

Keeping the light on

Views and experiences of people living with mental ill-health in Surrey

March 2017

SAFE HAVENS

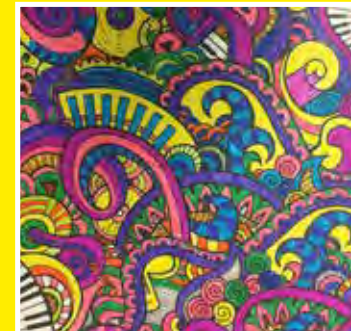
The background features a large, abstract shape composed of green and yellow sections. The green sections are on the left and right, while the yellow section is in the center. There are intricate, colorful patterns: a grey mandala-like pattern at the top, a red and orange floral pattern at the bottom left, and a yellow floral pattern on the right. Two magenta decorative elements, resembling stylized swirls or leaves, are placed on the green sections.

**For Grace, and all those who have lost
their lives to mental ill-health.**

Healthwatch Surrey

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Art created by visitors of Safe Haven Cafés



Introduction

Between December 2016 and February 2017, Healthwatch Surrey visited the **7 Safe Havens in Surrey** to talk to service users about their experiences of mental health services.

We spoke to **25 people** between the ages of **14 and 60**.

In-depth interviews were conducted. The methodology and background to these can be found in the Appendix.

The people who shared their experiences with us told us how they wanted the report to look and which information was most important to them; this report is the finished product.

Safe Havens in Surrey

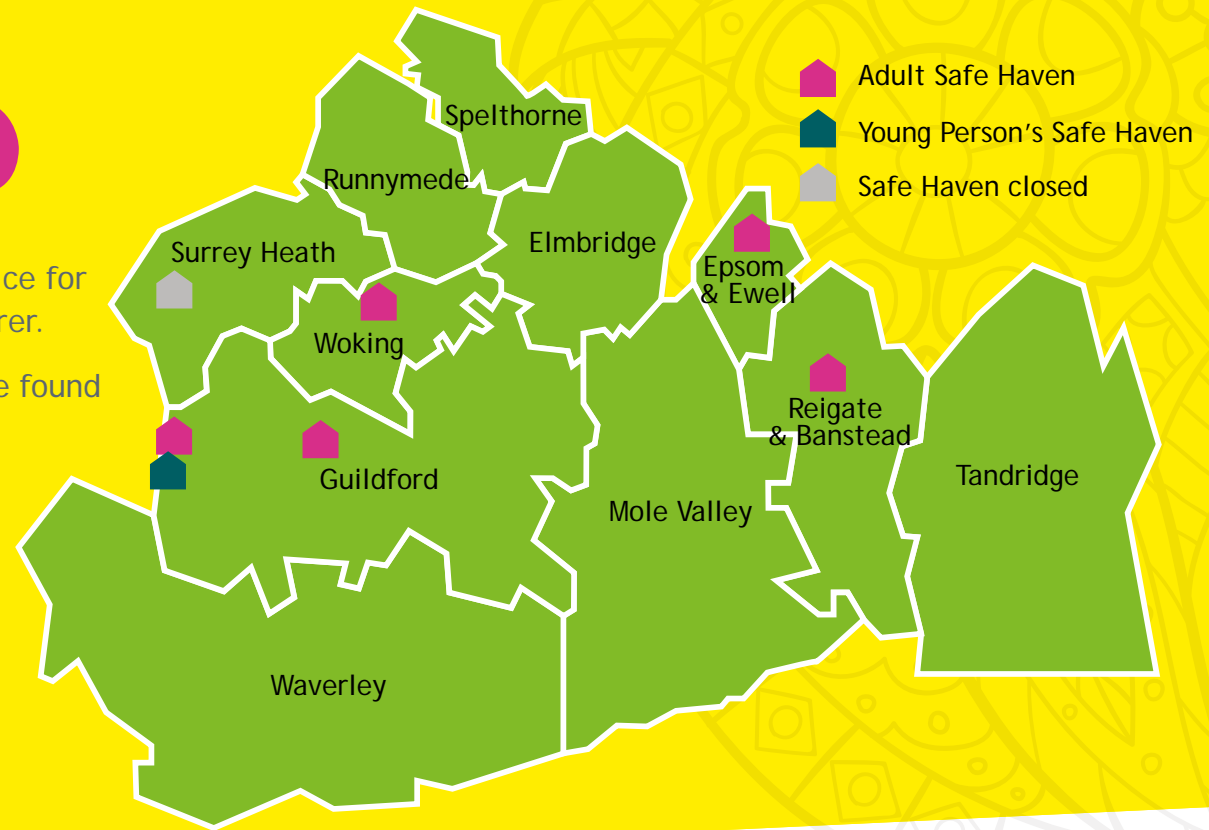
Safe Havens are an evening and weekend drop-in service for anyone experiencing a mental health crisis or their carer.

