

## Understanding access to mental health support through school & college



June 2019

Healthwatch North Somerset: Mental Health & Young People

Healthwatch North Somerset is a charity (No: 1158487) and a company limited by guarantee (England and Wales No: 08187141). Registered office 3<sup>rd</sup> Floor, The Sion, Crown Glass Place, Nailsea BS48 1RB

## About us

Healthwatch is a national network of organisations that provide a voice to people who use health and social care. We have significant statutory powers to ensure views and experiences are strengthened and heard by those who commission, plan, deliver and regulate health and care services.

Healthwatch North Somerset actively captures the views of the public using various outreach methods. Our mission statement is 'By offering all people in North Somerset a strong voice, we will improve the quality of local health and social care.' Our statutory duty and remit is laid out in The Health and Social Care Act 2012 to give people an opportunity to have a say, including those whose voice isn't usually heard.

We take public views to the decision makers locally- including North Somerset's People and Communities/Health and Wellbeing Board. We also feed issues back to government by sending them to NHS England, Healthwatch England & the Care Quality Commission (CQC).

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## Introduction

The evaluation was carried out with the sole purpose of exploring the current situation for children and young people (CYP) seeking early intervention mental health help through their schools and colleges, and their access to other services outside school. It contains both quantitative and qualitative findings, from a short survey answered either online or face-to-face at outreach events.

Our report does not represent the experience of all young people just those who answered the questions in the survey and their experience at certain schools. The findings contribute to part of Healthwatch North Somerset's priority in 18/19 to report back on the support available in its broadest sense from early intervention Mental Health Services. This fulfils our remit to find out what matters to service users and make sure their views help to shape the support they need.

Young people were asked to fill in the survey to tell us what happened when they had either wanted to access or had accessed mental health 'help' to cope with difficult feelings. We tried to use generic language to ask them about their experience of mental health services; using terms such as 'getting help', 'given support' and 'feeling low'. We also used the word 'school Counsellor' as this is a more recognisable term, and one they might be familiar with. We wanted young people to tell us where they turned and what options were offered to them. This report coincides with higher thresholds for access to local Children and Adolescent Mental Health Services while it copes with long waiting lists and the embryonic provision of training for staff in schools and colleges on mental health in North Somerset.

The Governance Framework and guiding principles provided by Healthwatch England sets a benchmark for planning, approach and methods used in research practices to ensure quality and consistency. These can be found at [www.healthwatchnorthsomersex.co.uk](http://www.healthwatchnorthsomersex.co.uk)

## Executive summary

Healthwatch North Somerset asked young people to tell us about the kind of mental health support they received or wanted from their school or college or other provider. The 89 people we heard from said they confided mostly in parents, friends and teachers when they had difficult feelings. When they told an adult in school, in 39% of cases they were passed on to a service; most often a school Counsellor or a local online service. 61% reported other outcomes ranging from ‘no help’, ‘given advice’, ‘listened’ and ‘didn’t listen.’ If they confided in someone outside school they were mostly referred to the Children and Adolescent Mental Health Service (CAMHS), back to a school Counsellor or a local online service. 37% reported other outcomes.

When asked about the length of time they waited before seeing a professional; the highest response was about the wait for CAMHS but young people also reported long waits to see the range of Mental Health Services they mentioned. 42% of the young people that reported on a service said they thought the treatment was not provided for long enough. When asked whether the help they got made them feel better only 19% said ‘a lot’, 44% said ‘not at all’ and another 37% said ‘a bit’. Their opinions relating to the quality of support are on pages 19, 20 and 21.

We asked young people to cite what barriers stop them trying to get help in school or college. Fear that their parents would be told ‘*before they wanted them to be*’ was highest on the list. We acknowledge that if there are serious safeguarding concerns relating to a young person, schools and teachers have to take decisions that may go against that person’s stated wishes. Young people also said they feared they would ‘*not be taken seriously*’. When asked to choose ways the service might improve, the top three areas chosen were; ‘*having lessons at school that help them keep emotionally fit and well*’; ‘*feeling listened to, respected and involved in decision making*’; and ‘*getting help quickly that is right for them.*’

## Understanding the issue

Evidence suggests that the prevalence of mental health difficulties among children and young people has risen over the past 15 years<sup>i</sup>, but there is no data collected nationally on the number of children and young people with difficulties that do not meet diagnostic thresholds. A study by the University College London Institute of Education summarised the prevalence of emotional symptoms such as feeling depressed and anxious among young people taking part in the Millennium Cohort Study. They found between ages 11 and 14 in boys the prevalence remained stable at around 12% but in girls, prevalence increased from 12% to 18%.

The Institute for Public Policy Research report October 2018<sup>ii</sup> says *'mental health problems are usually established early in life: half have started by the age of 14 and three quarters by the age of 24. Those with more severe conditions are more likely to leave school without any qualifications, become a teenage parent, end up in prison or suffer from drug and alcohol condition. Yet most children and young people get no support.'*

The past few years have seen Government recognition that changes are needed in both the systems and the workforce that support children and young people (CYP) with their mental health. In 2015 the government published Future in Mind (FiM) which promised £1.4 billion of funding for CYP mental health and set out a vision<sup>iii</sup> for *'expanding services and work with schools and colleges so that an additional 345,000 CYP aged 0-25 will be able to access comprehensive support.'*

The 2017 Government Green Paper<sup>iv</sup> jointly published by the Department of Education and Department of Health and Social Care committed a further 300 million pounds with a focus on developing links between schools and health services and providing training to Designated Mental Health Leads in schools in Trailblazer areas. The charity Young Minds query why this training is only being rolled out to, at the most, a quarter of the country's schools over the next five years.

The government has also committed to providing 'parity of esteem' (PoE), ensuring mental health is valued as much as physical health. PoE is ensured by the Mental Health Investment Standard; the requirement that Clinical Commissioning Groups increase investment in Mental Health services in line with their overall increase in allocation each year. Programmes to achieve this were set up called the NHS's Five Year Forward View for Mental Health (5YFV) and Local Transformation Plans (LTPs)<sup>v</sup>. These are required in each area to detail how these extra funds are used to support their ambitions across the whole system NHS and non-NHS, to provide services for CYP. In 2019 the NHS Long Term Plan reiterated the importance of a strong start in life with support in schools a priority by 2022/23.

## Methodology

Healthwatch North Somerset acknowledge that this project was begun despite knowing the risk of significant delay due to staff hours reducing and new personnel at HWNS. We consulted with another Local Healthwatch who had conducted research with young people.

We devised a questionnaire with eight questions and open text boxes for free text. We liaised with Wellspring Young People Counselling Service to make sure the questions about service pathways made sense and were asked in a way that young people could understand their meaning. We produced a paper Questionnaire (Appendix 3) and a Consent and Information Sheet (Appendix 4) and set the age range of the survey from 13 years to 25 years. We provided consent information to the online survey.

