

Leicestershire Partnership NHS Trust: CQC Mental Health Community Service User Survey 2016

A quantitative equality analysis considering service, age,
gender, and ethnicity: Summary of findings

REDACTED FOR PUBLICATION

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Introduction

Aim

The present report looks at the 2016 Care Quality Commission's Mental Health Community Service User Survey. The analysis aims to identify equality issues arising from service user's responses to the survey.

The Equality Act (2010)

The Equality Act (2010) describes a 'public sector equality duty' (section 149). The 'public sector equality duty' applies to listed public authorities (including NHS Trusts) and others who exercise public functions.

149 Public sector equality duty:

- (1) A public authority must, in the exercise of its functions, have due regard to the need to—
 - (a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
 - (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
 - (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
- (2) A person who is not a public authority but who exercises public functions must, in the exercise of those functions, have due regard to the matters mentioned in subsection (1).
- (3) Having due regard to the need to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to—
 - (a) remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic;
 - (b) take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it;
 - (c) encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

The public sector equality duty covers people across nine protected characteristics: age; disability; gender reassignment; marriage and civil partnership*; pregnancy and maternity; race; religion or belief; sex; sexual orientation. (*Marriage or civil partnership status is only covered by the first aim of the public sector equality duty, to have due regard to the need to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Act.)

Listed public authorities must publish information to demonstrate compliance with the duty imposed by section 149(1) of the Act, at least annually. The information that a listed public authority publishes in compliance with paragraph (1) must include, in particular, information relating to persons who share a relevant protected characteristic who are—

- (a) its employees;
- (b) other persons affected by its policies and practices.

Although, only listed public authorities with 150 or more employees need publish information on their workforce.

Regarding other persons affected by its policies and practices, the types of information that listed authorities could publish to demonstrate compliance include¹:

- Records kept of how it has had due regard in making decisions, including any analysis undertaken and the evidence used.
- Relevant performance information, especially those relating to outcomes, for example information about levels of educational attainment for boys and girls, health outcomes for people from different ethnic minorities, and reported incidences of disability-related harassment.
- Access to and satisfaction with services, including complaints.
- Any quantitative and qualitative research undertaken, for example patient surveys and focus groups.
- Details of, and feedback from, any engagement exercises.

The present report considers the 2016 Care Quality Commission's Mental Health Community Service User Survey which covers several topic areas: care and treatment, health and social care workers, organising care, planning care, reviewing care, changes in professionals seen, crisis care, treatments, support and well-being, and overall rating of care. In terms of the protected characteristics, breakdowns were available by age, ethnicity, and gender.

¹ This guidance is taken from the technical guidance published by the Equality and Human Rights Commission: Equality Act 2010 Technical Guidance on the Public Sector Equality Duty England (August 2014), page 69

A note on the anonymisation of information about service users within this report

This version of the report has been redacted and edited to allow publication on a publicly accessible website. The report contains counts of numbers of service users, analysed in several tables, by their protected characteristics (e.g., age group, gender). The use of these tables to produce aggregated summaries of service user counts has the effect of anonymising much of the information and protecting the identities of individual service users. However, some analyses contain very small counts of service users in some protected characteristic groups, especially when broken down by certain domains of interest. Such small counts could, potentially, be used to identify individual service users, even after aggregation. Consequently, these small counts might be considered personal information that is protected by the Data Protection Act 1998 and other legislation. Where there is a risk that individuals could be identified from a small count, these counts have been redacted from the tables. Where the redacted count can be deduced from other counts in a table, these other counts have been redacted as well. In the present report, as a start point for the anonymisation process, counts below 10 have been redacted to mitigate the risk that individuals might be identifiable. The anonymisation process has followed guidance issued by the Information Commissioner's Office². Additionally, some groups have been suppressed and excluded from the analyses at the data source (please refer to the Appendix of analytical methods: Excluded and included groups).