There are 5 **Adult Safe Havens in Surrey** which can be found in the following areas:

- Aldershot
- Epsom
- Guildford
- Redhill
- Woking

There is 1 **Young Person's Safe Haven** located in **Aldershot** which caters for young people aged 10-17.

A Safe Haven in Camberley has recently been closed.



All Surrey Safe Havens are under

0.6 miles



walk from a train or bus station

The use of Surrey Safe Havens has grown significantly since November 2015, with Epsom Safe Haven receiving

347 visits
in June 2016¹

87
people in Surrey committed suicide in 2014²

1. Interim Evaluation Report, Mental Health Crisis Transformation Challenge Award Steering Group, September 2016.
2. Surrey Joint Strategic Needs Assessment, March 2017.

Of the people we spoke to:

- Everyone had been told about the Safe Haven Cafes **by someone already involved in their care.**
- Many visit Safe Haven Cafes every day, **nearly all visit at least once each week.**
- More often than not, people reported having flexible support from professionals involved in their care; although many did not.
- Concerns were expressed about **the risks to personal safety when visiting one of the Cafes.**

- Others felt that there was a **lack of professional support** and intervention in some discussions amongst visitors, which were perceived to have the potential to **“harm people’s recovery”**
- When asked about how they felt about Safe Haven Cafes, **everyone had something positive to say.**
- On more than one occasion people told us the **Cafes had saved their life** and had reduced their need for other services.

The majority of people we spoke to:

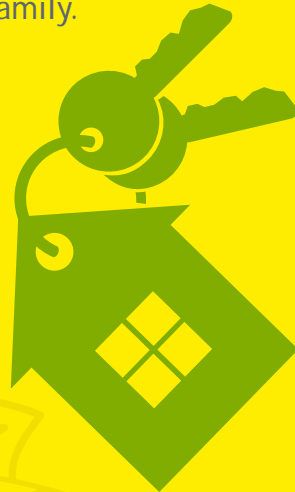
- **had not used A&E when experiencing a mental health crisis**; and of those that did nearly all reported having mixed or negative experiences of A&E in those circumstances
- **had not stayed in an inpatient mental health facility**; in most cases when people had accessed these services they had a negative

experience and often reported being discharged without a care plan

- **reported needing support to keep their accommodation stable** and pay their bills on time; one person reported that other users of the Cafes helped them with this

Accommodation

We asked service users what type of accommodation they lived in, and whether they lived with family.



Private renting	2
Private owned	1
Social housing	12
Student housing	1
With family	7
Homeless	2

The **other Safe Haven users** help me to make sure I stay steady and **pay my bills** when I'm **having a bad time**


We wanted to know who supports people with mental ill-health to keep their accommodation stable, manage their bills and payments, and prevent them from becoming homeless.

We asked service users if anyone helped them to keep their accommodation stable and pay bills on time.