Between December 2018 and March 2019 we engaged with young people in two ways; an online survey and face-to-face engagement using a tick sheet which gathered information. The online link was sent to schools with our posters and brought with us to face-to-face engagement sessions at schools. Wellspring Young People Counselling told us that for clinical and ethical reasons they chose not to distribute this survey to clients.

The online questionnaire was created using SmartSurvey and links to it were provided on our website, on our social media platform and used at engagement events. We contacted all mainstream schools in the county as well as colleges; Weston College, Broadoak Mathematics & Computing College and North Somerset Enterprise and Technology College. We were given permission to spend time in communal areas of Nailsea Secondary and Churchill Academy Secondary School.

We distributed the survey through additional contacts at Weston College, Public Health, Guides, Scouts and Explorers Groups, School nurses, CYP Substance Advice Service, Kooth, CAMHS at Drove Road and through the Weston Area Health Trust, Positive Step, Avon and Wiltshire Partnership NHS Mental Health Trust, Bridging the Gap Together, Wanted Not Wasted, SENCOs in schools, the SEND team, YMCA NS, Supportive Parents, YISP team, North Somerset Parent Carers Network.

## Summary of our findings

There were 89 young people who completed the survey, and 52 told us the school or college they attend; The Priory, Nailsea Secondary, Churchill Academy, Gordano School, Backwell School, Broadoak Mathematics and Computing College and Weston College. 37 young people chose not to name their school or college. 42% identified as female and 18% as male, while others chose not to say. Those aged 15 and 17 were the two groups most represented by this survey, making up 28% each of the total respectively. Some individuals talked about more than one service they had used. Our sample may not fully indicate the difficulties young people have accessing mental health provision, which we anecdotally hear is significant. Four schools have a free service from grant funded Wellspring Young People Counselling who collaborate with Exeter University's IAPT Recruit to Train programme that resulted from the FiM Report and 5YFV. There are no statutory funds for mental health services in schools.

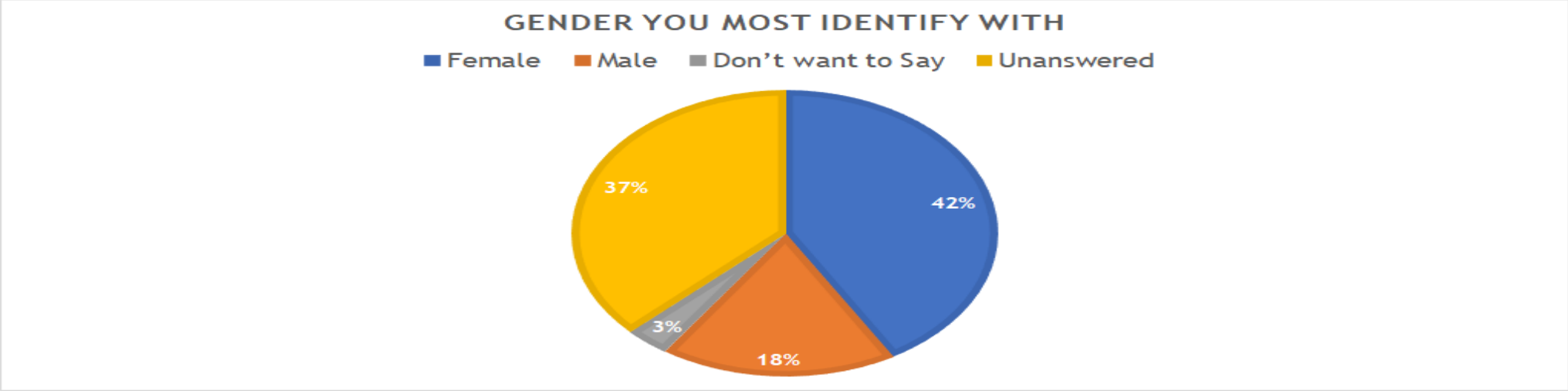
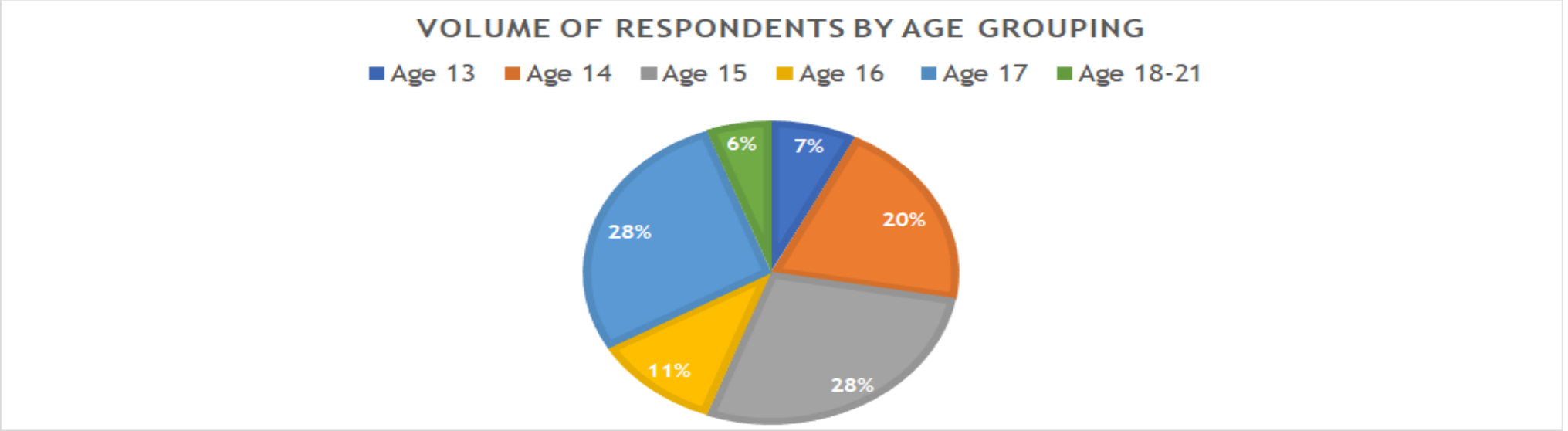
Mainstream schools told us what they offer their students;

