

Engagement Report NottAlone Mental Health Website for Adults

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1. Executive Summary

1.1 Introduction

Local mental health leads sought to understand the current experiences and feedback of people with lived experience, carers, and professionals, with regards to accessing information on adult mental health services, in Nottingham and Nottinghamshire. This engagement will help inform the production and expansion of the [NottAlone](#) website, to enable an all-age, single point of access, for mental health information and support and highlight any other avenues for consideration when promoting local mental health services.

People with lived experience, carers and professionals were invited to provide their feedback via a survey (either online or hard copy), telephone interviews, participate in online focus group, inviting the engagement team to attend their community groups or get involved via a co-production group.

The engagement commenced on 2 September 2022 and finished on 30 October 2022 engaging 419 people. A total of 249 surveys were completed. A further 170 people were engaged with via one-to-one conversations or community group discussions hosted either by the Integrated Care Board's (ICB) engagement team or in the community.

1.2 Key Findings

- The most common method of accessing information currently is online (65%)
- 87% of respondents would consider accessing information online
- NHS websites are currently most popular for finding information online (64%)
- 49% would prefer for the new website to host a combination of information with links to other appropriate websites
- There was a preference for the website to include information about services available locally (89%) and information on how to access these services (80%)
- The Mind website was most reported as an example of a website that works well
The existing NottAlone website was also amongst those that were referenced as a good example
- Good example websites were listed as they are **accessible, informative** and **host key features** such as the ability to search for services by geographical region.
- The new website should be **informative, host certain features** such as the ability to filter, should **signpost to services and self-help resources** and include **referral information** to services
- **Issues with digital technology, confusion in understanding which website to use, lack of trust in online sites** and **not meeting needs for severe and complex mental health** were a few reasons as to why someone would not consider accessing information online

- Those who prefer not to access information online would prefer to receive this information through their GP or Nurse (73%). Other methods include **hard copies** in the community, through **word of mouth** from local health and wellbeing services and the **local media**

1.3 Next Steps

On-going work will take place with the co-production group to further develop and design the website.

2. Conclusions and Recommendations

Conclusion 1: Most participants would access information about local mental health services online and searching for information online is currently the most preferred way of accessing information on local mental health services.

Recommendation 1: Develop a website that acts as central point of information for all ages on local mental health support.

Conclusion 2: People would prefer for the website to host a range of information about mental health services but also signpost to other relevant websites where applicable.

Recommendation 2: The website should include information on local services such as their locations, wait times, access criteria and referral pathways.

Recommendation 3: The website should also include information on signs and symptoms of mental health, self-help resources, local carers support.

Conclusion 3: Websites such as Mind, NHS websites and App and NottAlone that were referenced as good examples, were done so as people like websites that are accessible and informative.

Recommendation 4: The website should be is easy to use and navigate, building on the positive features of existing sites to ensure it is user friendly and suited to needs.

Recommendation 5: The website should be accessible to all including people with disabilities and people who do not speak English as their first language.

Conclusion 4: Though most people would consider looking for information online, some prefer not to access information in this way.

Recommendation 6: Include trusted logos on the website to provide reassurance that the website is trustworthy.

Recommendation 7: Provide information on support options for more severe mental health needs, including links to crisis support.

Recommendation 8: Promote awareness of existing services through healthcare professionals, through local community groups and via the local media to ensure those who may not access information digitally are made aware of existing support services.

Further recommendations can be found in the report below.

3. Background

Mental health services for children, young adults and adults are delivered by numerous providers across Nottingham and Nottinghamshire. This means that for people to identify the services available, they have needed to know the websites to visit or the numbers to call. In addition, these services have often been promoted in isolation, rather than interlinked or through a specific pathway, leading to possible confusion for service-users, carers and health professionals.

As the local health and care system is investing significantly in mental health services, we would like to create an online space that is accessible and easy to navigate, that will help people of all ages find the right information as quickly as possible, when they need it.

The [NottAlone](#) website has already been launched for young people, providing the relevant information and signposting, for this age group. We are now looking to expand the site, so that people of all ages can see the mental health services available across Nottingham and Nottinghamshire, in one place and identify whether other avenues for providing this information may also need to be considered.

To inform the development of the website, local mental health leads wanted to hear from people with lived experience, their carers and healthcare professionals.

3.1 Aim and Objectives

Engagement was undertaken with people with lived experience, their carers and professionals across the health and care system. The aims were as follows:

- To provide people with lived experience, their carers and professionals with an opportunity to share how they currently access information on mental health services.
- To provide people with lived experience, their carers and professionals with an opportunity to provide feedback about what works and what doesn't work and what they would like to see in the future from a mental health website.
- To provide people with lived experience and their carers with an opportunity to co-produce the website to ensure this meet the needs of our people and communities.

4. Engagement Methodology

Prior to commencing engagement, draft resources were shared with a co-production group that was established to work on the website which consists of Peer Support Workers and people with lived experience. The resources were also shared with our Place Based Partnership Mental Health Forums for feedback on the engagement approaches and materials. Feedback and comments that were received included:

- Adding a question to understand what communities like about the websites they may have cited as being good examples.
- Adding a response option of 'Youtube' to a question.
- Consideration around accessibility for diverse community group including easy read versions and use of images.
- Suggestions on different avenues to promote the engagement opportunity once launched.

The engagement resources were amended to reflect the above suggestions and overall, the forums supported the approach to engagement.

The engagement commenced on 2 September 2022 and concluded on 30 October 2022.

The engagement opportunities were promoted with a range of stakeholders including community and voluntary services, organisations that support people with their mental health, diverse and ethnic community groups, faith leaders, NHS Trusts, Healthwatch, local authorities, care homes and primary care and ICB colleagues. Engagement opportunities were shared via different routes including via email, social media, website, newsletters, attendance at meetings, community groups and forums and a [press release](#). Promotional leaflets were also shared with the health and wellbeing hubs in Nottingham and Nottinghamshire to share within the community.

People with lived experience, carers and professionals could get involved in various ways including through:

- Surveys (either online or hard copy – see appendix 1)
- Telephone interviews (see appendix 2 for telephone interview and focus group questions)
- Attending a virtual focus group (see appendix 2 for telephone interview and focus group questions)
- Requesting the engagement team's attendance at a community group meeting
- Signing up to the co-production group to support the project on a more on-going basis.



