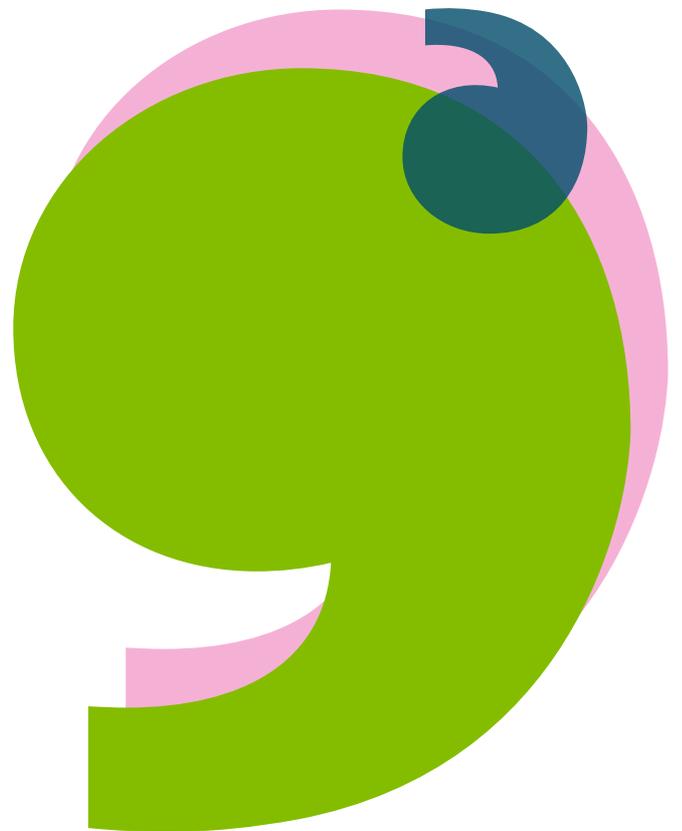




# Enter and View report

South Adult Mental Health Team -  
Wallingford

October 2019



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# 1 Introduction

## 1.1 Details of visit

Details of visit:	
Service Address	Adult Mental Health Team Wallingford
Service Provider	Oxford Health NHS Foundation Trust
Date and Time	15 <sup>th</sup> November 2019 09:30 – 11.30
Authorised Representatives	Jeanne Humber, Carolyn Newbert
Contact details	01865 520520

## 1.2 Acknowledgements

*Healthwatch Oxfordshire would like to thank the service provider, patients and staff for their contribution to the Enter and View Programme.*

## 1.3 Disclaimer

Please note that this report relates to findings observed on the specific dates set out above. Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed at the time.

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## 2 What is Enter and View?

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Part of the Healthwatch Oxfordshire programme is to carry out Enter and View visits. Healthwatch Oxfordshire representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows local Healthwatch authorised representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation - so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

Healthwatch Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch safeguarding policies.

In addition, if any member of staff wishes to raise a safeguarding issue about their employer, they will be directed to the CQC where they are protected by legislation if they raise a concern.

### 2.1 Purpose of Visit

To engage with patients to understand their experience of using the Adult Mental Health Team in Wallingford.

To get a staff perspective on working within the team.

To observe how the service operates and provides its services.

### 2.2 Strategic drivers

During 2019, Healthwatch Oxfordshire looked at patient and service user experiences of mental health services. We wanted to hear what is working well as well as where things could be improved. We visited a range of providers, starting with inpatient acute care, moving on to community-based care and then looking at voluntary sector provision.



## 2.3 Methodology

Following a meeting with relevant senior managers in Oxford Health, we were introduced to the lead for the Wallingford Adult Mental Health Team (AMHT) via email. We arranged a meeting with the two leads from the South AMHT to discuss the purpose of the visit and agree a convenient day for our visit. A date was agreed for us to visit the team.

When we arrived, we were shown around the building and given the opportunity to find out more about the service. To hear from patients, we based ourselves within the waiting area. However, we did not hear from any patients about their experience of using the service on this occasion. We heard from two carers and six members of staff.

## 2.4 Summary of findings

- We heard what a supportive and hard-working team it was in Wallingford.
- Good working relationships with local GPs has a positive impact on patient referrals and care.
- The building was in a good, clean condition and we felt welcomed.
- Out-of-date computers were having a very negative impact upon staff workload and causing unnecessary stress and delays to their daily work.
- Staff vacancies are impacting the team and their patients.
- The Wallingford base fielding all calls for the South AMHT did present some challenges for the admin team.

## 2.5 Results of visit

The South Adult Mental Health Team (AMHT) in Wallingford provides support to adults aged 18 to 65 experiencing mental health problems. The team operates seven days a week from 7am to 9pm with out-of-hours support being offered by the Oxford Health Night Team, which covers Oxfordshire between 9pm - 7am. The team is based in Wallingford and sees patients from as far as Henley and Thame. It receives around 2,000 referrals a year, which does exceed its capacity, but currently it is able to manage. The team is split into the Assessment Team, which will offer initial / short-term care and support, and the Treatment Team, which works with patients who require longer term support. Each Care Co-ordinator has a caseload of around 20-25 patients. Approximately 80% of patients are seen just the once but even if they are not accepted by the service, the Assessment Team will usually signpost them to other agencies. This is greatly appreciated by GPs, who make most of the referrals. On the odd occasion a GP referral is not considered appropriate, a team member will get in touch with that GP to discuss it. Referrals



can come from other agencies such as the Emergency Department Psychiatric Service at the John Radcliffe, or District Nurses and Health Visitors.