- The Priory Community School; a student welfare officer/Counsellor, and staff who deliver hypnotherapy and mindfulness
- Nailsea Secondary; a Counsellor from Monday to Wednesday, 3 Wellspring Wellbeing Practitioners (20 hours of CBT sessions a week)
- Churchill Academy & Sixth Form; a school Counsellor full time, part time support worker who runs art therapy, resilience in groups
- Gordano School; a school Counsellor
- Backwell School; sixteen hours of counselling, 2 Wellspring Wellbeing Practitioners (10 hours of CBT sessions a week)
- Worle Community School; three qualified Counsellors (36 hours) two wellbeing assistants and trainee Counsellors (12 hours)
- Hans Price Academy; three paid Counsellors.
- Clevedon School; a Counsellor two half days a week and 2 Wellspring Wellbeing Practitioners (10 hours of CBT sessions a week)
- St Katherine's School; One designated Counsellor three days a week, a trainee Wellbeing Practitioner (5 hours of CBT sessions a week)
- Broadoak Mathematics and Computing College; two Counsellors, one in every day, the other one day per week. The school nurse goes in one day.
- Weston College; two half days across campuses by Positive Step wellness advisor. Has an Association of Colleges Beacon Award for Mental Health & Wellbeing
- North Somerset Enterprise and Technology College; none

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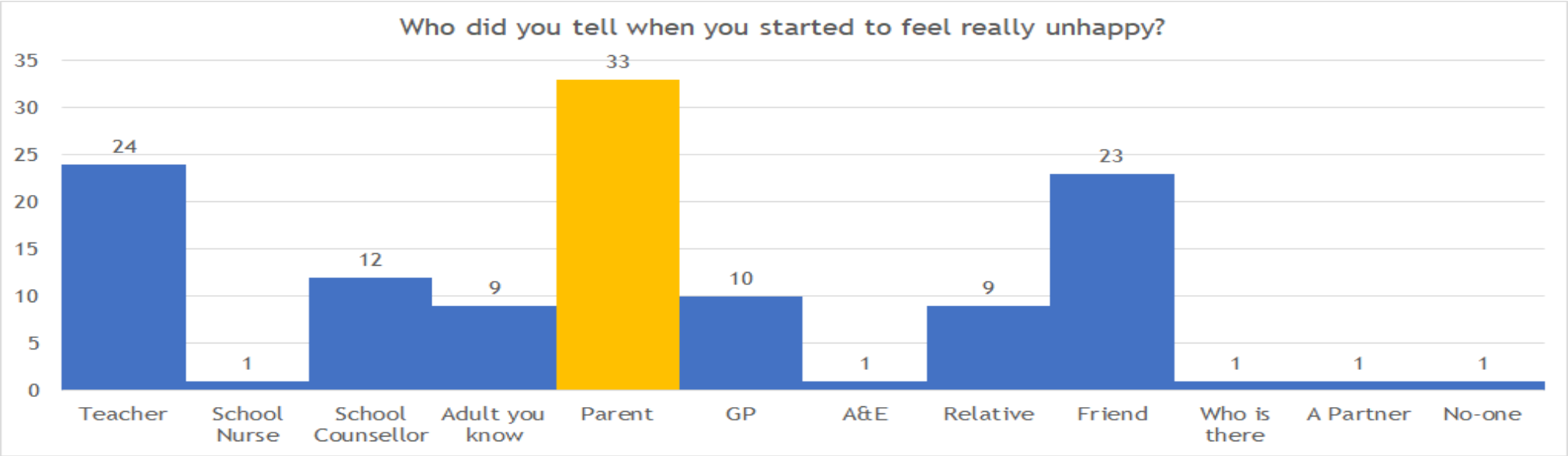
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Respondents were from school Year group 9, Year 10 Year 11, Year 12, Year 13, with 3 at College or University aged 18-21.