The engagement resources and methods were also tailored to suit the needs of community groups. Working with Nottinghamshire County Council, an easy read version of the survey was produced and shared with organisations supporting people with learning disabilities. Questions were also taken from the easy read version of the survey and presented in a more interactive way at a mental health event at Portland College. During the event staff and students put stickers next to the response symbols as a way of expressing their preferences in a more accessible and interactive way. Additionally, a large print version of the online survey was shared and hard copies were supplied to interested organisations who directly support vulnerable communities including people with lived experience of mental health problems.

In total, 249 people completed the survey in either a hard copy, virtual format or via the easy read version.

The engagement team were invited to attend a range of community group and forums to either promote the opportunity or to host group discussions with service users. A total of 14 groups were attended and engagement opportunities were promoted at:

- The Mental Health United Event
- Nottingham North East Mental Health Network
- Bassetlaw Children and Young People's Alliance
- Mid-Nottinghamshire Health Inequalities Oversight Group
- Nottingham West - Broxtowe Mental Health Alliance
- Nottingham City's Multi-Agency Forum meeting

A total of 170 people participated and shared their views via a discussion at:

- The Bellamy Estate Coffee Morning (supporting the residents on the Bellamy Estate)
- Heya (group helping Arab women integrate within local communities, especially those that have newly arrived in the UK)
- Real Lives (supporting people with lived experience of mental health)
- Forget Me Notts (supporting affected by dementia and their carers)
- Portland College (supporting people with disabilities)
- SHE UK (supporting survivors of childhood sexual abuse, exploitation, and sexual violence)
- Carers in Hucknall (supporting carers)
- City Mental Health Collaborative event (bringing together provider organisations in Nottingham City as well as people with lived experience and their carers).
- An in-house virtual focus group
- Two virtual one-to-one conversations

In total, 419 people shared their views to help inform the development of a new mental health website for adults. The findings from the engagement can be found below

5. Findings

5.1 Survey results

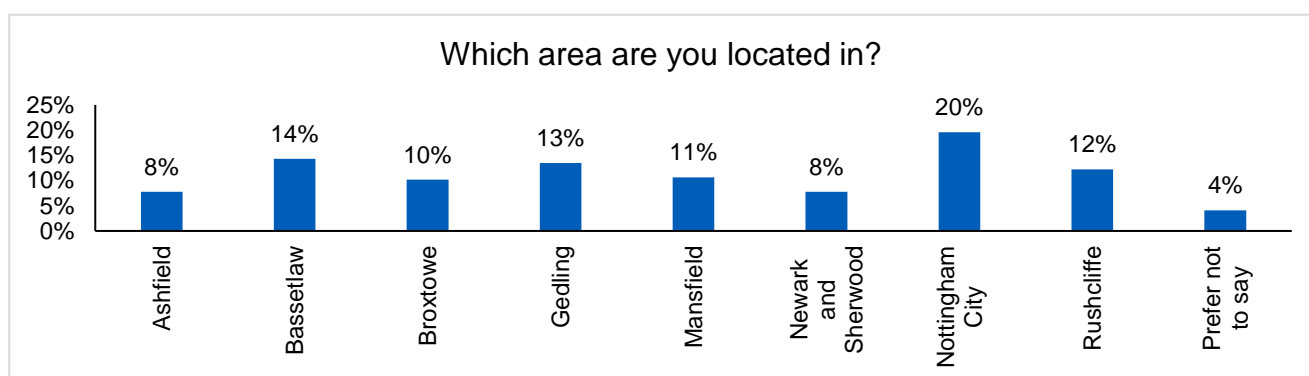
5.1.1 Respondent demographics

In total, 249 people completed the survey either online or via a hard copy¹. When people were asked to identify themselves, 47% (n=117) identified as someone with lived experience of mental health problems, 11% (n=28) identified as a carer of a loved one with mental health problems, 25% (n=62) were professionals, 9% (n=23) were members of the public and 7% (n=17) identified as 'other'. Respondents who indicated to be in the other category confirmed that they were either someone with lived experience, a carer of a loved one with mental health needs or a professional. Patient representatives and people with relatives with mental health needs also identified within the 'other' category.

Of the 61 professionals who reported their job role, it was found that, 26% (n=16) were in managerial, commissioning, or administrative roles, 15% (n=9) were Counsellors/Therapists, 13% (n=8) were GPs or a Nurse, 11% (n=7) were Social Prescribers, 11% (n=7) were allied healthcare professionals, 8% (n=5) were Social Workers, 8% (n=5) other support roles and 7% (n=4) Psychologists/Psychiatrists.

In terms of the demographics, 26% (n= 64) of respondents were aged between 55-64 years though representation across the ages were present within the survey ranging from 18-24 years to 75-84 years. In terms of ethnicity, 90% (n= 221) identified as White.

As seen the in graph below, most of the respondents were based in Nottingham City (20%, n=48). When spilt into the four Place Based Partnership areas, greatest representation is from South Nottinghamshire (36%, n=88).

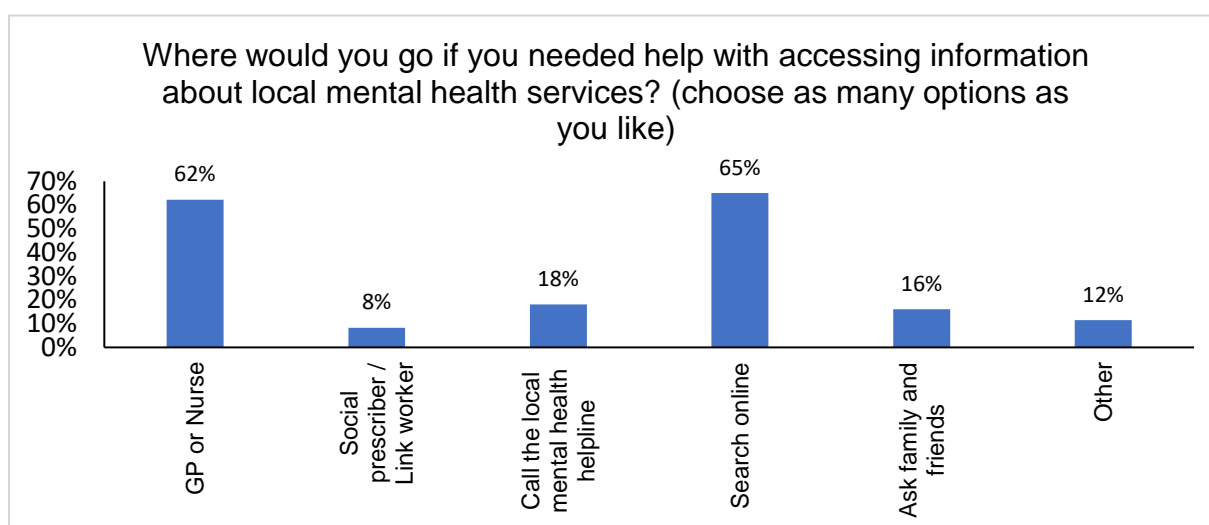


A full breakdown of all equality and diversity information of participants can be found in appendix 3.