² Information Commissioner's Office: Anonymisation: managing data protection risk code of practice (November 2012)

Action point summary

For most of the topic areas covered by the survey, there were no indications that a particular protected group was disadvantaged amongst LPT's respondents (analyses were possible by age, gender, and ethnicity); however a number of points for action have been identified.

Investigate and address that

- service users aged 36 to 50 years old / service users in AMH Outpatients were less likely to report having had a formal meeting in the last 12 months with someone from NHS mental health services to discuss how their care was working;
- LPT's service users were less likely to report knowing who to contact out of office hours in a crisis—there was a trend for this issue to affect service users aged 66 years and over / service users in the MHSOP Memory Service;
- LPT's service users were less likely to report that NHS mental health services had given them help or advice with finding support for financial advice or benefits, finding or keeping work, taking part in an activity locally, and getting support from people who have experience of the same mental health needs as them—there was a trend for these issues to affect service users aged 36 to 50 years old / service users in AMH Outpatients.

Summary of main findings and recommendations

Data and analyses supporting the findings detailed below are provided for reference in the Appendix of analyses. Each table referred to below is hyperlinked to its occurrence in the appendix.

- For most of the topic areas covered by the survey, there were no indications that a particular protected group was disadvantaged amongst LPT's respondents (analyses were possible by age, gender, and ethnicity)

Reviewing care for service users aged 36 to 50 years old (AMH Outpatients)

- Compared to LPT overall, service users aged 36 to 50 years old were less likely to report having had a formal meeting in the last 12 months with someone from NHS mental health services to discuss how their care was working (Table 1). There was a trend for this issue to affect service users in AMH Outpatients (Table 2).

Knowing who to contact out of office hours in a crisis for service users aged 66 years and over (MHSOP Memory Service)

- Compared to the National benchmark, LPT's service users were less likely to report knowing who to contact out of office hours in a crisis (Table 3). There was a trend for this issue to affect service users aged 66 years and over (Table 4) and those in the MHSOP Memory Service (Table 5).

Finding support with other areas of life for service users aged 36 to 50 years old (AMH Outpatients)

- Compared to the National benchmark, LPT's service users were less likely to report that NHS mental health services had given them help or advice with finding support for financial advice or benefits (Table 6), finding support for finding or keeping work (Table 9), taking part in an activity locally (Table 12), and getting support from people who have experience of the same mental health needs as them (Table 15). There was a trend for these issues to affect people aged 36 to 50 years old (Table 7, Table 10, Table 13, and Table 16) and those in AMH Outpatients (Table 8, Table 11, Table 14, and Table 17). There was also a trend for those in the MHSOP Memory Service to be less likely to report having received support with taking part in an activity locally, although the overall number of respondents to this question from this service was small (Table 14).

Appendix of analyses

A key to the colour coding in the tables of analysis can be found in Table 22.

Reviewing your care

- Compared to LPT overall, service users aged 36 to 50 years old were less likely to report having had a formal meeting in the last 12 months with someone from NHS mental health services to discuss how their care was working (Table 1).
- There was trend for this issue to affect service users in AMH Outpatients (Table 2).

Table 1: Q14. In the last 12 months have you had a formal meeting with someone from NHS mental health services to discuss how your care is working? Analysed by age group, compared against LPT overall

Age Group (Years)	% Yes*
LPT Overall	65.65% (151/230)
18-35	70.97% (22/31)
36-50	44.83% (26/58)
51-65	72.46% (50/69)
66+	73.61% (53/72)

* % calculated out of the total responding "yes" or "no"

Table 2: Q14. In the last 12 months have you had a formal meeting with someone from NHS mental health services to discuss how your care is working? Analysed by service, compared against LPT overall

Service	% Yes*
LPT Overall	65.65% (151/230)
AMH Community Mental Health	76.47% (26/34)
AMH Outpatients	58.33% (42/72)
MHSOP Memory Service	75.00% (21/28)

* % calculated out of the total responding "yes" or "no"

Crisis care

- Compared to the National benchmark, LPT's service users were less likely to report knowing who to contact out of office hours in a crisis (Table 3).
- There was a trend for this issue to affect service users aged 66 years and over (Table 4) and those in the MHSOP Memory Service (Table 5).