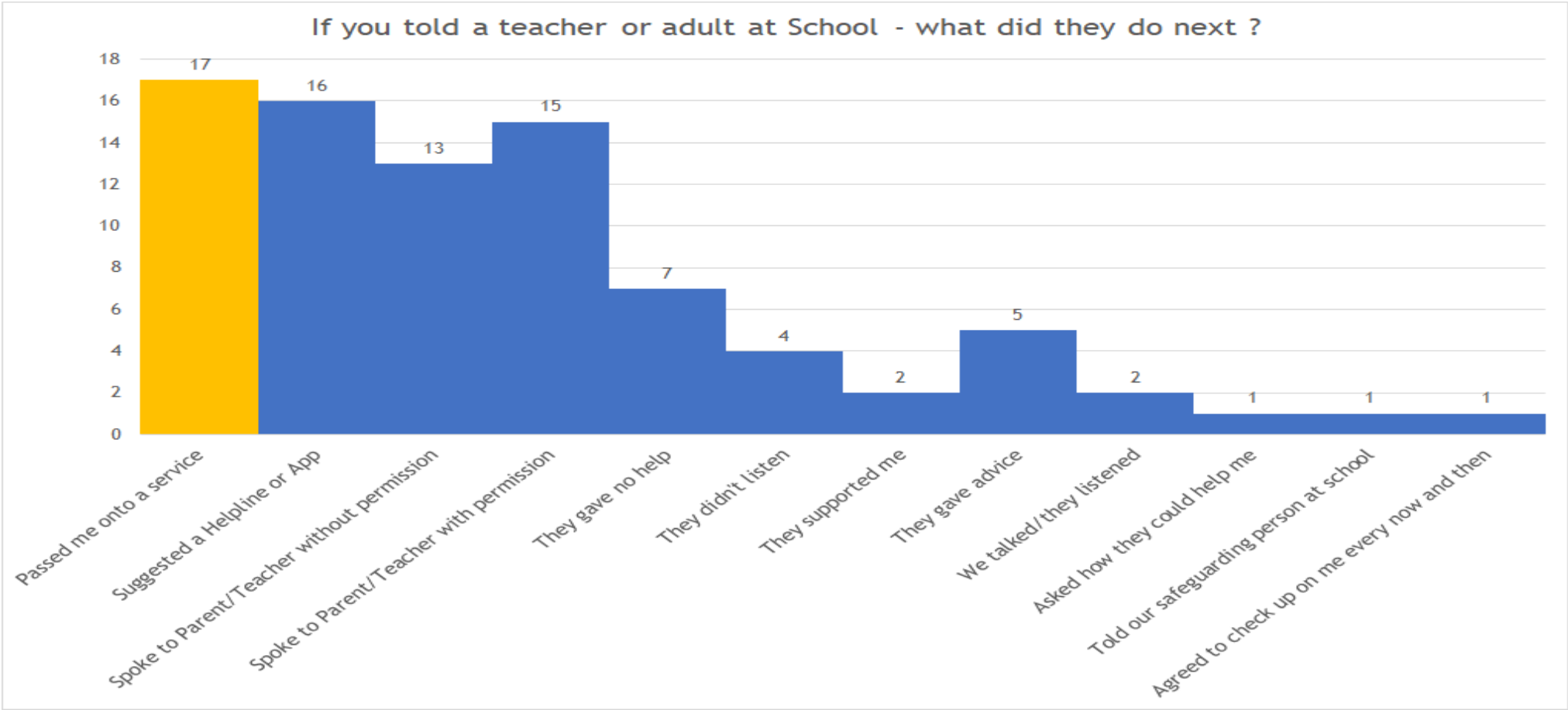




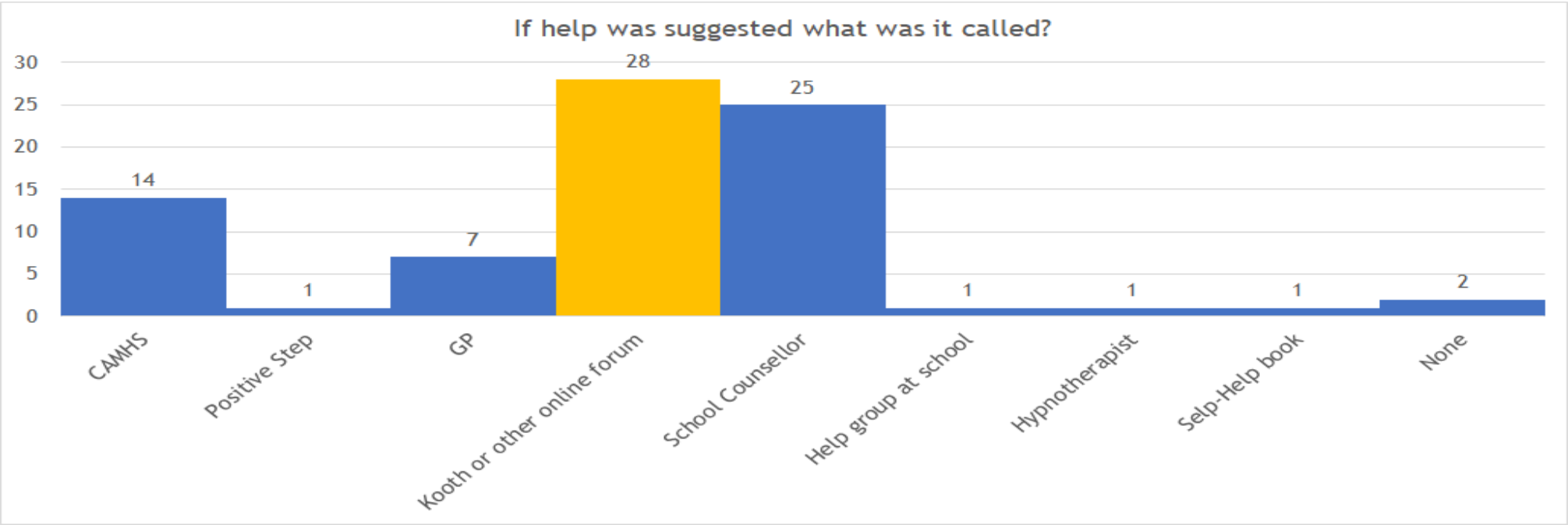
Young people were asked who they told when they had feelings that made them unhappy. The highest number (33) named their parent, with a friend (23) and a teacher being close second place (24).



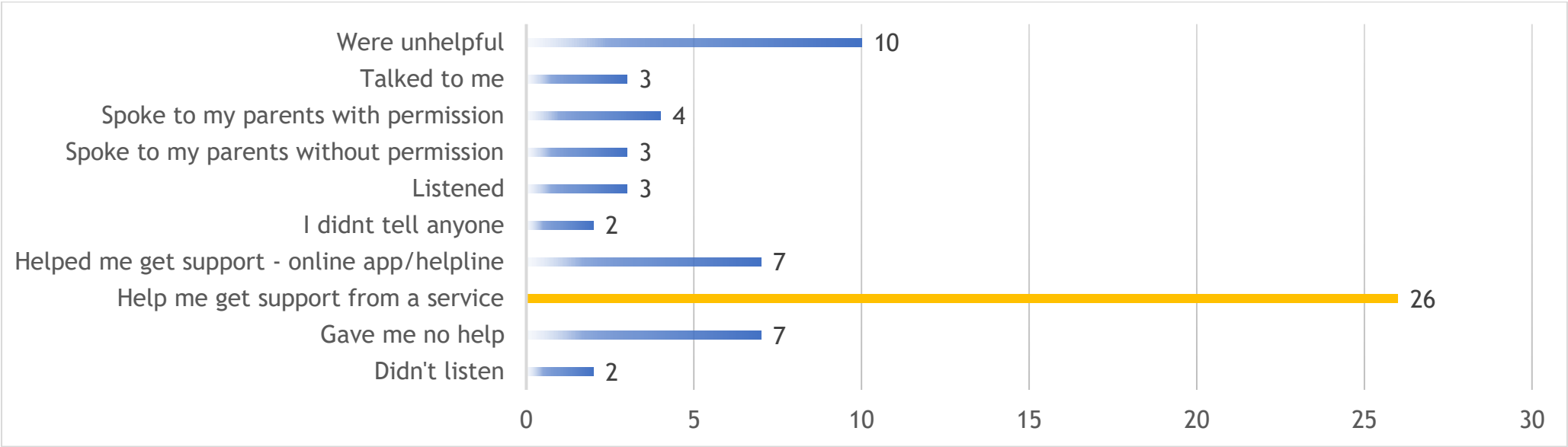
When asked what the sequence of events was when they told someone at their school or college, 17 young people were passed onto a service that would help them (we explained that ‘passing your name on to a service’ is called a referral). 16 people had a Helpline or App suggested to them. 61% reported other outcomes.



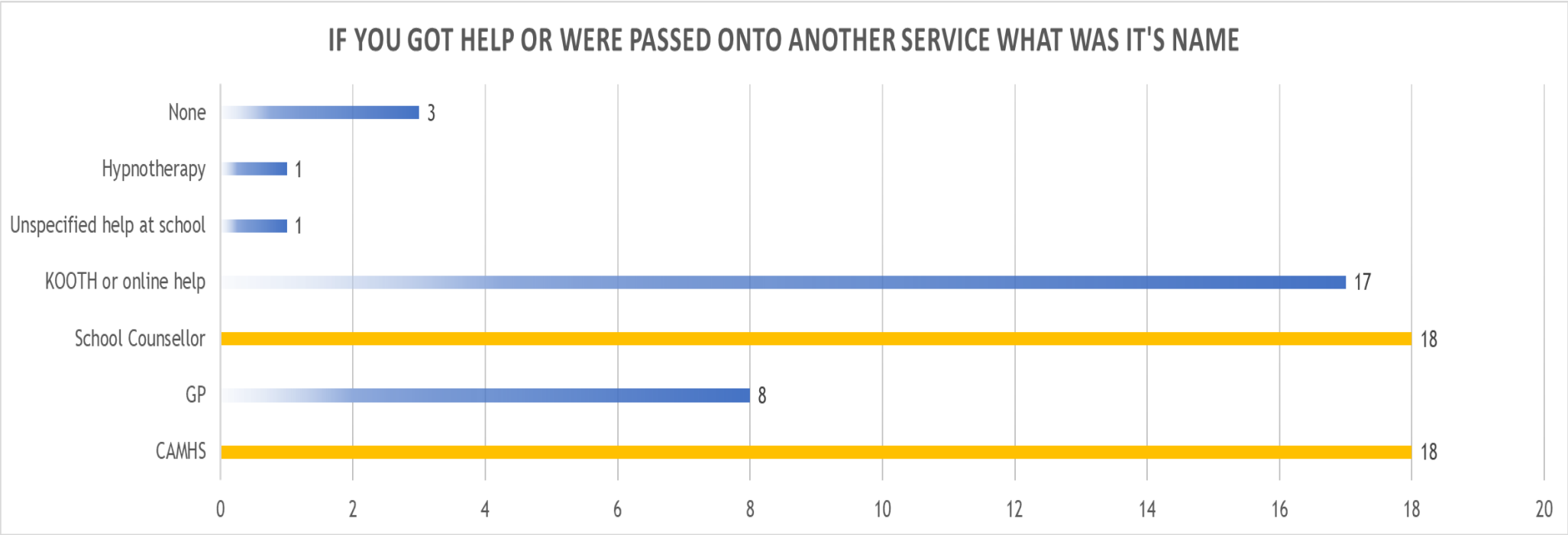
We asked which service was suggested by the school. The largest number said Kooth the online forum, another 25 said the school Counsellor and 14 said CAMHS.