16 ✓
of the **25**
users say
YES

9 ✗
of the **25**
users say
NO

Who helps to keep your accommodation stable?	
Family	9
Friends	0
Charities/ organisations	3
Adult social care	2
Safe Haven peers	1
Community psychiatric nurse	1



I think it's good for people like me with mental health problems to live in sheltered housing. I used to live independently and some people used to take advantage of me and stay in my flat, make a mess, take my things; I was so ill I never realised. At sheltered housing someone is there to stop bad people coming in and if you feel like you're going to hurt yourself you can tell the person in charge



The **other Safe Haven users** help me to make sure I stay steady and **pay my bills when I'm having a bad time.**

I'm waiting to get housed by a local charity but it's been two months and I don't know what's happening. I forget where I am supposed to go to get help

My Mum manages the paperwork and bills side of me and makes sure everything is paid for, otherwise I'd spend my whole salary

Other mental health services accessed by Safe Haven users

25/25

of the service users we spoke to at Safe Havens had heard about the service **from someone already involved in their care.**

Community Mental Health and Recovery Service

Therapies

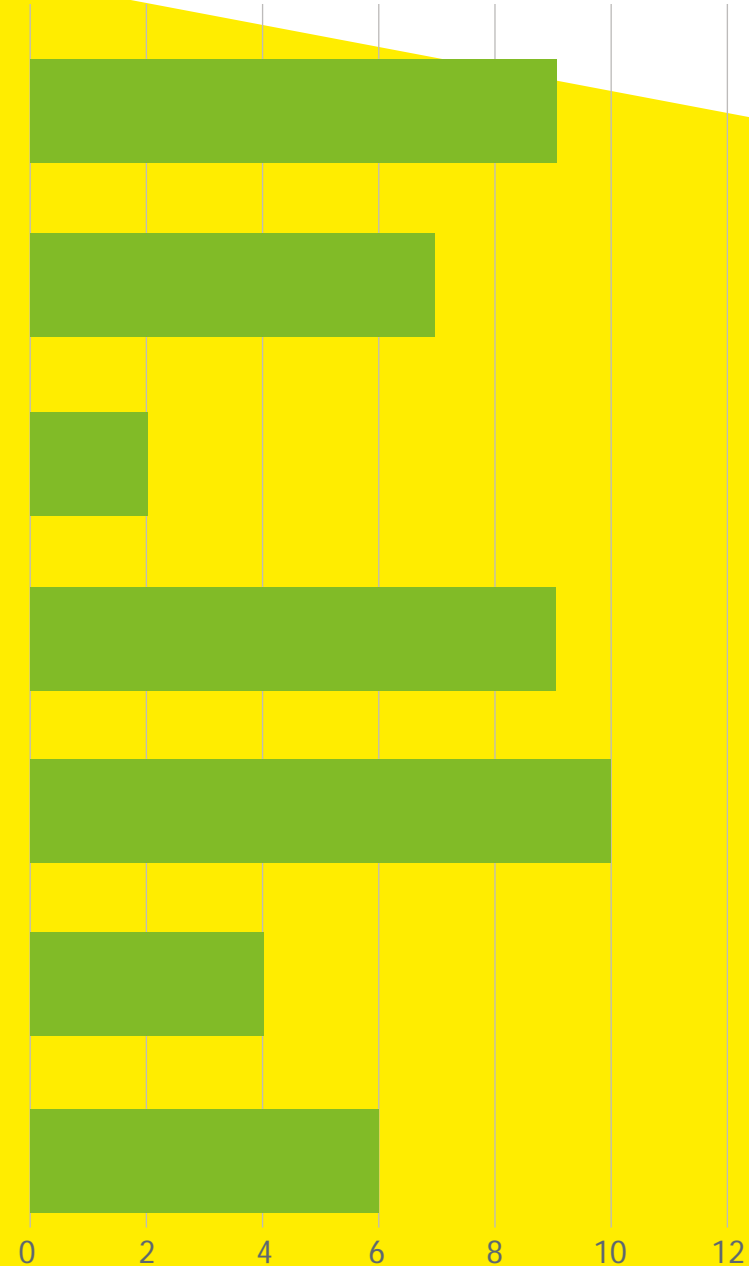
Child and Adolescent Mental Health Service