¹ Please note all questions were answered on a voluntary basis so not all 249 people completed every question. The percentages are based on the total number of respondents for each individual question.

5.1.2. Survey findings

People reported where they would currently go if they needed help accessing information about local services. As seen in the graph below, most people reported that they would search online which was closely followed by seeing their GP or Nurse. Those who reported 'other' (12%, n=28) noted that it would depend on the circumstance with some turning to work colleagues and databases. Some were unaware of services or unsure where to look whilst others reported contacting services such as Improving Access to Psychological Therapies (IAPT), local mental health teams, diabetic clinics, Churches, NHS websites, community and voluntary services, hospital doctors and searching for complementary therapies. Concerns were also expressed around the accuracy of information if available online.



In total 87% (n=216) of people noted that they would consider accessing information online with 6% (n=16) noting that they would not access information in this way and a further 6% (n=15) being unsure.

Those who were unsure or who would not consider accessing information online reported the following reasons for their response:

Theme 1. Concerns around IT

People are concerned around how accurate and trustworthy the information online is and are concerned about how their data may be used online. Others have referenced not always having access to technology to get online when needed and technology being stressful to navigate for some.

Recommendation: Keep information on the website up to date and include logos to provide reassurance that the website is trustworthy. For those who will not access information online, ensure other methods of raising awareness of services are employed.

Theme 2. Doesn't meet needs for severe and complex mental health

It was noted that often information online is generic and not tailored to more severe and complex mental health needs as people are usually already at crisis when they require the information.

Recommendation: Ensure information on what to do in a crisis is included and include information on services that can support people with more severe mental health needs.

Theme 3. Individual differences

Not everyone prefers to access the information in this way and sometimes poor mental health can prevent someone from wanting to access information online.

Recommendation: Ensure information about local mental health services are promoted in the community, not only virtually.

Theme 4. Interaction with a person is preferred

People prefer interacting with a person rather than looking online as it was felt that there can be an overreliance on online resources and time with a professional is needed.

Recommendation: Ensure that professionals in the community are also updated on services available locally to ensure they can signpost people appropriately.

Theme 5. Not helpful

Others felt that this service would not be helpful as more immediate support is required within mental health and websites such as this only offer signposting which can result in people being sent in roundabouts.

Recommendation: Ensure criteria for services are included on the website and suggestions of where to access more immediate support are available.

Theme 6. Negative experiences of services

People reported negative experiences of services as a reason for not accessing information online. It was reported that greater resources are needed within existing mental health services in terms of staffing and space. It was also reported that greater quality care is needed within services.

Recommendation: Review provision of existing mental health services.

Theme 7. Other comments

Other comments included not being aware of certain services such as the mental health helpline and not having a need to access such as website at present.

Recommendation: Ensure that the website and available services are promoted to raise awareness of what is available locally.

As a result of not wanting to access information online, the most popular option was to access the information through a GP or nurse 73% (n=22). This was followed by calling the local mental health helpline (40%, n=12). Those who noted 'other' options (23%, n=7) reported the need to talk a person and receive information via email. Others commented on the lack of support services available which is needed rather than information and that services should provide timely, good quality care which is felt to be missing at present.

For those who would access information online, the most common website that they would currently access would be an NHS website (64%, n=161) followed by searching for services on Google (59%, n=147). Those who reported 'other' (8%, n=20) noted accessing information through Mind, Rethink Mental Illness, Nottinghamshire Healthcare NHS Foundation Trust's website, Hub of Hope, Trent PTS, and Unmind. People would also find information from their trusted contacts, look through resources they may have collected over time and even access information on apps such as NHS app, Calm and their health insurance app. Books and magazines were also noted as additional places to find information however some noted that such information is difficult to find unless you go through the GP. TeamNet was also a source of accessing information for the appropriate professionals.

People described their experience of accessing information online as neither positive nor negative (47%, n=100) and when asked to share examples of websites that worked well, Mind was most referenced, followed by an NHS website and App. The existing NottAlone was also referenced as an example of a website that works well. Further websites can be found in the word cloud below.



When people were asked what they liked about these websites, the following themes emerged:

Theme 1. Accessibility

Accessibility was a key theme that emerged in what people liked about the above websites. People noted that these websites are user friendly as they are easy to use and navigate with clear access to information. People like all information in one place and the clear routes to referring into services. It was also noted that it is important to promote any website well to ensure that people know that it is available whilst also keeping in mind that online platforms are not accessible to all.

“Websites need to be easy to navigate, simple to use and less busy, especially in times of distress, needs to be easy to use and navigate and find what help you are looking for.”

*“Easy to access clear and precise wording
Wasn’t telling me to go my GP, gave me ideas on how to support myself- the redcross website is like this too.”*

“Referral fairly simple”

Recommendation: Ensure that the adults mental health website hosts all information in one place, is easy to navigate and includes clear referral pathways to services.

Theme 2. Information

People felt that these websites were informative with lots of information on mental health and help available. They liked that they could:

- Search by symptoms
- Search for services by geographical region
- Access contact numbers for urgent and non-urgent help
- Self-refer to services
- Access information about non-health related topics such as social housing, cost of living and advice on gambling
- Access information about counselling and therapies (e.g., Cognitive Behavioural Therapy)
- Access case studies and self-help information

They also highlighted that information on websites need to be up to date and the messaging should be consistent on the site and trustworthy.

“Can get information and can refer yourself for therapy”

“Comprehensive and accurate information. Trustworthy.”

*“Rethink - the option to look for services in your area. Ease of use.
MIND - the really extensive information and fact sheets that they offer.
It's good to have onward links to other sources of information.”*

Recommendation: Ensure detailed information is provided on local mental health services and information on self-help resources, case studies, and wider services who can support with other issues (e.g. finances and housing) are also included.

Theme 3. Features

Certain features on these websites were also appreciated such as a chat function, a search bar by geographical region and menu buttons. Some of these websites as a whole were written in a non-judgmental and supportive manner with personalised messages from staff.

