

Mental Health Assessment & Counselling Service (MACS)

Feedback on Proposed Facilities

September 2022

Background

Healthwatch Medway was approached to gather feedback about the proposed Mental Health and Counselling Service in Medway. The service aims to provide a dedicated mental health team within the emergency department at Medway Hospital. The team will provide prompt assistance to people who arrive with their mental health as the primary concern, alongside physical care if required.

Who did we speak to?

During September 2022, we approached the following organisations:

- Sunlight Development Trust
- Mental Health Medical Professional
- Medway Safe Haven
- Open Road Medway Wellness Centre
- The Lived Experience team working on the Community Mental Health Transformation
- Mental Health Voice Network

We spoke to nine professionals and seven members of the public.

Summary of the feedback

There was a lot of interest in the potential of the new service, with many people asking questions about how the new service would work, and how it would differ from existing and earlier procedures.

More support for those experiencing difficulty with their mental health was very welcomed, though there were concerns on how it would fit in with other services and whether there would be enough staff available and a large enough capacity available to meet demand.

There are many ideas on how the service would best be able to support people, and how that may look, including caring staff, a comfortable environment, consideration for safety, and joining up care with other services in Primary Care and the Voluntary Sector.

Themes arising from discussion

Staffing and Capacity

All the groups we spoke to had concerns over the capacity and staffing of the unit. Most people feel that it may be difficult to recruit the appropriate staff for the unit and consider whether the capacity would be enough for demand.

People would like to see supportive and caring healthcare professionals, who have the time to listen to them, with a satisfactory level of staffing, and perhaps peer support, to help provide this. There should be staff available at a more senior level, such as a psychiatrist so that treatment is not delayed.

Other comments included:

- Being aware of different cultural needs
- Communicating to patients while they are there, not just 'looking from afar', and informing them of how long they may be waiting for assessment
- To allow relatives to accompany the patient
- For visibility of the Mental Health Team on a 24/7 basis

Triage, Privacy and Patient Safety

All groups expected that the triage area/waiting room would be separate from the main Emergency Department waiting room. The environment is very important and should allow for different needs of the patients - for example, a quieter area for those sensitive to noise. It should feel like a safe place, which respects the privacy of the patient when seeking help. Some patients may feel judged by members of the public if they are left to wait among those in the main waiting area.

To keep patients safe, there should be a balance in the socialising of patients depending on an individual's level of risk and stability. There should be security for staff and patient protection.

There is a hope that triage would be shorter at a dedicated service, as currently, the opinion is that waiting times are very long for an evaluation, with overnight waits for staff to arrive for the morning shift.

Other comments included:

- The need for effective signposting and support upon discharge from the unit
- Entertainment available for patients
- To work with other organisations, to signpost them to other services if they are more appropriate
- Whether the service will support those with a recent history of drug/alcohol abuse

Continuity of Care and Mental Health Transformation

There was some discussion on how the new service will fit in with the current plans for Mental Health Transformation in Kent and Medway. One group mentioned a previous team (quoted as 'MAAST' or 'MHAASST') that responded to patients in the Emergency Department. There is a stigma associated with this team, as it was felt the service was not discreet or caring, and due to negative past experiences, some patients decided to travel to Maidstone to avoid using them. There was concern expressed that the set-up for the MACS could be similar.

The service should link up with other care providers, to share information and inform ongoing treatment. Collaborating with social prescribers and voluntary organisations would help support patients, with appropriate signposting provided, so that they are not left without assistance once they are discharged back to their GP. It is important to consider the right services to signpost to and to listen to patients' experiences of other services, that may be negative and therefore not appropriate.

A suggestion was made for the use of a 'script' - previously adopted by NHS Direct. The script would be written for repeat callers so that they always received consistent words to help them, and it was effective. They would like to see something like this adopted for those who regularly attend, but are not a danger to themselves or others, and need some consistency.

Positive Sentiments

Everyone welcomed the idea of a Mental Health Assessment & Counselling Service, and expressed the following positive sentiments:

- It would be a more appropriate environment than an Emergency Department waiting area
- It will help those patients who are not the most serious of cases but need urgent help
- There would be less reliance on the Crisis Resolution Team
- The availability of talking therapies would be extremely helpful
- Patients will not be sent many miles from home for assessment
- Would be good to have a place of safety and a comfortable environment
- Links to community resources to provide continuous or further support

Conclusion and Suggestions

A dedicated service for Mental Health support is desired by the people we spoke to. There are many ideas on how the service could work, and clarity on what the service would and would not provide is important.

People would like to see a calm, supportive and safe place they can attend knowing they will receive timely assistance, with dignity and respect. Encompassing talking therapies, social prescribing and signposting would help support all-round care.

Communication with patients about the process and when they will be seen, as well as there being someone to talk to and provide support while they are waiting will help patients feel safer and respected.

Further consultation is needed on what the public expects from the service, and how they feel this can be met, as well as consideration on how this can be provided with the support of staff and organisations outside the medical profession. The environment must be considered, and how it may allow support to be given to different presentations of patients, considering patient safety and individual health needs.