi	<input type="checkbox"/>
Black or Black British - Eritrean -	<input type="checkbox"/>	Asian or Asian British - Indian	<input type="checkbox"/>
Black or Black British - Ghanaian	<input type="checkbox"/>	Asian or Asian British - Pakistani	<input type="checkbox"/>
Black or Black British - Somali--	<input type="checkbox"/>	Asian or Asian British - any other	<input type="checkbox"/>
Black or Black British - Nigerian -	<input type="checkbox"/>	Chinese --	<input type="checkbox"/>
Latin American --	<input type="checkbox"/>	Mixed - any other Mixed --	<input type="checkbox"/>
Arab--	<input type="checkbox"/>	White - British --	<input type="checkbox"/>
Mixed - White Black Caribbean--	<input type="checkbox"/>	White - Irish --	<input type="checkbox"/>
Mixed - White and Black African-	<input type="checkbox"/>	White - Gypsy/ Traveller --	<input type="checkbox"/>
-	<input type="checkbox"/>	White - Turkish/ Turkish Cypriot	<input type="checkbox"/>
Mixed - White and Black African -	<input type="checkbox"/>	White - Greek/ Greek Cypriot --	<input type="checkbox"/>
Mixed - White and Asian --	<input type="checkbox"/>	White - any other-	<input type="checkbox"/>
White - Kurdish --	<input type="checkbox"/>		
Other (please specify)--	<input type="text"/>		

healthwatch
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