“Non-judgmental and are out and open that we all suffer or can suffer. You're not actually much different to anyone else, yet still and individual.”

“Easy to follow. Various options for getting in touch with a counsellor. Like the "Meet the Team" with brief message from the counsellors etc - which makes the website seem more personal.”

Recommendation: Ensure that language used on the website is written in a non-judgmental manner and the website enables people to filter their searches.

People were then asked what could be improved for a mental health website in future. The following themes were reported:

Theme 1. Information

People felt that the new website should act as a ‘one stop shop’ for local mental health services in Nottingham and Nottinghamshire. The new website should:

- Include information on support available locally including complementary therapies
- Provide contact numbers for crisis support, GPs, general mental health support services
- Include access to information on counselling and provide support with referrals
- Highlight any costs associated with accessing different services and highlight free support available
- Include potential waiting times to access services
- Focus on low level mental health needs whilst also including information about what to do in a crisis

Overall, it was felt that the information on the website needs to be clear, up-to-date and all in one place.

“Accurate, up to date information in one place”

“Realistic timeframes when they will be seen waiting lists etc”

“What people offer, referral routes how to contact. Resources available for common mental health problems, links to NHS apps & digital therapies.”

Recommendation: Ensure that the website acts as a central point for detailed information on local services that is clear and up to date.

Theme 2. Features of the website

People referenced that the website should be easy to access and navigate with reference to specific features it should host including:

- Being aimed at all ages with age-appropriate links to information
- Filters to search by demographics (e.g. age), geography and symptoms
- Online chat feature and a forum for people to have discussions
- Graphics
- Resources such as eBooks, audiobooks, recorded and guided meditations, worksheets, journal logs, cases studies, research, and evidence. Resources should be downloadable
- Availability of dark mode for to ensure greater accessibility

“Forum where people can ask and answer questions and can exchange experiences”

“Maybe to include some videos with normal people with mental illness talking about how it is for them.

Links to other websites eg groups, activities for people to join - I find most people I support are isolated and lonely and this definitely contributes to their distress.”

“A section to type filter what type of symptoms you are struggling with e.g self-harm, anxiety etc and this brings up relevant services for what you're struggling with. Each service should have a criteria that it can pop up for. The filter can include age as well so only services that fit the persons age can pop up.”

Recommendation: The website should be engaging with the use of graphics, filters, case studies, chat functions, self-help resources and be accessible to all ages and those with diverse needs.

Theme 3. Signposting

As well as general mental health support, the website also needs to signpost people to the appropriate places including:

- Crisis support
- GPs
- Services that can support children and young people, family members and carers
- Services that can support with specific mental health problems (e.g., drug and alcohol use) such as IAPT services, NHS services and local community and voluntary sector support groups
- Self-care/self-help links, videos and resources

“Don't reinvent the wheel. Signpost to good existing resources. Clearer and realistic information about what the GP and NHS can provide. Reality checks about waiting lists and timescales - don't get hopes up when services might take years to access.”

Recommendation: The website should signpost to a range of services that support with mental health, including self-help resources and crisis support.

Theme 4. Referrals

People noted that referral criteria for different services should be included on the website along with their pathways and information on how to refer.

“Clear pathway for clients. How and where to make referrals.”

“Referral criteria are not always stated - can I access this service where I live? Is it a self referral or healthcare professional referral? What length of time can I access for? What is the service delivering?”

Recommendation: Clear referral pathways and criteria to different services should be included on the website with a guide on how to refer into services.

When asked how they would like information included within the website, most people (49%, n=104) noted that they would prefer a combination of information with links to other appropriate websites with others (40%, n=84) reporting that they would like information within one website. Those who selected the 'other' option (3%, n=6) noted that

they do not have a preference as long as the information is simple for the user to find and up to date. However, others noted that a combination would be beneficial but with as much information all in one place. It was also reported by one that they would like a point of contact to guide them through the process of getting help and a request for information in a hard copy format was also made.

When asked what information they need about local mental health services, people reported that they would mostly like information about what services available locally (89%, n=216), how to access these services (83%, n=203) which were followed by self-help guides and resources (70%, n=170). Those who opted for 'other' (11%, n=28) reported that the following is needed:

- Crisis support information with alternatives to A&E and de-escalation techniques
- More mental health services and carers support in the community, with greater capacity and that are inclusive and accessible by all
- Reference culturally appropriate services.
- Information about local services (including self-help groups, social prescribing and voluntary services) waiting times, specific mental health problems they support
- How to open up about mental health and topic specific information need to be included (e.g., on bereavement, suicide, eating disorders etc.)
- Information on transitioning due to age or change of location and information on how things work such as sections
- The messaging on the website should be positive with minimal focus on medication highlighting support options such as one-to-one support and include information that is easily downloadable and shareable

When asked if they had any further comments, the following key themes emerged:

Theme 1. Comments about the website

Although some expressed a preference in talking to a healthcare professional and accessibility issues with having a resource online were raised, some people noted that there is a need for a website like this where all the information is located in one place. It was noted that the information on mental health should take a holistic view.

Others included further information about what the website should include such as:

- How to access help
- Realistic wait times for services
- Recommendations on support options for a range of mental health problems
- Links to crisis support with crisis plans and de-escalation techniques available
- Support on how to help loved ones with their mental health
- Information on the different medications and the different types of sections
- More in-dept information about different mental health teams

- Live chat functions

Overall, it was felt that the website host information that is clear and simple.

“Although the website needs to offer lots of information I feel it needs to have an urgent link to crisis support, easily directed as is obviously used by distressed mental health patients or distressed carers/family members.”

“I think really clear and simple information is needed for each service. People can be overwhelmed with lots to read.”

“Direct contact - live chat on websites. Links to resources needed and needs to be simple to use. Easy to navigate. Don't want more stress.”

Recommendation: Develop a website that hosts centralised and detailed information about local mental health services with the availability of a live chat function to further support individuals. In addition to information about services, the website should host tips on how to support a loved one, medications, sections, and support during crisis.

Theme 2. Support from services

Many people referenced their experiences of accessing support. It was reported that greater help for carers in supporting their loved ones is needed as they have limited support once they are discharged from hospital. Many carers are struggling with this.

“More support for the carers who are single, have to work and have no other means of family support. All help seems to focus on family being a support but for some individuals, there is now one else.”

It was also felt that more resources need to be invested into existing services and provide better quality of care by existing services as some services have reportedly made people feel worse. Services need to work better together to provide more joined up care.