Community Mental Health Centres

Charities/ organisations

Crisis Line/ Samaritans

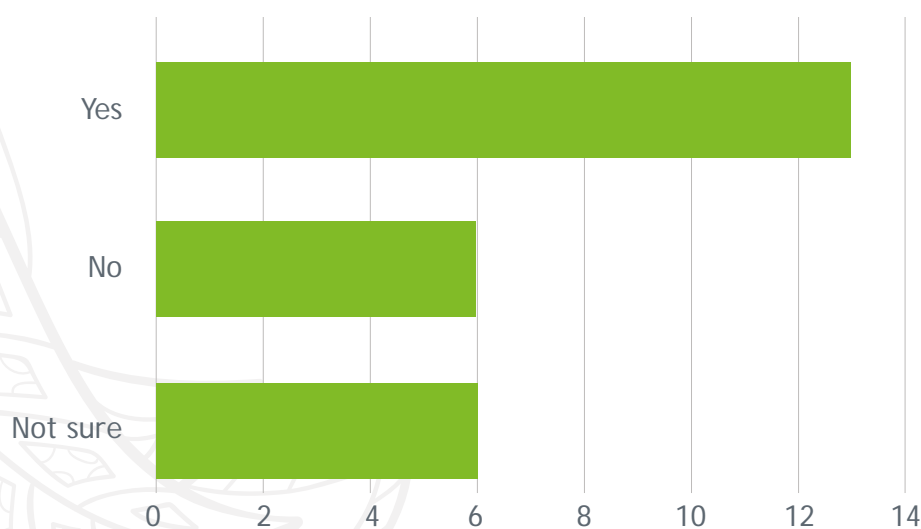
GP



Flexible support from professionals

We heard from Safe Haven users that they needed flexible professional support. The majority of people told us that their mental health fluctuated and sometimes they would need a lot of support, and other times they were independent and could cope well on their own.

Do you have flexible support from professionals?



I don't have flexible support. I shouldn't have to keep ringing people and telling them that I'm unwell. **My Community Psychiatric Nurse (CPN) should call me** and ask if I'm okay. I should have scheduled appointments to see my CPN and my psychiatrist; at least once every 6 months. **They should care more about people instead of seeing them as another problem that needs fixing.** I think if I had a better relationship with my CPN my mental health would be better. I used to have another CPN; she was brilliant. She was always there for me and I knew **I could always text or call** and she was hard working and instantly make it her priority to get back to me. That's the kind of **flexibility** you need when you're in crisis.

My GP is excellent because I can always get an appointment to see her and talk about things that are getting me down. **Sometimes I don't need to see her for weeks.** Other times I see her two times in a week such as if I'm not getting on with my medication or if I need to talk. I also use the centre for wellbeing at my university; **they gave me a care worker who is fantastic** and will see me whenever I need to talk. I don't need an appointment, **I just call them and they come and meet me** or I go and find them on campus.

Accident and emergency

12/25

people we spoke to had used accident and emergency when in crisis **at least once**



A & E

10/12

were negative or had mixed feelings about A&E



Over half the people we spoke to felt that the area within accident and emergency where they were treated was inappropriate, explaining that the area where they are left in accident and emergency often makes them feel too isolated or too exposed.

I was **feeling suicidal**. I got there at 5am and I was out by 2pm that same day. **They left me in a cubicle** then the mental health assessment room.

I found the **staff were quite friendly** – I'd been to the community mental health team the week before and they'd told me I had lots of different diagnoses. When I went to accident and emergency they **gave me the answer I wanted**; that I had Borderline Personality disorder.