Table 3: Q21. Do you know who to contact out of office hours if you have a crisis? LPT Overall compared against the National Benchmark

Area	% Yes*
National	69.50% (7773/11184)
LPT Overall	53.92% (117/217)

* % calculated out of the total responding "yes" or "no"

Table 4: Q21. Do you know who to contact out of office hours if you have a crisis? Analysed by age group, compared against LPT overall

Age Group (Years)	% Yes*
LPT Overall	53.92% (117/217)
18-35	56.25% (18/32)
36-50	73.47% (36/49)
51-65	55.56% (35/63)
66+	38.36% (28/73)

* % calculated out of the total responding "yes" or "no"

Table 5: Q21. Do you know who to contact out of office hours if you have a crisis? Analysed by service, compared against LPT overall

Service	% Yes*
LPT Overall	53.92% (117/217)
AMH Community Mental Health	74.19% (23/31)
AMH Outpatients	63.24% (43/68)
MHSOP Memory Service	35.71% (10/28)

* % calculated out of the total responding "yes" or "no"

Support and Wellbeing

- Compared to the National benchmark, LPT’s service users were less likely to report that NHS mental health services had given them help or advice with finding support for financial advice or benefits (Table 6), finding support for finding or keeping work (Table 9), taking part in an activity locally (Table 12), and getting support from people who have experience of the same mental health needs as them (Table 15).
- There was a trend for these issues to affect people aged 36 to 50 years old (Table 7, Table 10, Table 13, and Table 16) and those in AMH Outpatients (Table 8, Table 11, Table 14, and Table 17). There was also a trend for those in the MHSOP Memory Service to be less likely to report having received support with taking part in an activity locally, although the overall number of respondents to this question from this service was small (Table 14).

Table 6: Q34. In the last 12 months, did NHS mental health services give you any help or advice with finding support for financial advice or benefits? LPT Overall compared against the National Benchmark

Area	% Yes (definitely or to some extent)*
National	57.90% (4010/6926)
LPT Overall	45.45% (55/121)

* % calculated out of the total responding “yes definitely,” “yes to some extent,” or “no, but I would have liked this”

Table 7: Q34. In the last 12 months, did NHS mental health services give you any help or advice with finding support for financial advice or benefits? Analysed by age group, compared against LPT overall

Age Group (Years)	% Yes (definitely or to some extent)*
LPT Overall	45.45% (55/121)
18-35	44.00% (11/25)
36-50	31.43% (11/35)
51-65	42.42% (14/33)
66+	67.86% (19/28)

* % calculated out of the total responding “yes definitely,” “yes to some extent,” or “no, but I would have liked this”

Table 8: Q34. In the last 12 months, did NHS mental health services give you any help or advice with finding support for financial advice or benefits? Analysed by service, compared against LPT overall

Service	% Yes (definitely or to some extent)*
LPT Overall	45.45% (55/121)
AMH Community Mental Health	58.82% (10/17)
AMH Outpatients	25.64% (10/39)
MHSOP Memory Service	61.54% (8/13)

* % calculated out of the total responding "yes definitely," "yes to some extent," or "no, but I would have liked this"

Table 9: Q35. In the last 12 months, did NHS mental health services give you any help or advice with finding support for finding or keeping work? LPT Overall compared against the National Benchmark

Area	% Yes (definitely or to some extent)*
National	58.23% (1925/3306)
LPT Overall	40.63% (26/64)

* % calculated out of the total responding "yes definitely," "yes to some extent," or "no, but I would have liked this"

Table 10: Q35. In the last 12 months, did NHS mental health services give you any help or advice with finding support for finding or keeping work? Analysed by age group, compared against LPT overall