People also expressed difficulty in accessing the right support e.g., support for older people. As a result, it was also noted that more services need to be in place to support people with their mental health needs. These services should offer longer-term support and be accessible outside of usual working hours for those in employment. More immediate access to support is also required as waiting lists are long.

“Not enough help out there. Too many slip beneath the net or are ignored”

Some people would also like support with referring to services and once referred to a service, people would benefit from regular check-ins and an acknowledgement of referral, so they don't feel forgotten.

Recommendation: Review current offer of adult mental health support services to ensure services are better meeting the needs of service users. Support for carers in the community should also be reviewed alongside potential support options with referring into a service.

Theme 3. Prevention

People also referenced the need for more work on prevention in the community such as greater education and training for a wide range of professionals.

“...Each shop assistant, hairdresser, barber, pub staff, and many others who see people regularly need some basic training to support people - and their own - mental health; and

to be able to refer people easily to healthcare professionals - both allopathic and complementary therapists - as and when they feel that would be supportive. Lets improve our education system so children learn more about mental health, and how to cope better in everyday life - including self-help and about complementary therapies that may support

them from perhaps experiencing any significant mental health problems as they may approach life differently.”

Recommendation: Ensure more preventative measures are put in place to support mental health including education and training for a wider range of professionals and for young people in schools.

Theme 4. Prefer to talk to a healthcare professional

Some people noted that they would prefer to talk to a healthcare professional rather than access the information online. Professionals such as GPs would be their first point of contact for advice.

“Would go to a GP for advice. They are qualified re resources available and best able to assess needs. Other options quoted above have unknown qualifications or expertise.”

Recommendation: Consider how to share information with those who prefer not to access information online about mental health services. As GPs have been referenced as a first point of contact, raise awareness of services available with GPs to ensure they are able to signpost accordingly.

5.2 Focus group/individual interview findings

Below is a summary of the feedback provided from groups either in the community or virtually and via a one-to-one interview.

Where would you go if you need help with accessing information about local mental health services?

Health and social care professionals

People referred to speaking to their GP, nurse, social prescriber, social workers and community mental health teams if they needed help with accessing information about local mental health services. Many people referenced their experiences of accessing support via their GP and noted that GPs are not always certain of which services to refer to or some are signposted to services not suited to their needs. Others have accessed help from their GP but found support elsewhere.

Reference was also made to accessing information from other mental health services such as IAPT providers and the Child and Adolescent Mental Health Services (CAMHS).

Voluntary and Community Sector

Many referred to accessing support from Voluntary and community sector organisations such as MIND, Alzheimer’s Society, Young Minds and BAC-IN.

Digital platforms

Some people turned to accessing information online either through a Google search, looking on the NHS website for resources or information on signs and symptoms, using the Ask Lion website or accessing the existing NottAlone website.

WhatsApp groups for people with different diagnoses and other mental health apps such as Stay Alive were referred to as points of access for mental health information.

Other

Other places for receiving information about mental health services included through local health and wellbeing hubs, safe spaces and drop-in sessions, the mental health helpline, workplace, school or college.

Family, friends and colleagues were other sources of support in identifying information about local services.

Recommendation: Ensure that information about local mental health services shared via a website and through other means including health and social care professionals, community and voluntary services, local community forums and groups (including their social media/WhatsApp platforms), through places of work and educational settings.

How would you describe your current experience accessing information about mental health services online?

Difficulty accessing information

People expressed that they are unaware of where to access information online. It was reported that a central space for receiving information online is lacking and that information around Dementia and for adult mental health in general is limited. It was noted that many online websites currently cater to young people with little available for adults.

As a result of this gap, it has been requested that a directory be available which can also be accessed by professionals such as GPs. It was also requested that an updated list of consultants be shared with GPs by Nottinghamshire Healthcare NHS Foundation Trust.

Conversely, some highlighted that there were too many websites available with a range of information that makes it more confusing for the individual who is seeking information and support. Instead, it was suggested that a central point of information is needed.

Negative or no experiences

Some people are nervous to access information about mental health for the first time. People also spoke about the negative experiences they have had in the past with some saying that they have accessed out of date information such as incorrect numbers for services. Some people referred themselves to services and later found that they did not meet the criteria for the service. Both of these factors led to the individuals feeling worse.

Some people reported not accessing information online due to not having access to the internet due to the costs around this.

Less time pressured

It was noted that having an online resource is more beneficial as it removes the pressure of having someone on the end of a phone line waiting for you to respond and you can look through information in your own time.

Recommendation: Create a central point of information on adult mental health services that is up to date with accurate information and can be access by healthcare professionals as well as the public. Ensure that this information is also available to those who are not digitally connected.

If looking online, where would you go if you needed help with your mental health?

Community and voluntary service organisations

People referred to accessing online information from a range of community and voluntary sector organisations including Survivors UK, MIND, Samaritans, POhWER, Mental health foundation, Self Help UK, Young Minds, Anna Freud and the Nottinghamshire Crisis Sanctuaries.

Statutory or IAPT services

People also referred to looking on Nottinghamshire County Council’s website, the existing NottAlone website and NHS Every Mind Matters. There was also reference to looking at the Let’s Talk Wellbeing website.

Diverse and targeted platforms

There was also reference to accessing information through specific platforms that were popular with different populations including non-English social media platforms. Some people would access information through Google.

Recommendation: Ensure that the new adult mental health website is linked to the other existing online platforms where possible so people can navigate between both websites to find the appropriate support needed.

Are you happy to share with us names of example websites that work well?

Health and Government websites

People reported that NHS websites such as the Nottinghamshire Healthcare NHS Foundation Trust, Better health – Every mind matters and the GOV.UK website work well, are easy to navigate and engaging to use. Publications produced by Nottinghamshire County Council and the existing NottAlone website was also referenced within this. Validium was also noted as a website that works well.

In addition, there was also mention of the Community and Voluntary Service's websites as they are easy to use and have engaging imagery.

Non-health related websites

There were many references to non-health related websites that communities felt work well including websites for holidays, Centre Parcs, BBC Good Food App and the Ethical Consumer. Facebook was also noted as a platform that works well.

Recommendation: When developing the adult mental health website, review existing websites noted as good examples to take key learning.

What would prevent you from accessing information online?

Issues with digital technology

People reported many reasons on why they or others may not access information online. This could be due lack of knowledge and confidence in using the internet, difficulties with digital exclusion, poverty, lower literacy levels, unemployment, and difficulties with English. Websites may not always be very accessible for those with visual impairments as well.