### Available Information and observations

Based on the site of the Wallingford Community Hospital, the AMHT is set within a multi-purpose building and is well signposted both outside and inside. We were warmly welcomed when we arrived. There was a separate waiting room and reception for mental health services, and although it was quite a small space, the décor appeared in good condition. All the rooms used for meeting with patients were on ground level and were of a decent size. Office space and doctors' rooms were upstairs. As there was no lift to the first floor, we were told that the team can accommodate staff who need to work downstairs if there are any accessibility issues. We were told that a funding application had been submitted to be able to turn a storage room into an additional workspace. At the time of our visit, we heard that the team was not able to use one of its upstairs rooms owing to a colony of bats living there.

There was a range of information available in the waiting room, including posters about other support agencies such as Mind, Cruse, Restore, Oxfordshire Recovery College, Safe Haven, Early Intervention Service and Talking Space. There was also guidance on how to give feedback on Oxford Health, information on research studies and an Oxford Health Trust Handbook for family / friends / carers.

We noticed there was a radio on in the waiting room, which we felt was a nice touch and helped to break up any silence. Toilets were easy to find and accessible and there was also water available.

### Patient Feedback

- We did not hear from any patients on this visit.

### Carer feedback

- We heard from a carer that their GP was brilliant and the AMHT appointment came through very quickly after the referral was made and they were hopeful after negative experiences in another county.
- We were told that it felt nice and safe there.
- We heard about the challenges faced by patients who do not meet the threshold for AMHT but are considered too high risk for Talking Space and what an impact being passed (and turned down) from agency to agency had on patients.



## Staff Feedback

- Staff told us what a great team it was to work in, who listen and support each other at all levels.
- Staff are hard-working and great at recognising each other's needs by stepping in to offer help or support.
- We heard how the integration of psychological services into mental health services was a complex process that had taken a long time, but waiting lists were now being reduced.
- We heard what a big problem IT was with computers not being fit for purpose, which then results in the IT helpdesk being overwhelmed and not able to deal with problems in a timely manner.
- The team has vacancies, which inevitably has a knock-on effect. A senior management post has been vacant for some time.
- When patients call for support, the admin team is their first point of contact and it can be hard to find an available, appropriate person for them to speak to, which can result in greater distress for patients and staff sometimes receiving abuse.
- The admin team at Wallingford field all calls for the other 'patch' phones for short periods of time i.e. lunches or leave. Not full time or long term.
- Support and supervision was generally good but we did get the sense that admin felt slightly out on a limb and would appreciate a more integrated way of working.
- On-going engagement with harder to reach patients can be difficult as there simply aren't the staff numbers and time available.
- Embedded workers from voluntary sector partners have helped to improve communication and the relationships that have resulted from the Oxfordshire Mental Health Partnership have resulted in smoother transitions for patients.
- Most patients use paper feedback options. Positive feedback is shared with staff in a 'weekly news' email.
- Steps are taken to deal with negative feedback and meetings with patients and their GPs will be arranged if helpful to parties involved.
- There is a training gap regarding working with adults who may, or do, have a learning disability.



## 2.6 Additional findings

New services are being tried out around the county in order to offer a greater variety of support. The south of the county will be trying dialectical behavioural therapy (DBT), which is a talking therapy based on cognitive behavioural therapy (CBT), which was developed as a treatment for borderline personality disorder (BPD). We were delighted to hear this and felt it was a very positive step.

## 2.7 Recommendations to team

- Identify suitable training and whole team meeting opportunities to further integrate the admin team and support them more when dealing with distressed, or abusive callers. Could a named person from Assessment or Treatment be responsible for fielding these calls each shift where a patients Care Co-ordinator is not available?
- Ensure staff's training needs are being met in relation to patients who may have learning disability.
- Oxford Health NHS Foundation Trust to invest in the infrastructure of the IT systems within its community based mental health provision.
- More meeting rooms are needed in Wallingford if the AMHT are to continue sharing their space with other county-wide teams.

## 2.8 Service provider response

Re telephone calls:

The Wallingford Admin Team cover the other 'patch' phones for short periods of time i.e. lunches or leave. Not full time or long term. At these times we ensure there are three admin staff in the Wallingford Base.

These calls should always go through to the Duty Worker in each 'patch' but sometimes they are already on a call which leads to the admin team needing to find someone else to take the calls. We do not have adequate resources to provide more than one 'duty worker' per patch per day and this would not always be needed.

Re learning disability:

We don't work with patients who have IQ of below 70 and/or not able to function but we do have challenges in working with patients who have Autism and ADHD. Especially when they have a co-morbid mental health condition.