Age Group (Years)	% Yes (definitely or to some extent)*
LPT Overall	40.63% (26/64)
18-35	38.10% (8/21)
36-50	26.09% (6/23)
51-65	56.25% (9/16)
66+	75.00% (R)

* % calculated out of the total responding "yes definitely," "yes to some extent," or "no, but I would have liked this"

R - Redacted

Table 11: Q35. In the last 12 months, did NHS mental health services give you any help or advice with finding support for finding or keeping work? Analysed by service, compared against LPT overall

Service	% Yes (definitely or to some extent)*
LPT Overall	40.63% (26/64)
AMH Community Mental Health	50.00% (7/14)
AMH Outpatients	34.78% (8/23)
MHSOP Memory Service	100.00% (R)

* % calculated out of the total responding "yes definitely," "yes to some extent," or "no, but I would have liked this"

R - Redacted

Table 12: Q36. Has someone from NHS mental health services supported you in taking part in an activity locally? LPT Overall compared against the National Benchmark

Area	% Yes (definitely or to some extent)*
National	59.67% (3720/6234)
LPT Overall	45.54% (51/112)

* % calculated out of the total responding "yes definitely," "yes to some extent," or "no, but I would have liked this"

Table 13: Q36. Has someone from NHS mental health services supported you in taking part in an activity locally? Analysed by age group, compared against LPT overall

Age Group (Years)	% Yes (definitely or to some extent)*
LPT Overall	45.54% (51/112)
18-35	50.00% (9/18)
36-50	30.30% (10/33)
51-65	48.39% (15/31)
66+	56.67% (17/30)

* % calculated out of the total responding "yes definitely," "yes to some extent," or "no, but I would have liked this"

Table 14: Q36. Has someone from NHS mental health services supported you in taking part in an activity locally? Analysed by service, compared against LPT overall

Service	% Yes (definitely or to some extent)*
LPT Overall	45.54% (51/112)
AMH Community Mental Health	57.89% (11/19)
AMH Outpatients	42.11% (16/38)
MHSOP Memory Service	33.33% (R)

* % calculated out of the total responding "yes definitely," "yes to some extent," or "no, but I would have liked this"

R - Redacted

Table 15: Q38. Have you been given information by NHS mental health services about getting support from people who have experience of the same mental health needs as you? LPT Overall compared against the National Benchmark

Area	% Yes (definitely or to some extent)*
National	51.82% (3853/7436)
LPT Overall	39.58% (57/144)

* % calculated out of the total responding "yes definitely," "yes to some extent," or "no, but I would have liked this"

Table 16: Q38. Have you been given information by NHS mental health services about getting support from people who have experience of the same mental health needs as you? Analysed by age group, compared against LPT overall

Age Group (Years)	% Yes (definitely or to some extent)*
LPT Overall	39.58% (57/144)
18-35	44.00% (11/25)
36-50	27.78% (10/36)
51-65	37.21% (16/43)
66+	50.00% (20/40)

* % calculated out of the total responding "yes definitely," "yes to some extent," or "no, but I would have liked this"

Table 17: Q38. Have you been given information by NHS mental health services about getting support from people who have experience of the same mental health needs as you? Analysed by service, compared against LPT overall

Service	% Yes (definitely or to some extent)*
LPT Overall	39.58% (57/144)
AMH Community Mental Health	45.00% (9/20)
AMH Outpatients	22.92% (11/48)
MHSOP Memory Service	52.94% (9/17)

* % calculated out of the total responding “yes definitely,” “yes to some extent,” or “no, but I would have liked this”

Appendix of analytical methods

Excluded and included groups

Data available from the Care Quality Commission's 2016 Mental Health Community Service User Survey, through Quality Health's reporting portal (Survey Online Analysis & Reporting - S.O.L.A.R.) were analysed against national and LPT-wide benchmarks as appropriate, in terms of service and the available protected characteristic breakdowns: age group, gender, and ethnicity (although only statistically significant findings and findings that provide context are considered in the present report). Within each breakdown, Quality Health excludes subgroups with small numbers of respondents (fewer than 30) to reduce the risk that individuals can be identified from the analyses. The excluded and included groups for the age group, gender, ethnicity, and service breakdowns are given Table 18, Table 19, and Table 20, and Table 21 respectively.

