

Creating a Mentally Healthy City

Healthwatch Birmingham welcomes the opportunity to contribute to the Mentally Healthy City Strategy. Our key role is to make sure that patients, the public, service users, and carers are at the heart of service improvement in health and social care. We would like to highlight areas of our work that are relevant to the Mentally Healthy City Strategy.

Healthwatch Birmingham welcomes the opportunity to feed into the process of creating Mentally Healthy City Strategy. We are pleased that the council are engaging with the public at this early stage of forming the strategy.

We are pleased the council have invited respondents to continue to engage with this work, and look forward to see the future engagement activities on this subject. We encourage the council to use the broadest possible engagement activities to engage with all communities of Birmingham. We would like to see activities that suit people who are digitally excluded, and those with language disabilities and barriers.

Patient experiences

Healthwatch Birmingham has produced several reports in recent years looking at aspects of the mental health system in Birmingham. Whilst these reports have looked at some specific services, the recommendations and learning are applicable to wider areas of a mentally healthy city.

Earlier this year, Healthwatch Birmingham looked at [Experiences of NHS Community mental health services in South and East Birmingham](#).

The study identified issues around:

- **Quality of service:** 49% rated NHS community mental health services as poor or very poor.
- **Waiting times:** 22% waited 3-6 months for a first appointment following referral.
- **Over-reliance on prescription medication:** 57% received prescription medication compared to only 19% that received talking therapy.
- **Consistency of care:** 46% could not contact the service to get the help they needed.
- **Care planning and review:** 59% did not have a care plan.

While just over half the people who shared their experiences said they were treated with kindness, dignity and respect by community mental health services, they also told us about the improvements they would like to the care they received. These include:

- Improve access to appointments and reduce waiting times for treatment.



- Offer people reviews after treatment and re-refer people if more support is needed.
- Ensure that care and support is personalised following a discussion with people about their needs.
- Produce and follow good care plans.
- Offer more than just medication.

In response Birmingham and Solihull Mental Health NHS Foundation Trust have created an action plan to tackle the improvements needed. We will shortly be publishing an impact report with an update on this work.

Our most recent report on [Experiences of the neurodevelopmental assessment and diagnostic pathway for children and young people in Birmingham](#) has highlighted how a failure to provide timely support has led to an increased prevalence to mental ill health in young people affected, and their families.

We found the following issues:

- Length of wait for the referral and professional support.
- Professionals not submitting documents on time and referrals being missed, further delaying the assessment and diagnostic process.
- Restrictive criteria and thresholds.
- Professionals' knowledge of the referral pathway – how, when and who to refer to.
- Focusing on parenting style and child's behaviour rather than the child's symptoms.
- Poor communication and partnership working with families.
- Lack of support for families before and after diagnosis.

People told us they want to see the following improvements:

- Support families, children and young people to 'wait well'.
- Increase training and support for professionals referring children and young people for assessment.
- Improve the assessment and diagnosis process.

In response to these findings Birmingham and Solihull Integrated Care Board (NHS BSOL) has committed to taking actions including:

- Developing better resources for parents/carers and young people explaining the support available to people while they wait for assessment.
- Working with 40 schools across Birmingham and Solihull as part of the Partnership for Inclusion of Neurodiversity in Schools (PINS) Project.



- A quality improvement programme focused on improving the assessment and diagnosis process and reducing waiting times.

Our report in 2023 on [How has the cost-of-living crisis affected the health and wellbeing of people in Birmingham and Solihull?](#) found that 69% of respondents from Birmingham and Solihull reported that their mental health had worsened due to the cost of living crisis. This was significantly higher than national surveys. Our interactive report gives details on the breakdown of these findings.

Healthwatch Birmingham looked at [Access to mental health services for children and young people in Birmingham: what needs to change?](#) In 2021. We found that among the issues identified were:

- Delayed responses from the mental health crisis support team putting young people at risk
- Difficulties getting suitable support leading some young people and their parents to turn to A&E as their only option
- Long waiting times after referral meaning opportunities for early intervention are missed, with young people's mental health deteriorating before their first assessment
- Lack of care plans resulting in some young people receiving insufficient care and/or inappropriate treatment for their needs
- Inadequate understanding and support for young people with mental health issues and other conditions such as autism

We followed up on these issues in 2022 and found that some improvements were made to service as a result of our report. These include:

- Co-production with patients and carers, for example young people with lived experience designing training modules for staff.
- Better communication with patients and families, including improvements to the Forward Thinking Birmingham (FTB) website and reviews of clinical letters sent to patients.
- Funding for FTB staff to ensure greater consistency and variety of roles, alongside a Peer Support Worker programme, more student nurse placements and recruiting people with lived experience of mental health issues.
- Increased staff awareness in working with patients with various needs, such as training in autism, reflective practice sessions and motivational interview training for support staff and clinicians.

Our report [Health Inequalities: Somali people's experiences of health and social care services in Birmingham](#) discusses briefly about the stigma of mental illnesses, and the need for education and access to better treatments within the community.



Our [website](#) also features patient feedback for services across the city, including mental health and other health and social care services.

We look forward to seeing the strategy and its work develop.

Yours Sincerely,

A handwritten signature in black ink, appearing to read "sw", likely representing Sarah Walmsley.

Sarah Walmsley

Data and Insight Officer

