# **Emergency Clinic – Results of the Southwark Mind Survey**

The Emergency Clinic is under review as a result of the planned withdrawal of funding by Lambeth PCT. This survey is the response from the services users and carers based in Southwark and Lambeth who read the Southwark Mind newsletter. Overall, there were 68 responses from Southwark users, 24 responses from carers and 9 questionnaires returned from Lambeth User Voice. – a total of 103.

Chart 1: Use of Crisis Services - Service Users: Base: 68

Crisis Service	Yes	No
Emergency Clinic	46	22
Kings A & E	22	46
St. Thomas' s A & E	27	41

Chart 2: Use of Crisis Services - Carers: Base: 24

Crisis Service	Yes	No
Emergency Clinic	16	8
Kings A & E	10	14
St. Thomas's A & E	7	17

Chart 3: Use of Crisis Services – Lambeth User Voice: Base: 9

Crisis Service	Yes	No
Emergency Clinic	5	4
Kings A & E	4	5
St. Thomas's A & E	5	4

67% of users chose to use the Emergency clinic and were **more than twice as likely** to use it as King's A&E. There was a slightly higher number using St. Thomas's which may be explained by the geographic proximity. There is a more even distribution of usage amongst carers or users who are based in Lambeth – again, most likely geographic distribution for Lambeth residents and A & E is a more likely choice for carers.

Chart 4: Last occasion Crisis Service used

Times used	Em	ergency	Clinic	K	ings A &	E	St. Thomas's A & E		
	User	Carer	LUV	User	Carer	LUV	User	Carer	LUV
< 1 month	6	5	0	5	2	0	0	1	1
< 6 mths	13	1	0	5	3	1	4	1	0
< 1 year	7	1	0	2	1	0	2	2	1
> 1 year	20	9	5	10	4	3	21	3	3
Total	46	16	5	22	10	4	27	9	5

About 40% of users had been to the EC in the last six months, about the same proportion for King's A & E: St. Thomas' A & E was visited by about 14% of users within the last six months

The EC tended to be used **more frequently by users with 57%** (39) of all users using it between once and ten times compared to 47% (32) using King's A & E and 35% (24) using St.Thomas' A & E . The same is true of carers with 54% (13) using the EC, 37% (9) using King's A & E and 16% (4) using St. Thomas' A & E.

**Chart 5: Number of occasions used** 

Times used	Emergency Clinic Kings A & E			St. Thomas's A & E					
	User	Carer	LUV	User	Carer	LUV	User	Carer	LUV
Once	13	4	4	14	4	1	18	1	1
2-5	19	8	8	14	5	2	6	3	4
6-10	7	1	1	4	0	0	0	0	0
10+	8	2	2	0	0	0	0	0	0
Total	47	15	15	32	9	3	24	4	5

**Chart 6: Rating of services - Scores** 

Service	Em	nergency	Clinic		Kings A & E			St. Thomas's A & E		
Client	User	Carer	Lambeth	User	Carer	Lambeth	User	Carer	Lambeth	
Group										
Waiting	2.61	1.8	2.83	2.16	1.70	2.00	2.04	2.00	2.50	
times										
Waiting	3.18	2.14	2.60	2.10	2.60	1.75	2.45	2.43	3.25	
area										
Attitude of	3.02	2.50	3.40	2.29	2.60	2.67	2.73	2.67	3.25	
nurses										
Attitude of	3.35	2.50	2.83	2.20	2.67	2.50	2.59	2.83	3.50	
doctors	0.05	0.04	0.47	0.00	0.70	4 75	0.00	0.07	0.00	
Information	2.65	2.64	2.17	2.00	2.78	1.75	2.32	2.67	3.00	
given	0.00	0.07	0.07	0.40	2.55	0.75	0.40	2.22	2.50	
Outcome	2.88	2.67	2.67	2.19	2.55	2.75	2.48	2.33	3.50	
of visit	2.02	2.26	2.74	2.46	2.47	2 22	2.42	2.40	2.47	
Average	2.93	2.36	2.74	2.16	2.47	2.22	2.43	2.49	3.17	
score										

In this section of the questionnaire, service users were asked to rank various aspects of the various crisis services available. Each aspect was ranked according to waiting times, waiting area, attitude of nurses, attitude of doctors, information given and outcome of the visit. Each element was ranked according to whether respondents felt that were unacceptable, poor, OK or good/helpful scoring 1, 2, 3 or 4 respectively.

### Users

The EC was scored more positively by users than either of the other two services receiving an average score of 2.93 compared to 2.16 for Kings and 2.43 for St. Thomas's.

The least good aspect for users were waiting times, whilst the attitude of nurses and doctors and the waiting area were the aspects scored most positively for mental health service users

With respect to Kings, the overall score for this service amongst users was 2.16 and there was fairly consistent scoring across all aspects of the service. For users of St. Thomas Psychiatric Liaison Service, the attitude of nurses and doctors were considered the most positive aspects.

## Carers

For carers, the information provided and the outcome of the visit tended to be the aspects of the service which made the most positive impression for the EC and Kings A & E. Carers tended to see the services as more compatible in terms of the experience overall.

## **Lambeth Users**

The sample was very small for Lambeth users which make any significant statements about the services more difficult due to the much greater distortion that occurs with small samples and the aspect of double-counting that occurred with Lambeth users responses.