Table 18: Excluded and included groups for the age group breakdown

Excluded Groups
Missing (0)

Included Groups
National (13011)
My Organisation (254)
18-35 (36)
36-50 (61)
51-65 (72)
66+ (85)

Table 19: Excluded and included groups for the gender breakdown

Excluded Groups
Missing (0)

Included Groups
National (13011)
My Organisation (254)
Female (127)
Male (127)

Table 20: Excluded and included groups for the ethnicity breakdown

Excluded Groups
Missing (21)

Included Groups
National (13011)
My Organisation (254)
BME (42)
White (191)

Table 21: Excluded and included groups for the service breakdown

Excluded Groups
ADHD Adult (R)
AMH Assertive Outreach Assessment (R)
AMH Assertive Outreach Treatment (R)
AMH Cognitive Behavioural Therapy Assessment (R)
AMH Cognitive Behavioural Therapy Group (R)
AMH Cognitive Behavioural Therapy Individual (R)
AMH Dynamic Psychotherapy Service Assessment (R)
AMH Dynamic Psychotherapy Service Brief (R)
AMH Dynamic Psychotherapy Service Individual (R)
AMH HD Advisory Service (R)
AMH HD Community Service (R)
AMH HD Research Service (R)
AMH Home Treatment Team (R)
AMH Medical Psychology (R)
AMH Personality Disorder Service Group (R)
AMH Psychology Adult (R)
Aspergers (R)
Child & Adolescent Service (R)
Child & Adolescent Service - Eating Disorders (R)
Early Intervention Service - Treatment (R)
Eating Disorders Service (R)
MHSOP Community Teams (27)
MHSOP Occupational Therapy (R)
MHSOP Outpatient Teams (12)
MHSOP Younger Person Memory Team Outpatient (R)
Personality Disorder Service (R)
Missing (0)

R-Redacted









Included Groups
National (13011)
My Organisation (254)
AMH Community Mental Health (38)
AMH Outpatients (74)
MHSOP Memory Service (34)

Analysis of questions with yes or no response categories

For comparisons between LPT’s respondents and the national benchmark, respondents were grouped according to whether they responded “yes” or “no.” The odds of responding “yes” were calculated for the national benchmark and for LPT overall, and were compared using an odds ratio. Statistically significant deviations from even odds of responding “yes” are flagged in the results tables ($\alpha = .05$, Bonferroni correction applied for multiple comparisons).

For comparisons with the LPT overall benchmark, LPT’s respondents were analysed into breakdown groups (e.g., by age band, gender or service) and also grouped according to whether they responded “yes” or “no.” The odds of responding “yes” were calculated for each breakdown group and compared to the odds of responding “yes” for those not in the breakdown group using an odds ratio. Statistically significant deviations from even odds of responding “yes” are flagged in the results tables ($\alpha = .05$, Bonferroni correction applied for multiple comparisons).

Table 22: Key to interpreting tables of results for questions with yes or no response categories

	Reference benchmark (national benchmark or LPT overall)
	A subgroup with significantly higher odds of responding “yes” than those not in the subgroup, to a large degree
	A subgroup with significantly higher odds of responding “yes” than those not in the subgroup, to a medium degree
	A subgroup with significantly higher odds of responding “yes” than those not in the subgroup, to a small degree
	A subgroup with statistically even odds of responding “yes” compared to those not in the subgroup
	A subgroup with significantly lower odds of responding “yes” than those not in the subgroup, to a small degree
	A subgroup with significantly lower odds of responding “yes” than those not in the subgroup, to a medium degree
	A subgroup with significantly lower odds of responding “yes” than those not in the subgroup, to a large degree

(Essentially, greens indicate higher odds of responding “yes” and yellows/oranges/reds indicate lower odds of responding “yes”.)