

## Healthwatch Sandwell Mental Health Update October 2020

### Sandwell Health and Adult Social Care Scrutiny Board

The purpose of the report is to share information and stories received from the people of Sandwell about mental health and support services from the last 18 months.

### Background

Every year we ask local people to tell us what matters to them regarding health care and social care services. Mental Health (MH) has come out at the top for the past two years and has been included within our work programme 2019/20 and again 2020/21.

### What people are telling us

- In November 2019 Healthwatch Sandwell (HWS) published a report that looked at what support carers were receiving. Feedback indicated that support for carers emotional wellbeing was really important. People were asked about the impact to their own physical and MH by their caring role, someone said that they **“worried that one day I’ll be really ill because I’ve neglected myself”**. Another person said **“I’m tired all the time but don’t have time to go to the doctors to get myself looked after”** One individual said **“I am lonely, I look like I am ok, so people think I don’t need any support, there are no friendly faces, I feel trapped and isolated”**
- The impact of Covid-19 for carers has been significant, with services that used to provide support being suspended and referrals, assessment and diagnosis also delayed. We have heard from carers who have said that **“we are at the end of our tether, its so hard and no one is listening”**. **“No one is telling us when services will reopen”** **“however much you love someone 24/7 is just so hard after six months”** **“we are worried for our own MH but really worried about our son who cannot understand why he can’t see his friends”**
- In March 2020 HWS published a report that looked at young people experiences of health and social care. Feedback was about MH support was poor with 57% of young people rating services they had received as very poor and 19% as poor. Comments from young people were **“CAMHS is a huge concern to me because of the lack of understanding and the consistency between workers insisting that your behaviour is a phase of attention seeking or copycat behaviour”**. Another said that they had been **‘discharged multiple times’ from CAMHS ‘despite being admitted to A&E time and time again.’** One individual spoke about waiting times for services **‘It gets worse while you wait, then takes longer to help you... depression, I didn’t think it was real until I went through it’**.
- Feedback from young people who shared their stories for the CYP report about experiences of health and social care, was that their MH was **“much worse”** which related to **“increased feelings of anxiety, isolation, how to cope with situations and a lack of motivation”** The impact of Covid-19 shows that many young people are under increasing pressure and struggling to get support. Some young people feel that their mental health is as poor now even though they have returned to school, there is less mental health support in schools now than before the pandemic and that they are not asked by school staff about their wellbeing.
- In May 2020 HWS published a report that looked at accessing healthcare for homeless people In Sandwell. Part of the report focused on accessing MH services, people reported experiencing significant issues in accessing MH services in Sandwell due to lengthy waiting times for appointments, judgemental attitudes from staff, lack of patient knowledge of how to refer themselves for support.

## Covid-19 and Mental Health

The Covid-19 Pandemic and the subsequent restrictions designed to prevent its spread, are having a profound impact on the MH of young people and adults.

In recent weeks there has been increasing reports of people being unhappy with MH services in Sandwell resulting in many referrals to POhWER Community Advocacy Services. POhWER have informed us that they are receiving a lot of referrals about a provider in relation to MH support and would like to work with us to identify themes and trends in services.

- In June 2020 HWS published a report about people views and experiences of how Covid-19 had affected them. People identified that they were concerned about their MH and the well-being of their relatives with existing MH conditions. When asked further about this, 54% stated that their MH and wellbeing had been affected by Covid-19 Pandemic. People, this included those who were shielding and self-isolating as well as others, described how their MH had been affected by Covid-19:
  - **Emotions and Behaviour**  
Emotional swings, anxiety and panic attacks and return of mild depression during lockdown and were finding it difficult to sleep were listed
  - **Relationships**  
People described how relationships were affected, families living in one household described how fractious things were getting due to all being together for long periods of time.
  - **Loneliness and Isolation**  
Respondents described how bored they were and how they would love to go out for a car ride. Being away from friends and family added to the sense of loneliness and isolation. Additionally, parents described how hard it was to entertain children and cope with 'home-schooling' It was stated that due to self-isolation and /or shielding, people were missing family (birthday celebrations etc) and this was impacting on their mental health.

## What we are hearing:

- A patient open to adult MH community services unable to get consistent support. The patient has only received two calls in three months.
- A patient with multiple health conditions, including MH is not receiving any services. The patient is struggling to refer themselves, will not accept the support of another person but are being told by MH services that they themselves must contact them in person if they require treatment – so deadlock and no services.
- A long-term patient of MH services has been discharged and referred to mental health community services, since then there has been a lack of support and no medication reviews.
- A long-term patient of MH services has had an original diagnosis withdrawn and medication changed. There has been a deterioration in the patient's MH resulting in the patient being sectioned.
- A patient is waiting to start treatment, but this will not begin until the child of the patient gets the MH treatment they require. There is a delay in the child getting treatment, therefore the parent's treatment being delayed.
- Some blind and visually impaired people are experiencing additional anxieties, including confidence issues in negotiating social distancing measures, making it more challenging to understand Covid-19 situations.
- People with long term conditions who feel it necessary to continue to shield are experiencing anxieties and low moods due to isolation. There are pressures on carers not linked with social care

services who are experiencing stress due to looking after dependants who also have long term conditions – trying to protect within the home by social distancing measures.

### What we have learnt so far

- Adults and children said their MH had increased during the period of lockdown restrictions
- Restrictions on seeing people, being able to go outside and worries about the health of family and friends are factors driving MH
- Boredom is also a major problem for CYP
- Loneliness has been a contributor to MH
- Adults and children who try to access support find it difficult to do so
- Not feeling comfortable using phone/video call technology has been one of the main barriers to accessing MH support.

### Conclusion

Prioritising MH has never been more critical. New MH problems have developed as a result of the Covid-19 Pandemic, and existing MH issues have escalated. The Pandemic will leave deep and lasting scars on the MH of millions in our country, especially in Sandwell that has had more than its fair share of restrictions, the devastating loss of life, the impact of lockdown and loneliness, and the inevitable recession that lies ahead will affect all of us.