We asked if they talked about their feelings to someone outside school what was the outcome. Most said they were given help to get support from a service. 37% reported others.



We asked what services they were passed on to or got help from, when they mentioned their feelings to someone outside their school or college setting? CAMHS, the School Counsellor and Kooth or other online help were mentioned.



We wanted to know about aspects of their experience;

Were you happy with the amount of time you waited for help?					
SERVICE	ABOUT THREE WEEKS	OKAY	TOO LONG	FAR TOO LONG	Grand Total
ANY SUPPORT				1	1
CAMHS		6	5	4	15
COUNSELLOR		1			1
KOOTH		7	1	1	9
NHS			1		1
POSITIVE STEP			1		1
SCHOOL COUNSELLOR	1		2		3
STREET 21		1			1
WELLSPRING COUNSELLING			1		1
<b>Grand Total</b>	<b>1</b>	<b>15</b>	<b>11</b>	<b>6</b>	<b>33</b>

The next four tables are their responses to being asked whether they felt respected and listened to by the service, they felt part of decision making, what they felt about the length of time they received help for, or if the service helped them feel better.

Did you feel respected and listened to?			
SERVICE	NO	YES	Grand Total
ANY SUPPORT	1		1
CAMHS	7	8	15
COUNSELLOR		1	1
KOOTH	2	7	9
NHS	1		1
POSITIVE STEP		1	1
SCHOOL COUNSELLOR	1	2	3
STREET 21		1	1
WELLSPRING COUNSELLING	1		1
<b>Grand Total</b>	<b>13</b>	<b>20</b>	<b>33</b>

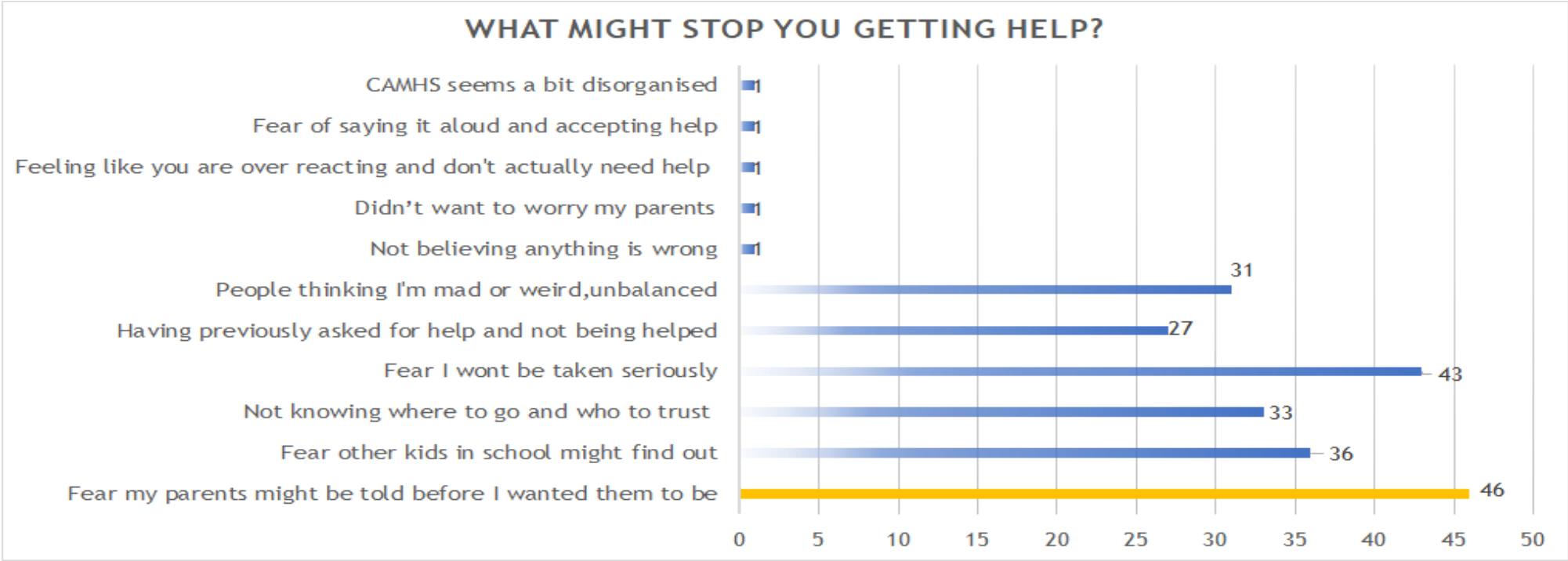
Did you feel part of the decision making?			
SERVICE	NO	YES	Grand Total
ANY SUPPORT	1		1
CAMHS	9	6	15
COUNSELLOR		1	1
KOOTH	3	6	9
NHS	1		1
POSITIVE STEP		1	1
SCHOOL COUNSELLOR	1	1	2
STREET 21		1	1
WELLSPRING COUNSELLING	1		1
<b>Grand Total</b>	<b>16</b>	<b>16</b>	<b>32</b>



