

# People who use SACMHF services

Survey report September 2013



**People who use Sandwell African Caribbean Mental Health services survey report**  
**2.9.2013**

The survey was evaluated by grouping together the most common themes to identify trends or patterns. This means that we will be able to consider the more popular ideas and the less common ideas. When these ideas have been considered the information can be used to support the work that the Foundation does on bids and proposals to secure funding for new services. The Foundation staff will go through this with you if needed, please ask if you need this support.

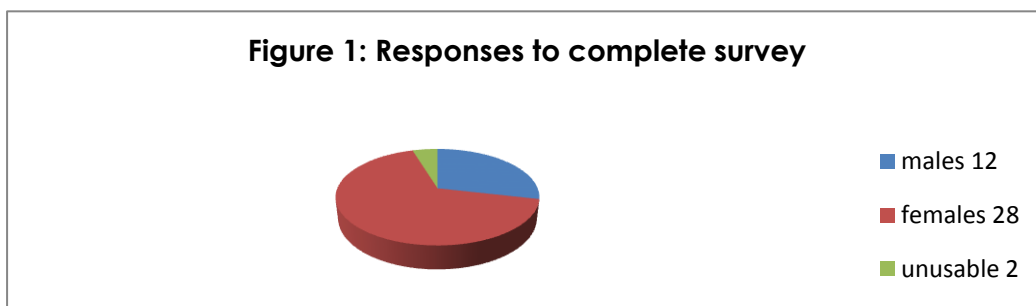
**1. General data**

The following provides some general data which informed the main findings:

- A total of 55 surveys were given out and of those 42 surveys were completed by people who use the Foundation's services.
- 2 surveys were not included in the findings as they were illegible.
- A total of 13 people who use the Foundation's services failed or refused to complete the survey.

**2. Gender**

Figure 1 illustrates a pie chart which outlines the breakdown of gender within the survey population:



**3. Questions**

This section will list the questions from the questionnaire and the answers for each question. Common themes will be grouped together which will be denoted by the number of similar answers given. A response to the comments given will be provided after the answers.

**Question 1: Current service Provision**

**During the last 12 months we have been delivering the following services: counselling, outreach, drop-in and breakfast club. Which of these services has been helpful to you and why?**

The participant's comments are outlined below:

### Drop-in

- useful to have someone to listen to +1
- Looks after me
- Culture is important to me
- Gets me out of the house
- I love the trips +6
- Gets me out and about
- Helping me to get better in my health +7
- Chance to make friends with people from a Caribbean background
- Being around people who understand is helpful +11
- Helping me to come to terms with my mental illness +8
- Contact with people with the same problems as you
- Something to do
- I would be isolated without it +9
- Enjoy it
- Nice to meet with Black people
- Wouldn't do much otherwise
- Emotional support
- Human contact
- I get to go to places and meet people +1
- I find it interesting
- Like informality
- Information and workshops are useful +8

### Outreach

- Helpful +4
- Helpful to have someone to help with organising things
- Allows personal time for discussion with support worker+3
- Gets me out and about +6
- Contact with people +8
- Something to do
- I get help to buy Caribbean food
- Help with IT
- Exchange ideas
- Confidence to do my job
- Enjoy it
- Helped me to get direct payments
- Wouldn't do much otherwise
- Staff understand me as a Black person
- Very reasonable
- Supportive +7
- Support to attend appointments +8
- Support with health and family issues11
- Emotional support+4
- Helpful with day to day living+7

- Sharing concerns
- Practical help is good, shopping
- Sorting out direct payments
- Help with welfare is good
- Appointment booked for face to face discussion
- Actions, task agreed
- Like it because the organisation is not too big
- Visited at home in my own surroundings

### Counselling

- It's making me feel better
- Confidence to do my job
- Helpful being able to talk to someone (especially with mum and brother suffering with mental health)
- Helped me to set goals
- Having regular sessions helped to create stability
- Counselling room comfortable and relaxing environment

### Breakfast Club

- Social interaction with others +5
- good food +1
- Enjoyable +4

### **Response from SACMHF**

The comments about the Drop-in service seem to focus upon friendships, being around people, having something to do and emotional support. The future of the drop in service is uncertain and could be subject to funding cuts in 2014.