Chart 7: Whether under the care of a Community Mental Health Team whilst using crisis services?

CMHT	EC				Kings A	& E	St. Thomas's A & E		
Client	User	Carer	Lambeth	User	Carer	Lambeth	User	Carer	Lambeth
Group									
Yes	27	9	0	19	9	1	14	3	2
No	23	3	5	15	3	3	14	5	2
No reply	8	12	4	34	12	5	40	16	5

## Users

The most significant point that should be made is that a significant number of users who responded to this question were under the care of a CMHT; 45% were using the EC, 50% using Kings A & E and 55% using St. Thomas's.

This begs the question that there should have been an alternative route for these users particularly as it is quite clear from the responses to Question 7 – Why they were using these services – that these individuals were in crisis or had recognised that their situation was worsening and were trying to manage that decline to avoid an admission.

## Carers

This was the same story amongst carers to an even greater degree with between 37% and 75% of the carers who responded to this question reporting that their cared for were under a CMHT

### Lambeth Users

Fewer Lambeth users tended to be under a CMHT though this may reflect the small sample responding rather than be representative of the true picture.

Chart 8: Have you ever walked out of any of the crisis services when you used them?

Walked out	EC				Kings A	& E	St. Thomas's A & E		
Client Group	User	Carer	Lambeth	User	Carer	Lambeth	User	Carer	Lambeth
Yes	10	3	3	6	3	3	4	3	3
No	38	9	9	26	6	6	22	5	5
No reply	20	12	12	36	13	13	42	16	16

The walk-out rate tended to be consistent amongst users in percentage terms with between 15% (St. Thomas's) and 20% (the EC). Rates were higher amongst carers ranging from 25% to 37% and amongst Lambeth users (25% to 37%)

The major reason given for walk out form the EC was the length of waiting times; With A & E, people tended to feel under more distress due to the environment or the behaviour of staff and this meant they left before being seen.

"Too long waiting and made me feel "unworthy", second class and in the way (Kings)" – User

"Would never use again. They talk about your business for all and sundry to hear – not private like the EC. Was there for 6 hours and walked out with no treatment. Was taken there as it was claimed that the EC was shut, had no choice as far as I'm concerned Kings is not trained for people like me, so leave it to the nurses and doctors who are (Kings)" – User

"I walked out the time as I recall as I was in mental confusion and the staff were expecting me to wait along time to see a mental health worker (St. Thomas's)" – Lambeth user

<sup>&</sup>quot;My daughter had a panic attack (Kings)" - Carer

# Why was the service being used?

The questionnaire asked respondents to consider why they were using the serviced in the first instance; overwhelmingly, the response was that they were indeed in crisis or trying to manage their mental distress. The EC was being used as a means of helping avoid hospital admission whilst A & E was more clearly a last resort solution. The EC was also seen by carers as an environment in which they could receive support

"I was suffering from psychosis and needed to go to the EC as I was seeing things." – User

"I was suffering from stress and my condition was worsening (EC)" – User

"I have used the EC for myself and my son. I go to the EC when I realise that I am close to taking an overdose or hurting myself. I would not go to Kings for that as when I am like that I need to talk to people who are experts in this field like the doctors I know at the EC. I go to Kings A & E when I have actually taken an overdose" – User and Carer

"I took my daughter (user) on 2 occasions as a last resort. They were very helpful and seemed to help my daughter to obtain further help and advice. (EC)" – Carer

"I went to the EC to receive support and admission to hospital for a relative" – Carer

#### Other Comments about the Crisis Services

In the final question, respondents were asked to comment on ay aspect of the services offered to cover a crisis situation; the main areas that were commented upon were: the current A & E service does not make it a substitute for the EC that services appear to be fragmented at A & E and can feel cobbled together.

"I would only use the EC and that is really only as a last resort. If I became ill again and the EC didn't exist in its present form I would not use a general hospital A& E unless there was a complete safeguard in a separate area. Because you would certainly be too vulnerable with being around people who may have been drinking etc." – User

"I think the EC is vitally important for people with mental health problems. When my son had a psychiatric breakdown the only place where I felt I got any help was at the EC. When I am feeling bad, I know that the EC I will be totally looked after by nurses and doctors who have chosen to work with people like myself and are completely accepting of us no matter how mad we feel. I do not need to feel ashamed." – User and Carer

"I think it is important part of both hospitals (EC) and an important building to have in the community for service users. It would be a shame to get rid of it just because Lambeth is being stingy about everything" – Lambeth User

"I do feel that Kings A&E has improved slightly. The first time I attended I was treated with compete contempt by a male nurse. They tried to send me home in the middle of the night – in hospital pyjamas and with no money. It was only the intervention of a doctor that prevented this from happening. The nurses collected some bus fares for me – but I still had to travel home in pyjamas. Now they have some psychiatric provision and liaison" – Lambeth User

What does come across in the responses to this question was the desire for a more effective prevention service as the very poignant quote which follows illustrates.

"The best help we ever had was peer support & from each other. Treatment and service are Victorian, degrading and often inhuman (mental illness and distress does not mean you are inhuman. In all the years I knew him (partner), he was never suicidal until this last time. He had a CPN but he was not taken seriously. They refused to hospitalise him even though he asked. He is dead now (by suicide)" - Carer