Accident and emergency is not built for psychiatric patients. You either get put in a room the size of a cupboard with no visibility or in a cubicle where people can keep an eye on you but everyone walking past can look at you. When I've had a bad day with my MH I hate people looking at me and I become paranoid. Something needs to change about the way they put you in triage so that you can actually feel safe.

I've been to accident and emergency lots of times for mental health – either for myself or someone else I know who suffers with a mental health condition. **It feels quite isolated in A&E** – you're put in a separate room.

Staff Attitudes

We spoke to Safe Haven users about how professionals make them feel when they are accessing services for their mental health.

I went to A&E last week and the doctor said to me 'oh not you again'. It made me feel really embarrassed and I just wanted to leave. It didn't help me. I was there to get help.

Well to them you are – but where else can we go?

...yeah that's happened to me before – they look at you like you're wasting their time.

We asked Safe Haven users for suggestions of things professionals could say to them to make them feel more welcome.

Safe Haven users suggest the following phrases which could be used to make them feel more welcome or valued/respected when they are accessing services:

It's good to see you

How can I help you today?

How have you been since you were last here?

Are you feeling comfortable here today?

Has anything changed since I saw you last?

Is there anything I can do better in the future? 🍷

Discharged in the dark

We heard experiences about how isolating it felt to be discharged from accident and emergency in the middle of the night.

Safe Haven users told us they would like professionals in Accident and Emergency to check that they have someone coming to pick them up or that they have arranged treatment to get home, as it shows that the professionals care about their wellbeing and it also helps them to feel less alone.

They don't keep you in if they can help it. **They don't arrange transport** they just tell you to go home no matter what time it is.

I said to them last time that I don't feel safe going home **but they said they need the beds for sick people.**

I've been let out of A&E at 4 am a few times and I don't have a way of getting home. I had a taxi arranged for me once but the person who came to get me was a man and I didn't feel safe getting in the car with him. I don't feel safe with men. **It frightened me.**

It's a **very long process** waiting at A&E and then you're turned out in the middle of the night; **you come home alone in the dark.**

Inpatient facilities

11/25

people had **stayed in an inpatient mental health facility** in their lifetime



7/11

people had a **negative experience** in an inpatient mental health facility



6/11

people told us they were discharged **without a care plan**



What it's like in inpatient mental health facilities

They **didn't tell me why I was there** and didn't tell me where to go when they said I could leave. **I got very depressed.**

I had to share a room with this man who wasn't very nice to me. He was extremely **rude and bullying**. I told the staff he was being nasty but the nurses didn't do anything about it. That's the thing mental illness is so different that **one ward for people with all kinds of mental illnesses** is not appropriate. They should have different places for different illnesses. **I couldn't sleep** because the man was saying he was going to kill himself. He said it so many times and **none of the staff batted an eyelid.**

There's an art room where you can do creative writing. We went on day trips and did photography. The art team did little sessions around coping and mindfulness that you wouldn't expect artists to know about. It was really good. The teacher was easy to talk to. At the time it seemed like mayhem on the ward.

Staff always said hello and introduced themselves when starting a shift. Even if you're in a mood they always do it. It's good to have consistency. **It's really encouraging being there.**

It's the little things in a psychiatric ward that make all the difference. If you need to have your phone charged you'd have to knock on the staff room door and you'd be waiting there for ages; stood there knowing it would be minutes before a staff member would open the door. **They'd roll their eyes** when you asked them to boil the kettle so you could have a coffee. **Some staff would shout to each other from across the hallway outside my room** and it used to make me jump all the time.