The outreach service comments support the aim of the service offering practical support, help with daily living, help with bills & welfare etc. This service may be re-designed in the 2014.

The Breakfast club encourages individuals to use resources which exist within the community and to socialise over food. The comments support the view that this club aids social interaction.

**Action:** A meeting will be held early in the New Year with clients to discuss how and what can be done to ensure continuity of services so that people continue to have their needs met. This exercise will need to be undertaken in view of potential cuts to services of which SACMHF is currently unsure. All decisions made about the future of SACMHF's services will be fed back to clients as soon as the information comes in.

## **Question 2: Change & Transformation**

**What would you change about SACMHF's services to make them better, explain why.**

The participant's comments were as follows:

- Wider access in other regions
- Increase awareness of the services as they are vital
- Have services at the weekend
- More support for carers
- More signposting
- Fundraiser for client outings/activities to enable clients to afford outings
- More clients
- Would like to be able to be supported to go abroad
- Need a water machine
- Need a fan in the reception area
- Change radio station to African Caribbean one
- Go out into the community because I enjoy it
- Cannot see Kuumba's services improving if the organisation is being systematically scaled down because it sends out the message that Kuumba's services have become less important
- More active activities
- Clients need to be encouraged to help themselves and support each other especially on social activities, looking for work, developing skills and learning new ones
- More activities
- Available transport for people who find it difficult to go out

### **Response from SACMHF**

Here the comments are helpful and tell us what people want. The answers to this question will support us when writing bids for funds to support new services and will inform how new services will look. SACMHF has commenced a process whereby clients have an opportunity to be involved in the formulation of ideas for new projects/services and what should be included when drafting proposals.

Further to a response to a comment about more support needed for carers, when the survey was being analysed SACMHF received confirmation that a joint tender with 2 local organisations was successful. The tender translates to a contract to provide support services for carers. This service commenced on 1<sup>st</sup> October 2013.

Marketing the service does need to improve. The staff team is small and marketing which involves visiting other agencies is difficult. However, this challenge will be tackled head on and in 2014 a programme of visits will be

drafted to visit external agencies, businesses to talk to people about SACMHF services. People who use SACMHF services will be invited to get involved. Other projects to help people get training, develop skills to increase employment opportunities is being considered.

The activities schedule is completed jointly between clients and staff. The schedule is subject to change and all clients are encouraged to have an input into the type of activities which take place.

The view that de-commissioning certain of SACMHF services could be viewed as less important than other priorities is a view shared with other members of the African and Caribbean community. However, SAMHF is committed to working hard to secure the future of the organisation despite how things look within health and social care at the moment and work is on-going to do just that.

**Action:** The Administrator to draft a list of agencies/businesses to plan a calendar of visits. Outreach staff will seek interest from clients to ascertain who would like to be involved. Carers service leaflets when drafted will be circulated to clients.

### **Question 3: Co-production**

**Co-production is a process where clients and staff work together to change and improve the services you receive. Do you think this is a good way to work?**

The participant's comments were as follows:

- It's good, it gets us working together +17
- It gets clients and staff to understand each other's needs +1
- Yes, we know staff have our best interests at heart
- Yes this helps our confidence +1
- We can mix with those who do not have a mental illness
- Yes this will boost our ego
- Clients can express their needs+5
- Staff can help clients to see what is viable
- Good because you can listen to other people's views
- More likely to get the right decision
- Increased awareness of changes that can be made from client input
- Staff can make informed changes and bring improvements forward+4
- Good to be involved in what's going on
- Good way to work it guides and supports +3
- Makes me feel looked after
- Don't feel people would really care what clients would want to say
- The services will not be here if we don't work together
- It gives one the opportunity to say what's helpful

- Good to be more involved in the planning
- I would like to try
- May not be able to be objective
- This could change the future outlook
- Feedback on both sides helps to improve the overall process+2
- Joint input is highly valuable
- Can determine what works and what could be improved+2
- Sharing ideas+6
- Coming up with plans for change and improvements

### **Response from SACMHF**

The answers here are very encouraging and seem to support the idea that clients and staff working together to plan for future services/projects is good. SACMHF are currently waiting to hear from a potential funder regarding a new project. A co-production approach was adopted and a small consultation group was set up. This working group discussed the project and the comments and suggestions from all were written into the proposal. The consultation group could be widened to increase participation.