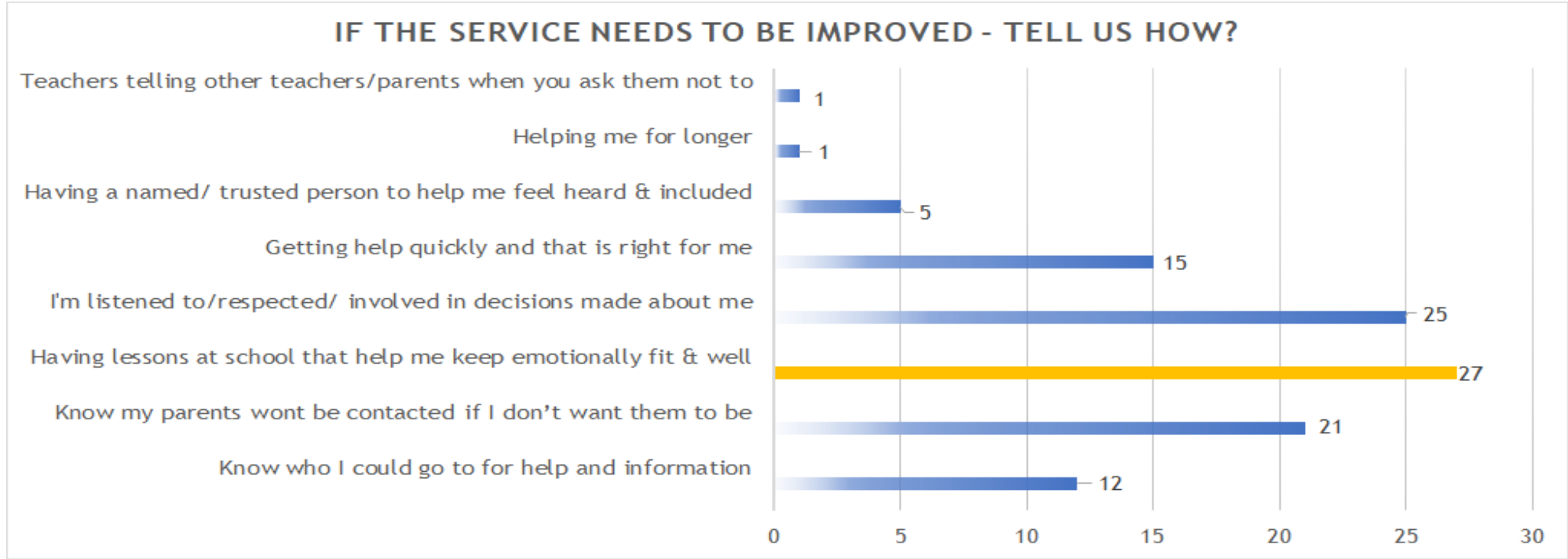
What about the length of time you got the help for; just right, not long enough, too long?				
SERVICE	JUST RIGHT	NOT LONG ENOUGH	TOO LONG	Grand Total
ANY SUPPORT				
CAMHS	5	7	2	14
COUNSELLOR	1			1
KOOTH	6	2	1	9
NHS		1		1
POSITIVE STEP	1			1
SCHOOL COUNSELLOR		3		3
STREET 21	1			1
WELLSPRING COUNSELLING			1	1
<b>Grand Total</b>	<b>14</b>	<b>13</b>	<b>4</b>	<b>31</b>

Did the service help you feel better?					
SERVICE	NOT AT ALL	A BIT	A LOT	Grand Total	
ANY SUPPORT	1			1	
CAMHS	6	7	1	14	
COUNSELLOR	1			1	
KOOTH	3	3	3	9	
NHS	1			1	
POSITIVE STEP			1	1	
SCHOOL COUNSELLOR	1	2		3	
STREET 21			1	1	
WELLSPRING COUNSELLING	1			1	
<b>Grand Total</b>	<b>14</b>	<b>12</b>	<b>6</b>	<b>32</b>	

We asked about six things we felt might be a barrier to young people trying to get help, or gave them an ‘other’ text box. We gained the following response



When we asked how services might be improved, with tick box options and an ‘other’ text box, we were given a number of answers, seen below;



Young people also took the opportunity to give us qualitative statements in open text boxes. They summarise their experience. The feedback has been arranged by theme;

#### About CAMHS;

‘They were really helpful’

‘Didn’t get on to the service first time round but went back second time and went to the bottom of the waiting list and got good help’

‘Spent over a year waiting to be seen by someone...stopped attending...rearranged who I was seeing and my situation improved. I continue to attend appointments once a fortnight and find it somewhat helpful’

‘They gave up and often compared me to other patients who were ‘worse’’

‘Gave really good advice’

‘CAMHS is bad and didn’t provide me with the help I required’

‘My experience changed depending on who I was seen by’

‘Not too bad but not great either’

‘Waited six months then was discharged after five sessions’

‘Waited 3 months only to be forced into family counselling which I didn’t want’

‘They were specific to my needs’

‘The support I have been receiving is insufficient for my needs, the waiting times are long and I don’t feel enough people are being listened to in the early stages. You are left to your own devices and don’t receive enough information or guidance.’

#### About KOOTH:

‘It crashed first time using it, and there was no one available second time, so I didn’t bother using it after that’

‘Just repeating what I know’

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‘They keep everything anonymous and you can ask to talk to the same person each time you sign in’

‘They were very helpful’

‘It made sense and was helpful’

About school/ school Counsellor;

‘School have been more supportive and easily accessible than any adult or child mental health services’

‘School didn’t help, I had to get help outside of school. It was only then my mental health was considered’

‘The waiting list was really long and I felt bad for going because I knew so many other people needed her and I was taking their spot.’

‘She was rude to me for crying then told me to stop seeing her’

‘Not enough time each week’

‘Made me feel worse at the end of each session’

‘I’ve seen the school Counsellors before and I’ve been to my actual doctor and counselling sessions. They didn’t really help though. I just wanted to be normal like everyone else so I quit going’

‘Was excellent for listening and advice, really helped me to help myself’

Unspecific services/mixed;

‘I tried to get some support for my anxiety and stress issues but I found the process overall a bit judgemental...so I ended up not seeking help. Later on, we did talk to some teachers about counselling but they have not followed up on it or given me any advice about (it).’

‘It was difficult to find support at times, I was self-reliant’

‘Dreadful’

Positive Step; ‘It helped me become more confident’

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## Summary of the local picture:

The local picture of support for young people in schools is fragmented, a problem seen elsewhere and picked up by the Children's Commissioner<sup>vi</sup> Early Access' report in April 2019. There is no national requirement for secondary schools to have Counsellors and there is no funding locally to provide for this kind of intervention in school. Wellspring Youth Counselling is the only organisation with IAPT Children's Wellbeing Practitioners. It offers CBT inside four schools in North Somerset.