It was also reported that a lack of knowledge on using IT and having to go online can increase stress levels for individuals.

Confusion and lack of trust

Some reported confusion as there are too many existing websites and they are not sure which to use and some websites can be overly wordy which can deter someone from accessing information in this way. Additionally, it was reported that there appear to be more sites to signpost people, rather than services providing support in the community. As a result, not everyone is keen on accessing information online.

People expressed potential lack of trust in a website as the information may be outdated. Concerns around online scammers, data protection and privacy were also mentioned. Some people prefer having human interaction to feel listened to.

Recommendation: Ensure that the information on the website is updated, accessible for those with diverse needs and is branded with trusted organisational logos to provide reassurance that the website is reliable. For those who may not access information online, ensure that information about local services is shared through other means and reference points of support for getting online to access the information.

If you don't access information online, what are your preferred ways of accessing information about local services?

Hard copies

People would prefer to have access to hard copies of information either via a letter, on notice boards in the community including GP surgeries, Dentists, A+E, hospital wards and leaflets through their door. It was also noted that such leaflets and posters can also be present in areas such as in post offices, libraries, Churches, community centres, food banks, on the back of toilet doors, in bars and clubs and on lampposts. It was recommended that leaflets and posters should include a text number to enable people to receive all the information to their phones and include a reminder for people to take a picture so they can refer to it at a more convenient time for them.

Word of mouth

As well as ensuring information is shared widely through leaflets, spreading awareness through word of mouth was also important. This can be done by sharing information with a range of statutory services, community and voluntary sector organisations, Housing providers, community leaders, local councils, and other community organisations such as Silver Line, Citizen's Advice, Childline and the Alzheimer's Society.

Receiving information through a free phone number would also be of benefit.

Local media

Local media was also suggested as another route of sharing information about local adult mental health services. This includes via the TV and local community magazines.

Recommendation: Raise awareness of existing services through a range of community services including non-health related environments such as post offices, places of worship and libraries. Utilising local media and sharing information via word of mouth through community and voluntary services and a free phone number would also be beneficial.

What would you like to know about local services and see on the website?

Service information

People would like to know what services are available locally. This includes information about their opening times, access criteria (including the geographical areas they cover) potential costs, waiting times, their location, type of support offered and whether this is delivered in person or remotely, and their referral forms. It was mentioned that there should be an easy access pathway to services with a flow chart of options should a

particular service be unable to support. It was recommended that policies on nonattendance and discharge are included to manage expectations.

It was noted that for some people, completing a self-referral form can be overwhelming and information on how to get support with referring to and accessing a service would be valuable.

This information about services should include community and voluntary sector organisations who can support both people with lived experience and carers. Volunteering opportunities should also be included as volunteering can support people's mental and emotional wellbeing. Local carers support should also be included within the list of services.

It was also reported that information about crisis lines, emergency services should be displayed on the first page to ensure people know how to access immediate help. Similarly, it was noted that a point of contact for those who are not in crisis but in need of information would be helpful.

All information about services should be kept up to date to avoid people losing trust in the website.

Information about mental health and self-help

People would like to see information about the signs and symptoms of different mental health problems along with case studies or video testimonials from people who have shared similar experiences with information about what has helped them. It was noted that a separate page should be included on Dementia and information for carers that is easy to navigate and efficient. Information that carers would require would include how to register as a carer, respite care and benefits.

The website should also include self-help guidance to support people whilst they wait to be seen by a service. This can include practical tips, breathing exercises, grounding techniques and coping strategies.

Website features

People referenced different features that the website should have such as a welcome pack to provide information on services available which would particularly benefit new arrivals to the UK who need help understanding the healthcare system.

The first screen of the website should not have too much information on it. The website should also have printable leaflets for different services and offer a facility to download the entire directory of services to be printed. A point of contact could also be provided should people want a printed version of the directory of services to be sent to their address.

A calendar of events and meetings can also be displayed on the website to highlight the different groups and activities taking place.

If the website is signposting to other helpful sites or apps, it was requested that any potential associated costs in accessing these platforms be highlighted upfront.

The website would need to be interactive, and a chat feature could be considered with a trained healthcare professional to provide any guidance. A triage system could also streamline the need for additional referral form filling. It was also suggested that an online portal be available on the website for GPs to access with information for children and young people, adults and professionals.

The website should also have a quick exit button to enable people to leave the site quickly if they need to maintain their privacy.

It is important to provide assurance that the website is a trusted source by including logos or a tagline to say that it has been developed by the NHS and trusted partners.

Accessibility

It is important to ensure that the website is accessible to diverse community groups including people with learning disabilities and people with Dementia. It was reported that the language used on the website should be easy to read and free of jargon. Information in an easy read format should also be available.

People stressed the importance of being mindful around colours and fonts used on the website. It was reported that white backgrounds with dark colours can feel stark. Consideration could be given to having an overlay on the website toolbar to enable a change in the font colour. It was also noted that for some people, font type 'Century Gothic' is preferred as the letter 'a' is easier to read.

Additionally, large print options and audio/read aloud functions should be available to support blind and partially sighted people.

The website should also be accessible for those who do not speak English as their first language. It was suggested that translations be included for the most commonly spoken languages in the area. It is important to consider how images and language used translate to different ethnic, religious and community groups and take into consideration how mental health is communicated in different cultures. For example, using language that refers to wellbeing, feelings and emotions were preferred by some as the term 'mental health' can translate negatively in other languages.

For those who may need support in accessing digital platforms, it was suggested that the website creators link with the Digital Inclusion project in Nottinghamshire and also, Inspire.

Recommendation: The website should host detailed information about local services and about mental health problems with self-help resources. It should also be accessible to people with diverse needs and it should contain interactive features as well as logos to ensure that people trust the websites and allow for the downloading and printing of information.

Other comments

Promotion of the website

Ideas were provided on how to promote the website widely including with but not limited to women's refuge, all stakeholders on the website, social media, healthcare professionals, through different newsletters and groups hosted by health providers, post offices, libraries, dentist, public toilets, bus stops, A&E and community hubs such as the hub at Mansfield Market Place. It was suggested that QR codes be available on the poster to direct people straight to the website and also information about where people can access help to get online to view the website.

The website should also appear at the top of the list when someone searches for support in Nottinghamshire to ensure it does not get lost amongst the others. It was also requested that the website be funded long term to ensure ongoing availability of the information.