What it's like to be discharged from inpatient care

I can't cope at home as I have thoughts about hurting myself so I end up hurting myself. I was discharged and told that I shouldn't be in the hospital. **The Community Mental Health Team** come to my house and talk to me. **They're really nice people.**

I was put on a **general children's ward** when I tried to commit suicide as a teenager. I was seeing CAMHS at the time so I guess the ward considered my counselling a discharge plan. I wasn't consulted and **I wasn't told what the plan was** past leaving the hospital. I just went back to my regular appointments. My **counsellor didn't mention my inpatient stay** until I spoke about it.

My discharge plan was not in place when I left the ward, but I am a frequent user so I know who to call on the ward if I need them.

I didn't know where I was supposed to go when I was discharged.

When I was discharged I had the Community Mental Health Recovery Service visit me. **They wouldn't turn up on time** and when they did they would stay for 10 minutes and would be constantly answering the phone. I didn't get on with them and **I got fed up of waiting** around for them to arrive 2 hours late, so I asked them to stop coming to me in end.

I had a stay in a **military mental health inpatient facility** and then I was medically discharged. My GP picked up on this and made sure that I had a good discharge plan and follow up care in place. They made sure all the paperwork was in place and that I **'didn't fall through the cracks'**

How do people in Surrey feel about their local Safe Haven

Sometimes I have to use the quiet area as a couple of other users can induce my anxiety with certain behaviours and other conversations. **I've made friends and the staff are great.** I don't know what we would do without it.

Safe Haven is what keeps me from needing other services.

It's **made a huge difference to my daughter.** She was unable to attend school and now she is **getting back and choosing her options.**

I'd be dead if Safe Haven wasn't here

Safe Haven is a good idea. It stops people going to hospital. If Safe Haven wasn't here I'd go to Accident and Emergency.

It can get a bit much when people talk about death and depression in the communal area.

The service at the Young Person's Safe Haven is completely invaluable. It's informal, not structured, no appointments and no pressure. It's gently lit like a house. If you don't want to talk you can play board games. Having a CPN is so important as if you really need to talk to a professional and work through things you can choose to. My school does nothing for

students with mental illnesses. **You're really on your own without Safe Haven.**

The staff give you the care and attention you need. They give advice on other people and other professionals. **You can come to Safe Haven and not be judged. It's okay to not be okay.**

It's a great service. The availability such as **opening hours and location good.** All the staff are great here; there isn't a bad one. It's **a better option than A&E** as it's a less formal environment, much more comfortable and there's less pressure to talk and get formal treatment.

When people are blue lighted here or are in full blown crisis you notice the atmosphere changes. Sometimes it causes friction and upsets the balance or the aura. There was an incident outside a couple of weeks ago where a girl got attacked by someone who had been in the Safe Haven the night before.

It's an amazing service. When I first came the staff were very welcoming. They explained everything about the service and they offered me a hot drink. I speak to the CPN here about what's happening in my life. She knows me as if she's my personal CPN which means **I don't need to have one in the community and don't put pressure on services.**

I enjoy the social side. Generally it's a Godsend. I don't know what we would do without it.

It's really good. If you want to talk to someone you can, but there's no pressure to. You can just 'be' and they're okay with that. They don't make you feel like you have to have certain problems or criteria here.

Children and young people are often given not enough support or too formal a lot of support. Schools don't really have the right amount of staff to support children.

Sometimes when I'm feeling bad in the night **I wish I could come to Safe Haven but it's only open until 11.** I think if it were open for longer it would benefit more people because **I end up just walking around the streets** and it's not very safe.

They're really friendly at Safe Haven. You can go in an awful mood and be yourself. At work you have you put a face on and pretend. **Before I came to Safe Haven I didn't know about services I could access** in the day. Now that I come here I know much more about what options I have, like the Recovery College.

Sometimes people at Safe Haven can have really **triggering conversations** and staff need to be really aware that it can cause other members to have problems afterwards. **It's important for one member of staff to always be in the room with us** when we are in the communal area to challenge conversations which could harm others' recovery.