The resulting patchwork of ad-hoc provision may vary in evidence-base and quality. North Somerset is not one of the Trailblazer areas in the country receiving the Green Paper<sup>viii</sup> extra funding training to schools. In November 2018 in association with the Anna Freud Centre, The Mental Health Services and Schools Link Programme (Cascade) rolled out two days of training, where staff from 8 local secondary schools met local services from the statutory and voluntary sector to begin collaboration and integrated working. Following these, Network meetings for Mental Health contacts in schools have been initiated and will be held three times a year. A newsletter with multi-agency input will be sent out four times a year. As part of the Trusted Relationships funding Kooth has been extended to 10 year olds and up to 25 for Care Leavers and young people with learning disabilities.

In the draft North Somerset Local Transformation Plan (LTP) 2018-20 one of their highest priorities for CYP is Improving Access to Psychological Therapies (IAPT) a community-based service using a Counsellor or Psychological Wellbeing Practitioner to provide therapies including Cognitive Behavioural Therapy or help referral to specialist treatment. North Somerset's LTP says intervening early and building resilience is a priority action to *"improve the Early Help offer through CYP IAPT"*. A Primary Care Liaison Team at the Avon and Wiltshire Partnership NHS Mental Health Trust (AWP) at the Long Fox Unit, Weston General Hospital provides referral into secondary care services for young people over 18. Positive Step offers IAPT services if young people are 16 and a wellness advisor works one day a week across Weston College campuses. North Somerset Community Partnership and The local authority jointly fund nurses to provide mental health guidance, assessment and support to children's services clients.

Children and Adolescent Mental Health Services (CAMHS) assess and treat CYP with emotional, behavioural and serious and enduring mental health conditions. North Somerset CAMHS and the Bristol, North Somerset and South Gloucestershire Clinical Commissioning Group (BNSSG CCG) who fund them held a mapping event in September 2018 for professionals and stakeholders to identify local gaps in provision. The event noted that there is a wait of 46 weeks for CYP into this service, a gap in services for early intervention and insufficient secondary school staff with mental health training.

## Recommendations for change

Healthwatch regulations stipulate that service providers and commissioners have a duty to respond to local Healthwatch reports and recommendations within 20 working days, in writing, to acknowledge receipt and to explain what action they intend to take; or if they do not intend to take action they must explain why. (Health and Social Care Act 2012: Addendum to summary report: issues relating to local Healthwatch regulations).

Healthwatch North Somerset recommends the following based on the feedback received. We believe the following recommendations to be achievable, affordable and evidence based.

- There should be delivery of planned investment into the early help and preventative emotional wellbeing and mental health provision either individually or in groups inside schools and colleges
- There should be scrutiny of Mental Health provision ensuring what is on offer in schools and colleges is evidence-based psychological therapies, that it is easily available and at times when they are needed most by young people
- There should be workforce development to provide early intervention workers. In the event that Trailblazer funding continues BNSSG CCG should apply to become a Trailblazer site to establish a pre-camhs mental health support team to prevent the escalation of need and reduce waiting list pressure on camhs
- Schools should equip Mental Health Leads with time for training and the knowledge to signpost to pathways of care so that CYP no longer fear they won't be taken seriously when they ask for help and are given lessons that support their emotional wellbeing



## Appendix 1:

We would like to acknowledge all the schools who helped distribute this survey and groups in the voluntary and statutory sector; Future in Mind group, Warriors of Wellbeing, YISP team, Weston College, Public Health North Somerset, Guides, Scouts and Explorers Groups, School nurses, CYP Substance Advice Service, Kooth, CAMHS at Drove Road and through the Weston Area Health Trust, Positive Step, Avon and Wiltshire Partnership NHS Mental Health Trust, Bridging the Gap Together, Wanted Not Wasted, SENCOs in schools, the SEND team, YMCA NS, Supportive Parents, YISP team, North Somerset Parent Carers Network.

## Appendix 2: Responses from commissioners and providers of services

### Colin Bradbury, Area Director - North Somerset, NHS Bristol, North Somerset & South Gloucestershire Clinical Commissioning Group

The CCG is working closely with Local Authority and other Future in Mind partners to maximise opportunities within current and any future investment for more preventative emotional health and wellbeing provision. Further, in 2018-19, the Bristol, North Somerset and South Gloucestershire Clinical Commissioning Group invested £500,000 recurrently to increase workforce within specialist CAMHS in North Somerset and will continue to work with all partners to fully understand and seek solutions for workforce challenges. BNSSG STP recognises this challenge across all aspects of mental health and is leading on a workforce programme incorporating development workshops and North Somerset is part of this work and will benefit from its work.

### Sarah Dodds, Director of Nursing, Weston General Hospital

North Somerset CAMHS are grateful to Healthwatch for this comprehensive report and feel it gives an accurate summary of the current position.

We welcome the feedback and recommendations provided and are currently working with the Care Quality Commission and NHS Improvement to ensure that the services we provide are safe, effective, caring, responsive and well led. We are also working with Commissioners to ensure that we are all aware of the needs of the children and young people in North Somerset and that appropriate services are being commissioned and delivered to meet that demand.

**There should be delivery of planned investment into the early help and preventative emotional wellbeing and mental health provision either individually or in groups inside schools and colleges**

North Somerset CAMHS has been working with our primary schools to raise awareness of mental health and provide them with support, but this is currently not funded.

**There should be scrutiny of Mental Health provision ensuring what is on offer in schools and colleges is evidence-based psychological therapies, that it is easily available and at times when they are needed most by young people**

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North Somerset CAMHS agree with this statement and hope that our local schools will invest in the new IAPT mental health in schools practitioner which is being offered at Exeter University.

**There should be workforce development in CAMHS to provide early intervention workers which other areas call Education Mental Health Practitioners. These would help prevent the escalation of young people's needs and reduce waiting list pressure**

North Somerset CAMHS is developing their workforce in line with NICE guidelines and best practice in relation to key clinical pathways for CYP mental health presentations however we do not at present have any funded early intervention posts. This lack of step down care has been on our risk register for some time and we have made this issue known to the present CCG, CQC and QNCC.

**Schools should equip Mental Health Leads with time for training and the knowledge to signpost to pathways of care so that CYP no longer fear they won't be taken seriously when they ask for help and are given lessons that support their emotional wellbeing.**

North Somerset CAMHS support this statement.

Sarah Rees, Director, Wellspring Young People Counselling

Wellspring feels that all the excellent, and mostly voluntary or for almost nothing work, done by their teams of highly professional Counsellors, Therapists, Admin staff and others, is completely undermined by this unrepresentative report and one respondents' feedback. It's disappointing that the respondent was dissatisfied with the service they received at our charity, and also that Wellspring has no way of putting it right for them. Wellspring agrees with the respondent that our waiting lists are too long, purely because of lack of funding, and is continually working hard to find new sources of funding to enable the service to continue. Wellspring sincerely hopes this report won't put off others from seeking Wellspring's help.

Appendix 3: Questionnaire

WHAT I THINK COUNTS!