It was noted that it is important for GPs to have access to this website. It was suggested that the website can also be promoted to GPs during their protected learning time to showcase how the website works and the different functionalities. GPs can also receive information about the website through platforms such as TeamNet.

Another suggestion was the development of a free app that can be downloaded and stored on a phone.

Feedback on services

During the engagement, people also shared their experiences of accessing local mental health support. It was noted that there are issues in getting through to GPs and the receptionist asking about the nature of the call. This did not always feel comfortable for everyone. There were concerns about GPs not having enough time post-COVID and people accessing remote appointments which were not always appropriate or comfortable.

Issues were reported with referring into services as referral forms need to be easier to complete. Not all services acknowledge receipt of a referral form at present, so it is difficult to know if the referral is being processed.

Additionally, concerns were expressed over waiting times for accessing services as it was noted that some people wait until they are desperate to access help so having to wait long for services makes it more difficult. It would be helpful if services can also redirect to other support options available, not only IAPT.

With regards to IAPT support, it was reported that the six sessions of support are not enough as it can often take someone longer than six weeks to open up. It was also reported that the same questions are often asked at sessions and written information is sent in the post. This makes it difficult for people who are struggling as they are needing to read more documents and complete more paperwork.

It was also noted that the communication between mental health providers and GPs need to be improved.

Recommendation: Ensure the website is promoted through a range of mechanisms within the community to raise awareness once it is ready. Review exiting mental health support options to ensure services are better meeting the needs of communities.

6. Next steps

A copy of this engagement report will be shared with those who helped promote and participated in the engagement activity. This report will also be available on our [NHS Nottingham and Nottinghamshire Integrated Care Board website](#).

On-going work will take place with the co-production group to further develop and design the website.

7. Acknowledgements

We would like to thank all colleagues who supported the promotion and engagement opportunities with people with lived experience, carers, and professionals. We would also like to thank all those who participated in the engagement activity for taking the time to feedback their views and experiences.

8. Appendices

Appendix 1 – Survey



Have your say to inform the development of a new mental health website for adults

Local mental health leads would like to understand the current experiences and feedback of people with lived experience, carers, and professionals, with regards to accessing information on adult mental health services, in Nottingham and Nottinghamshire. This will help inform the expansion of the NottAlone (<https://nottalone.org.uk/?a=yp>) website, to enable an all-age, single point of access, for mental health information and support in the region and highlight any other avenues for consideration when promoting local mental health services.

Background

Mental health services for children, young adults and adults are delivered by numerous providers across Nottingham and Nottinghamshire. This means that for people to identify the services available, they have needed to know the websites to visit or the numbers to call. In addition, these services have often been promoted in isolation, rather than interlinked or through a specific pathway, leading to possible confusion for service-users, carers and health professionals. As the local health and care system is investing significantly in mental health services, we would like to create an online space that is accessible and easy to navigate, that will help people of all ages find the right information as quickly as possible, when they need it.

The NottAlone website has already been launched for young people, providing the relevant information and signposting, for this age group. We are now looking to expand the site, so that people of all ages can see the mental health services available across Nottingham and Nottinghamshire, in one place and identify whether other avenues for providing this information may also need to be considered.

If you have adult lived experience, or are a carer or health professional, we want to know how you access information for mental health services in the region, and what your experience has been like accessing this information online. This will help inform the expansion of the NottAlone website, to enable an all-age, single point of access, for mental health information and support in the region and highlight any other avenues for consideration when promoting local mental health services. For further information, please visit <https://notts.icb.nhs.uk/get-involved/current-and-previous-engagement-consultations/> or contact nnicb-nn.engagement@nhs.net or 07818580719. The survey is quick and easy to complete and will take no more than 15 minutes of your time. If for whatever reason, you cannot complete this survey or you would like to share your views over the phone instead, kindly contact the Engagement Team via nnicb-nn.engagement@nhs.net or 07818580719 before 21 October 2022 to arrange a time and date to take part.

This survey contains some questions where you can write freely. When providing responses to these, please do not write any information that may identify you (for example, name or address). Your responses to this survey will be uploaded onto Microsoft Forms and this hard copy will be destroyed securely. Your responses may be shared with other services but the data you provide will be anonymised so we will not analyse or share any information that will make you identifiable. You can view our privacy notice for engagement (<https://notts.icb.nhs.uk/get-involved/privacy-statement-for-engagement/>) and the ICB privacy notice (<https://notts.icb.nhs.uk/privacy-policy/>). A copy of the final report with the overall findings of this survey will be published on this website (<https://notts.icb.nhs.uk/get-involved/current-and-previous-engagement-consultations/>). To request a copy of the report please contact nnicb-nn.engagement@nhs.net or call or text 07818580719. **This survey will close on Sunday 30 October 2022.**

To request this information in another language or format please contact the Engagement Team at: nnicb-nn.engagement@nhs.net or call or text 07818580719. When texting or leaving a message, please leave your contact details and a member of the team will get back to you.

1. **Before continuing, we need to get your permission that you agree for your views to be recorded. Your views will be used to analyse and produce a report. This information may be shared with other services but it will be anonymous and WILL NOT contain anything that could identify you as an individual. Do you give your permission?**

- Yes
 No (go to the end of the survey)

2. Are you completing this survey as:

- Someone with lived experience of mental health problems
 A carer of a loved one with mental health needs
 A professional
 Member of the public
 Other (please state):

3. If you are a professional, please state your job role:

4. Where would you go if you needed help with accessing information about local mental health services? (choose as many options as you like)

- GP or nurse
 Social prescriber / Link worker
 Call the local mental health helpline
 Search online
 Ask family and friends

Other (please state):

6. Would you consider accessing information about local mental health services online?

- Yes (if you are answering 'Yes', please skip to Q9)
- No
- Not sure

7. If no, what would prevent you from accessing information about local mental health services online?

8. How would you prefer to access information about local mental health services? (you can choose as many options as you like)

- GP or nurse (skip to Q15)
- Social prescriber / Link worker (skip to Q15)
- Call the local mental health helpline (skip to Q15)
- Ask family and friends (skip to Q15)
- Other- please state (skip to Q15):

9. If looking online, where would you go if you needed help with accessing information about local mental health services? (choose as many options as you like)

- NHS website
- Notts Help Yourself website
- Ask Lion website
- NottAlone website
- Facebook
- Twitter
- Instagram
- TikTok
- Youtube
- Search on Google
- I am not sure of where to look for information online
- Other (please state):

