



## champions of change

### **What does your doctor do for you?**

Or

### **How does your family doctor care for you?**

## **Interim Findings**

### **Background**

'Champions of Change' is a service for people who are passionate and positive about improving mental health services in Nottingham. Bright Ideas Nottingham provides the service which is funded by NHS Nottingham City. A network of Champions has been recruited. These local volunteers are engaged and consulted on how they would like to see mental health services improved in Nottingham. Champions take part in surveys, one-to-one and group discussions, and other approaches to collecting feedback.

During 2009/2010 Champions of Change collected feedback from members of the Champions' Network and the wider public about their experience of accessing mental health services in Nottingham. Over 1000 conversations took place about mental health provision in Nottingham. From these conversations one issue particularly stood out. This related to how people felt about going to their GP when they first wanted support with their mental health concerns. Many people felt very positive about their relationship with their GP and this had a good impact on the way that they then accessed support and treatment. Others felt let down by their GP and felt that they could have done more or offered different options by way of support and treatment. Some people said that they would not go to their GP as the first point of call and would like other options when initially discussing their mental health needs with a health professional. In other words referral through the GP should not be the only way into mental health services.

## **Design of the questionnaire**

We have used the conversations we recorded during 2009/2010 to design the questionnaire. We have also consulted Champions on the network and health professionals and used their feedback to make improvements to it. Dr Marcus Bicknell the GP lead for mental health and Dr Chris Packham, the Executive Director of Public Health are amongst those that shaped the questionnaire.

The focus group discussions were semi-structured with the questions being shaped by the questionnaire. The name of the engagement exercise was debated. Two GPs felt that the title 'What does your doctor do for you?' did not set the right 'tone' and Dr Bicknell suggested 'How does your family doctor care for you?' so Bright Ideas decided allow interviewees to choose the name of their survey, hence the use of both titles.

## **Interviewees**

The interviewees for this survey were members of the Champions of Change network and members of the wider public who wanted to speak about their experiences of using a GP/GPs in Nottingham City. We interviewed over 100 people –approximately half through discussion groups and half through one to one questionnaires.

## **Next steps**

The notes presented are the Interim Findings. Bright Ideas is currently completing the analysis of the surveys and focus group discussions.

A short final report will be written. The findings will be fed back to the GPs responsible for commissioning mental health services.

The main findings will also be communicated to the new Local Health and Well-being Board which is currently being established in Nottingham. The Board will be responsible for making decisions about service provision.

The full report will be available to download from the Champions of Change website.

Go to [www.brightideasnottingham.co.uk](http://www.brightideasnottingham.co.uk)

<http://championsofchange.wordpress.com>

or call Bright Ideas on: 0115 837 9474

## Findings

### What people expect from their GP

Most interviewees did not expect GPs to be experts in mental health. Some also recognised that not all GPs want to deal with mental health.

However, a lot of people felt that GPs should have general knowledge about mental health and where to signpost people to

“All GPs do need to know about mental health. You should be treated like a whole person.”

“GPs and practice nurses should have good points of referral and good knowledge – not just for mental health.”

Many people said that the best thing a doctor could do is to signpost patients to relevant and appropriate information and services:

“We are all entitled to know as much about ourselves as we can. If you don’t understand about your own mental health, you can’t get your own strategies together.”

“Self help groups are very valuable.”

“Places like support groups, day centres, SPAN – help people to get on the mend. It’s nice because you are with people who you can relate to. They take account of how you are feeling. I think there is a case for keeping services like this in the community.”

Interviewees felt that the GP surgery should be a place where everyone could feel comfortable to talk.

“There are so many mental health problems that can be nipped in the bud, simply by having a GP or practice nurse who listens to you.”

However many people do not feel comfortable to share information about their mental health with the GP.

The majority of people felt that GPs should ask about patients’ mental health and well being, as physical and mental health are connected.

## **Barriers in relation to talking about mental health with GPs**

One problem raised was that appointments do not give enough time. Appointment times depend on patients getting 'straight to the point' which is not always easy when discussing mental health.

"You are allocated a 10 minute slot. You need at least two slots – double time."

Another barrier is that some places have more than one GP.

"Nine out of ten times you get given an appointment with a different GP so you don't see the same one. You need to build up a relationship if you are going to feel comfortable talking about your mental health."

Some people felt that there was a stigma attached to mental health and that they would not want to bring up mental health with their GP.

A minority of those interviewed said that they just preferred to 'sort it myself'.

"I don't go to a GP about these things. I haven't really got a GP. I would just get on with it myself."

People who did not go to a GP early on, often didn't realise they were unwell. They too unwell to be able to think logically about what support was needed.

## **Practice nurses**

Practice nurses received very positive feedback.

"Our practice nurse is very good about mental health but she is always so busy. I wanted to see her but I had to go and see the GP instead!"

"My practice nurse is brilliant. Sometimes she gives me and my husband a triple appointment. We talk and she comes up with things that we haven't thought of. You are more likely to talk to a practice nurse about anything, I think."

## **Helpful GPs**

Once people do access support from their GP it is usually very good. Some interviewees complained of poor GPs but were able to go to others due to a number of GPs being based at the same building.

The best GPs were felt to be great because they a) listen b) know where to signpost people to and c) do not “reach for the prescription pad”.

“I used to have a doctor who really like dealing with mental health.”

“Dr ... is someone who actually listens to you. Only problem is you have to wait for weeks to see him.”

“Good GPs listen to your concerns and make you feel ‘normal’.”

## **Unhelpful GPs**

The unhelpful GPs, on the contrary, were too quick to prescribe medication, sometimes dismissive and on occasion, judgmental.

“I was just given tablets for years. When I said how depressed I was they just upped my tablets.”

“Some doctors are uptight about certain issues. You should be made to feel like a normal person with normal concerns.”

## **Awareness in relation to choice**

A lot of people are not aware that they can change their GP if they are not happy with them.

## Recommendations (incomplete)

In surgeries where there is more than one GP, patients could be told which GP/GPs are the best to talk to about mental health.

“It would be good if, where there is more than one GP based at a centre, you had named GPs for mental health. This would be GPs who feel that they can offer a good service around mental. Then people can know to make an appointment with them.”

One interviewee used a surgery where there is a named GP for sexual health.

“You don’t have to have her but she is the suggested GP and does a lot of professional updating around this issue.”

In a similar way to this, surgeries could have a named GP for mental health.

Access to a professional who knows about mental health and is based at the surgery was a common suggestion. This could be a mental health nurse or it could be someone from a local mental health service or support group.

“It would be ideal to have a mental health nurse based at the GP surgery at different times, not necessarily full time, to provide “Support to talk”.”

There was a strong consensus that GPs and practice nurses should have information in relation to where they can signpost people to in relation to mental health. There should be options – but not too much overwhelming information.

Mental health services and information need to be more joined up and many interviewees felt that there should be a walk in centre where people could go to get information, support and access to mental health services.

“There should be a drop in facility that everyone knows about. If there is one I couldn’t tell you where it is. Somewhere central where everyone knows about that’s well advertised and well documented.”

There is a need for more public awareness about signs and symptoms of mental health distress so that people can act early. Nottingham has the NHS service ‘Change Makers’ that raises awareness of signs and symptoms of CVD (cardiovascular disease) and certain cancers. There is a need for a ‘Change Makers for Mental Health’.

“How are you feeling?” is a great question that GPs can ask their patients. It gives the patient the opportunity to talk about their mental health if they want to and to opt out if they do not.

There is a need to promote awareness regarding people’s right to change their GP.