**Action:** The Service Manager to add this item to the agenda for the meeting to be held in early in 2014. The Service Manager will be responsible for identifying a client to help to co-ordinate this group.

### **Question 4: User-led services/groups**

**It is important for you to recognise that you are a mental health expert. Experts like you can join groups to make changes to mental health services. Would you be interested in joining groups that make important decisions?**

The participant's comments were as follows:

**YES 12**

**NO 28**

- I don't consider myself an expert as I don't have an overall view
- As long as they are not too political
- Set in simple English
- Easy to understand
- Would like to but would need support with me
- Not necessarily at Kuumba
- I'm active with what I'm already doing
- Not sure need more time to think about it
- I am a member of the Trust
- I already do this and I attend meetings once per month
- It's a good idea, but I don't feel ready

### **Response from SACMHF**

Over half of the participants stated that they are not interested in being involved in decision making user led activities. Of those who expressed an interest many said that they would need support to do this.

**Action:** A small work shop will be established to discuss this area in more detail in January 2014. Support Workers will ascertain if interest from clients in planning this activity.

### **Question 5: Peer support**

**Peer support is when mental health experts like you helping and working with others who might also experience mental ill health. An example of this could be you visiting someone in hospital. Would you like to be involved in peer support? Support and training can be offered to help you.**

The participant's comments were as follows:

**YES 23**

**NO 17**

- I would be interested but I would need to be careful about not doing too much
- Maybe not sure
- I would consider it
- Not at the moment
- I care about these people but I have own problems to deal with
- Too personal
- Only if I get paid
- Prefer to leave it to the professionals
- No would find it too distressing, it would play on my mind
- I would like to try, dependent upon resources and support available

### **Response from SACMHF**

There seems to be a high number of people who would like to be involved in peer support.

**Action:** A discussion group will be set up to agree how this project could look.

### **Question 6: Do you have anything else to add?**

This was a blank comment box. This is designed for participants to add a comment of their choosing which the set questions perhaps did not cover. Of those who did leave a comment their comments are outlined below followed by a response from SACMHF:

**a) *Hope the service continues as I receive a very good service.***



It is pleasing that response (a) believes the service provided is very good.

**b) *I am quite isolated and without Kuumba our voice as a Black person and as a person who uses services would not be heard.***

This comment in part echoes the reason why the organisation exists to provide a voice for Black people affected by mental ill health.

**c) *Explore resources available.***

This comment is interesting. This participant should know that all available resources within the organisation's knowledge base is considered to augment and expand the organisations services. This is a process which is on-going.

**d) *Kuumba needs to find new people to access it's services.***

The Kuumba Foundation needs to improve how the organisation is marketed to potentially new clients. The organisation is currently working it's way through a change and transformation process. This process will include the types of services provided, changes to the website and the way the organisation uses social media, changes in the way client outcomes are monitored are already in place and strategic changes are also forthcoming e.g. new board members, setting up a social enterprise. In addition to this the organisation has done very well in supporting people to move on and as a result many individuals have moved on to other things e.g. employment, college, university. This will always have a devastating impact upon client numbers, however, we consider helping people move on to be a positive result.

**e) *Keeping to your time appointments.***

The meaning of this comment is unclear. A discussion has been held with staff to ensure that they are punctual, do not keep clients waiting and minimise the number of times they alter client appointment times.

**f) *Overall a great service and I am grateful to have used the service and for the support I received.***

This comment is a positive complement and staff, are careful not to be complacent and to work hard to maintain high standards of service delivery. This is a welcome comment and helps to encourage staff to do well.

#### **4. Conclusion**

The response to the survey was very good. The views and comments given were varied and honest. Much of the comments given were supportive of the work undertaken by SACMHF for which we are very grateful.

However, there are some areas which we will work on as noted by clients, the main area being advertising our services better. Other areas which require improvement which this report has highlighted is improving how we have a two way flow of dialogue with people who use our services. There is currently a lot of dialogue held between clients and staff but the way this is done coupled with when it is done could be improved.

This report will be discussed at the next Board meeting which will be held in December 2014.

Once again thank you for taking the time to complete the surveys. Your comments are valuable and important to the organisation. Please keep challenging what we do and making us aware of what you are happy and not happy with. We will continue to work with you do deliver services that aid your wellbeing and recovery.