Name of School/College you attend.....  
(Please circle) Year Group you are in: Year 9 / Year 10 / Year 11 / Year 12 / Year 13 /other.....  
(Please circle) The gender you most identify with: Male / Female / Don't want to say / Other.....  
First part of your postcode or the name of Town/Village you live in.....

1. Getting help

Who did you tell when you started to feel really unhappy or sad?  
(Please circle) Teacher/School Nurse/School Counsellor/Adult you know/Parent/GP/A&E/Relative/  
Other.....

2. Help at school

If you told a Teacher, School Nurse, School Counsellor or Adult you know in school, what did they do next?  
(Please circle) a) Pass your name on to a service (this is often called a referral) / Suggested a helpline or App to use/ Spoke to your parents with permission / Spoke to your parents without permission/Gave no help/ Were unhelpful / Didn't listen  
Anything else they did? .....  
b) If help was suggested, what's name of the Service/Helpline/App etc. the School sent you to/told you of?

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(Please circle) Children & Adolescent Mental Health Team (CAMHS) / Your GP/ School Counsellor / Kooth /

Other (Please give name) .....

### 3. Help from outside school

If you told someone outside school; Parent, GP, A&E, Relative, Adult friend, did they?

(Please circle) a) Help you get support from a service/help you get support from a helpline or App/Spoke to your Parents with permission/Spoke to your parents without permission/Gave me no help/Were unhelpful/Didn't listen

Other (Please give name) .....

b) If you got help or were passed on to another service or helpline/App what was its name/s?

(Please circle) Children & Adolescent Mental Health Team(CAMHS)/Your GP/School Counsellor/Kooth

Other (Please give name) .....

### 4. Tell us a bit more about the services you used

Add the name of the service you used (Please circle your own feelings about how you were treated or how you were helped)

Name of Service you used for example: CAMHS, KOOTH, HERO	The time you waited for help from the Service?	Did you feel respected & listened to?	Did you feel part of any decision making?	What did you think about the length of time you got the help for?	Overall did the service help you feel better?

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	Ok	Yes	Yes	Too long	Helped me a lot
	Too long	No	No	Just right	Helped a bit
	Far too long			Not long enough	Did not help at all
	Ok	Yes	Yes	Too long	Helped me a lot
	Too long	No	No	Just right	Helped a bit
	Far too long			Not long enough	Did not help at all
	Ok	Yes	Yes	Too long	Helped me a lot
	Too long	No	No	Just right	Helped a bit
	Far too long			Not long enough	Did not help at all
	Ok	Yes	Yes	Too long	Helped me a lot
	Too long	No	No	Just right	Helped a bit
	Far too long			Not long enough	Did not help at all

## 5. What else can you tell us about the services that you used?

.....

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**6. If the service needs to be improved tell us how**

*(Please circle as many as you want below or tell us what you think).*

- a) Know who I could go to for help and information.
- b) Know that my parents won't be contacted straight away, if I don't want them to be.
- c) Having lessons at school which will help me keep emotionally & mentally fit as well as PE.
- d) Feeling that I'm listened to, respected and involved in any decision being made about me.
- e) Being able to get help quickly and that is right to me.
- f) Having a named trusted person who will help me to feel heard and included.
- g) Other things like.....

**7. What might stop you or other young people from trying to get help?**

*(Please circle as many as you want below or tell us what you think).*

- a) Fear my parents might be told before I wanted them to know.
- b) Fear that other kids at school might find out.
- c) Not knowing where to go to and who to trust.
- d) Fear that I won't be taken seriously.

- e) Having previously asked for help and not been helped.
- f) People thinking I'm mad, weird or something.
- g) Other things like.....

8. Anything else you would like to say?

.....

.....

THANK YOU for filling in this survey!

The information you have given us is anonymous and will only be used to help improve Mental Health Services and the Wellbeing of Children and Young People in North Somerset



## Appendix 4:

### About this survey - and your rights

This survey is aimed at hearing your opinion about the ways you are given help when they're feeling low. We want to understand how you would want to be given support, or how you currently use any support that you have found out about through your college, school, clubs, social networks and people at home.

This work is being led by Healthwatch North Somerset. You can find out more about us at <http://www.healthwatchnorthsomerset.co.uk>

- This survey is confidential and anonymous. We do not collect any personal information (e.g. names, address etc.)
- The information you give is collected by Healthwatch North Somerset using a paper survey and an online site at SmartSurvey
- We collect and keep paper and digital records securely and lawfully only for as long as permitted.
- The surveys are only used for the purpose of this project.
- Comments you make may be used in a report (though any comments that could make it possible for someone else to identify you not be used)
- The information will be shared in order that we can carry out our authorised work to *'find out what matters to people and help make sure their views shape the support they need.'*
- Your comments are passed on to people who commission, provide and plan services for emotional and mental health, but this will never be personally identifiable information.

By completing the survey you are consenting to being involved in the ways outlined above and having your voice inform the future of services for young people.

Our website signposts young people to support and wellbeing services in North Somerset and the surrounding areas <https://www.healthwatchnorthsomerset.co.uk/signposting-services>

Or go to the North Somerset Online Directory and use keywords Wellbeing or Mental Health <http://nsod.n-somerset.gov.uk/kb5/northsomerset/directory>

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*Accessibility: If you require this document in another format, please let us know*



July 2019

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<sup>i</sup> [https://www.ucl.ac.uk/ioe/sites/ioe/files/patalay\\_fitzsimons\\_mental\\_ill-health\\_among\\_children\\_of\\_the\\_new\\_century\\_-\\_september\\_2017.pdf](https://www.ucl.ac.uk/ioe/sites/ioe/files/patalay_fitzsimons_mental_ill-health_among_children_of_the_new_century_-_september_2017.pdf)

<sup>ii</sup> [https://www.ippr.org/files/2018-10/1540372212\\_fair-funding-for-mental-health-october18.pdf](https://www.ippr.org/files/2018-10/1540372212_fair-funding-for-mental-health-october18.pdf)

<sup>iii</sup> Future in Mind March 2015 [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/414024/Childrens\\_Mental\\_Health.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/414024/Childrens_Mental_Health.pdf)

<sup>iv</sup> [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/664855/Transforming\\_children\\_and\\_young\\_people\\_s\\_mental\\_health\\_provision.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/664855/Transforming_children_and_young_people_s_mental_health_provision.pdf)

<sup>v</sup> <https://bnsgccg.nhs.uk/library/transformation-plan-children-and-young-peoples-mental-health-and-wellbeing-2016-2018/> The 2018-20 North Somerset LTP is unpublished

<sup>vi</sup> <https://www.childrenscommissioner.gov.uk/publication/early-access-to-mental-health-support/>

<sup>vii</sup> <http://www.yhscn.nhs.uk/media/PDFs/children/Docs%20and%20Links/Mental-health-promotion-and-prevention-training-programmes.pdf>

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