You have a **social opportunity** with others using Safe Haven and you can have 1 to 1s with the nurse when you need them. You can get over crisis much faster after an hour of talking to other users or to the CPN. **Safe Haven is the best system for people with mental illness.** They take health seriously here, even down to the food and the drinks served in the café.



Without one CPN here it would be a different place for me. She is absolutely amazing. I can't praise the staff enough here for their help. This place has been amazing. Safe Haven dug me out of the deepest darkest hole; it sounds dramatic but Safe Haven saved my life.

Safe Haven has been a great help. One night they got me the help I needed at accident and emergency and I was referred to the Home Treatment Team to make sure I could cope at home. **They can refer and escalate if it's needed.**

👉 If I didn't go to Safe Haven I don't know where I'd go. I'd hang around with the wrong people and get up to things I probably shouldn't be doing. When I first started I found it hard to go in if it was too busy. **My OCD was really bad** and I found it hard to stay for a long time. I think it's hard to go into a room full of people because you don't know what to expect. **Maybe they should have a picture of what the room is like on the outside so you can see it and know what to expect.** 🍀

I come here to unwind. Consider my thoughts, see what I could do differently. It's saved me from overdosing on a number of occasions

I can socialise a lot more here as other friends without mental illness can't really have the same kind of talks that I can with people at Safe Haven as it makes them uncomfortable.

👉 I had a rough period last year when I lost my job - Safe Haven Aldershot was keeping the lights on for me for a few months. I would have killed myself had I not been able to come here. 🍀

Next steps

This report will be shared with:

- the Governing Bodies of each Clinical Commissioning Group in Surrey
- the leadership team of Surrey County Council
- senior managers in the Adult Social Care & Public Health and Children, Schools & Families directorates
- the Governing Bodies of NHS organisations that provide Accident & Emergency services in Surrey:
 - Ashford & St. Peters Hospitals NHS Foundation Trust
 - Epsom & St. Helier University Hospitals
 - Surrey & Sussex Healthcare NHS Trust
 - Frimley Health NHS Foundation Trust
 - Royal Surrey County Hospital NHS Foundation Trust
- the Care Quality Commission
- the elected members of Surrey councils and local MPs

A response to the report will be requested from:

- the lead commissioners for the Safe Haven Cafes
 - Guildford & Waverley Clinical Commissioning Group and Surrey County Council
- the providers of these services
 - Surrey and Borders Partnership Trust in partnership with;
 - Catalyst
 - MCCH
 - The Mary Frances Trust
 - Oakleaf
 - Cornerhouse Woking
 - The Richmond Fellowship
 - Just Wellbeing

Responses to the report will be published by Healthwatch Surrey in an Impact Report in the summer.



Appendix



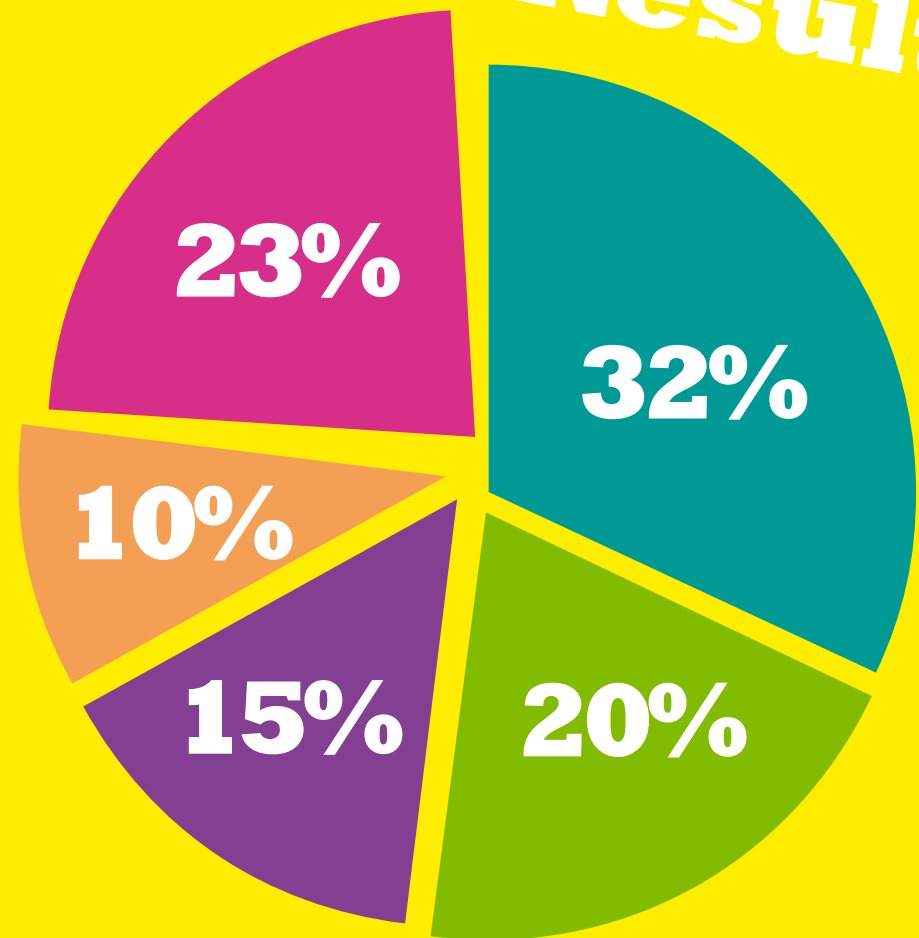
Autumn 2016 Poll Results

Background to Healthwatch Surrey's Safe Havens Project

In Healthwatch Surrey's autumn 2016 Listening Tour poll, Surrey residents voted that they would most like to see early intervention in mental health services improved across the county.

During the year we heard 303 experiences about mental health services, and spoke to other organisations, the public, commissioners and stakeholders about information they would like to know about mental health services in Surrey.

At the end of 2016 we heard from Safe Haven users that they were becoming concerned about whether Safe Havens would stay open, as they were only commissioned to run for one year. This created a sense of urgency for Healthwatch Surrey to visit Safe Havens and champion the voices of the people using the service, and made our visits and conversations even more meaningful.



- Early Intervention in Mental Health
- Follow up after discharge
- A&E
- Care in hospital
- Care for older people

Methodology

Healthwatch Surrey compiled a list of questions to research by engaging with Safe Haven users during visits throughout December 2016-February 2017.

Healthwatch Surrey staff spoke to people in their local Safe Havens and heard a variety of experiences related to mental health in Surrey.



Who we spoke to



Ethnicity		Number of users	
White British		15	
White other		4	
Not specified		6	
Female		Male	
		14	11

8 people
use Safe Haven
every day

9 people
use Safe Haven
every week

3 people
use Safe Haven
every month

Questions to gain insight into the lives of people with mental ill - health using Safe Havens.



1. Have you used Safe Haven before?
If so, roughly how many times?

2. How do you feel about your local Safe Haven?

3. Do you access other mental health services?

Counselling, CBT, Accident and Emergency,

4. What type of accommodation do you live in?
(With family / friends / alone)

PLEASE TICK

- Private rented
- Private owned
- Housing Association
- Council
- Group supported

Other _____

5. Do you feel you have enough support with your mental health?

What kind of support do you feel you should be receiving?
Who is best at supporting your mental health? Why?
Do you receive support to keep on top of your bills/ finances/ rent?

6. Does anyone help you to make sure you keep your accommodation stable?

Do you have any support from professionals to make sure that you don't lose your accommodation when you're going through a rough patch?

7. Do you have flexible support from professionals?

If you needed more support one week and less support the next, are professionals flexible enough to make this possible for you?

8. Have you ever had to access accident and emergency for mental health crisis?

healthwatch Surrey

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