10. How would you describe your experience accessing information about local mental health services online?

- Very positive
- Positive

- Neither positive or negative
- Negative
- Very negative
- Not sure

11. Please share below the names of any example websites that work well

12. What do you like about these websites?

13. What would you like to see improved for a new mental health website?

14. When looking for information, do you prefer information to be available:

- Within one website
- Links to take you to other appropriate websites
- Combination of information with links to other appropriate websites
- Other (please state):

15. What information do you need about local mental health services? (please select as many as you like):

- Self-help guides and resources
- Information about mental health services that are available locally
- Information on how to access local services
- Information on signs and symptoms of mental health problems
- Resources for carers
- Information about local carers support
- Other (please state):

16. Do you have any other comments?

17. Which area are you located in?

- Ashfield
- Bassetlaw
- Broxtowe
- Gedling
- Mansfield
- Newark and Sherwood
- Nottingham City
- Rushcliffe
- Prefer not to say

Equality and Diversity Section

We are committed to providing equal access to healthcare services to all members of the community. To achieve this, gathering the following information is essential and will help us ensure that we deliver the most effective and appropriate healthcare.

Responding to these questions is **entirely voluntary** and any information provided will remain anonymous.

What is your gender?

- Boy/Man
- Girl/Woman
- Non-binary (An umbrella term for people whose gender identity doesn't sit comfortably with 'man' or 'woman')
- Other (you can specify if you wish)

- Prefer not to say

Is your gender identity the same as your sex registered at birth?

- Yes
- No
- Prefer not to say

Which age band do you fall into?

- Under 18

- 18-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65-74
- 75-84
- 85+
- Prefer not to say

Which race/ethnicity best describes you?

- Arab
- Asian / Asian British – Bangladeshi
- Asian / Asian British – Indian
- Asian / Asian British – Pakistani
- Black/Black British – African
- Black/Black British – Caribbean
- Chinese
- Gypsy or Traveller
- Mixed – White and Asian
- Mixed – White and Black African
- Mixed – White and Black Caribbean
- Other Asian background
- Other Black background
- Other ethnic background
- Other mixed background
- White
- White – Irish
- Prefer not to say

Do you have a health condition or disability that impacts on your life?

- No known disability, health condition or learning difference
- A long-standing illness or health condition such as cancer, HIV, diabetes, chronic heart disease, or epilepsy
- A mental health difficulty, such as depression, schizophrenia or anxiety disorder
- A physical impairment or mobility issues, such as difficulty using your arms or using a wheelchair or crutches
- A social/communication impairment such as a speech and language impairment or Asperger's syndrome/other autistic spectrum disorder
- A specific learning difficulty such as dyslexia, dyspraxia or AD(H)D
- Blind or have a visual impairment uncorrected by glasses
- D/deaf or have a hearing impairment

An impairment, health condition or learning difference that is not listed above
(specify if you wish)

Prefer not to say

What is your religion/belief, if any?

- No religion
- Atheist (no belief)
- Buddhist
- Christian
- Christian - Church of Scotland
- Christian - Roman Catholic
- Christian - Presbyterian Church in Ireland
- Christian - Church of Ireland
- Christian - Methodist Church in Ireland
- Christian - Other denomination
- Hindu
- Jewish
- Muslim
- Sikh
- Spiritual
- Any other religion or belief
- Prefer not to say

What is your sexual orientation?

- Asexual
- Bi/bisexual
- Gay man
- Gay woman/lesbian
- Heterosexual/straight
- Queer
- Other
- Prefer not to say

Are you a carer providing unpaid support to a family member, partner or friend who needs help because of their illness, frailty, disability, a mental health problem or an addiction?

- Yes
- No
- Prefer not to say

How satisfied are you with the arrangements in place to collect your views?

- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied

- Not sure
- Prefer not to say

Thank you for taking part in this survey.

Your responses are important to us and they will be used to help shape health care.

To share your views further via telephone or to register your interest in attending a virtual focus group at a later date, please contact nnicb-nn.engagement@nhs.net or call or text 07818580719 before **Sunday 30 October 2022**.

We will be looking continue working with people who have lived experience, carers and professionals on a more ongoing basis to further develop and co-produce this mental health website. To express your interest in being involved in a future co-production working group, please contact nnicb-nn.engagement@nhs.net or call or text 07818580719. Your details will be shared with the mental health leads to enable your further participation in this work.

Appendix 2 – Focus group / telephone interview questions

Local mental health leads would like to understand the current experiences and feedback of people with lived experience, carers, and professionals, with regards to accessing information on adult mental health services, in Nottingham and Nottinghamshire. This will help inform the expansion of the NottAlone website, to enable an all-age, single point of access, for mental health information and support in the region and highlight any other avenues for consideration when promoting local mental health services.

Background

Mental health services for children, young adults and adults are delivered by numerous providers across Nottingham and Nottinghamshire. This means that for people to identify the services available, they have needed to know the websites to visit or the numbers to call. In addition, these services have often been promoted in isolation, rather than interlinked or through a specific pathway, leading to possible confusion for service-users, carers and health professionals.

As the local health and care system is investing significantly in mental health services, we would like to create an online space that is accessible and easy to navigate, that will help people of all ages find the right information as quickly as possible, when they need it.

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If you have adult lived experience, or are a carer or health professional, we want to know how you access information for mental health services in the region, and what your experience has been like accessing this information online. This will help inform the expansion of the NottAlone website, to enable an all-age, single point of access, for mental health information and support in the region and highlight any other avenues for consideration when promoting local mental health services. For further information, please visit [Current and previous engagement & consultations - NHS Nottingham and Nottinghamshire ICB](#) or contact nccg.team.engagement@nhs.net or 07818580719.

When filling in the form, please do not write any information that may identify the service user, carer or professional (for example, name or address).

Your responses may be shared with other services but the data you provide will be anonymised so we will not analyse or share any information that will make you identifiable. To read about our privacy notice visit [Privacy Statement for Engagement - NHS Nottingham and Nottinghamshire ICB](#). A copy of the final report with the overall findings of this engagement will be published on [Current and previous engagement & consultations - NHS Nottingham and Nottinghamshire ICB](#). To request a copy of the report please contact nnicb-nn.engagement@nhs.net or call or text 07818580719.

To request this information in another language or format please contact the Engagement Team at: nnicb-nn.engagement@nhs.net or call or text 07818580719. If texting or leaving a message, please provide your contact details and a member of the team will get back to you.

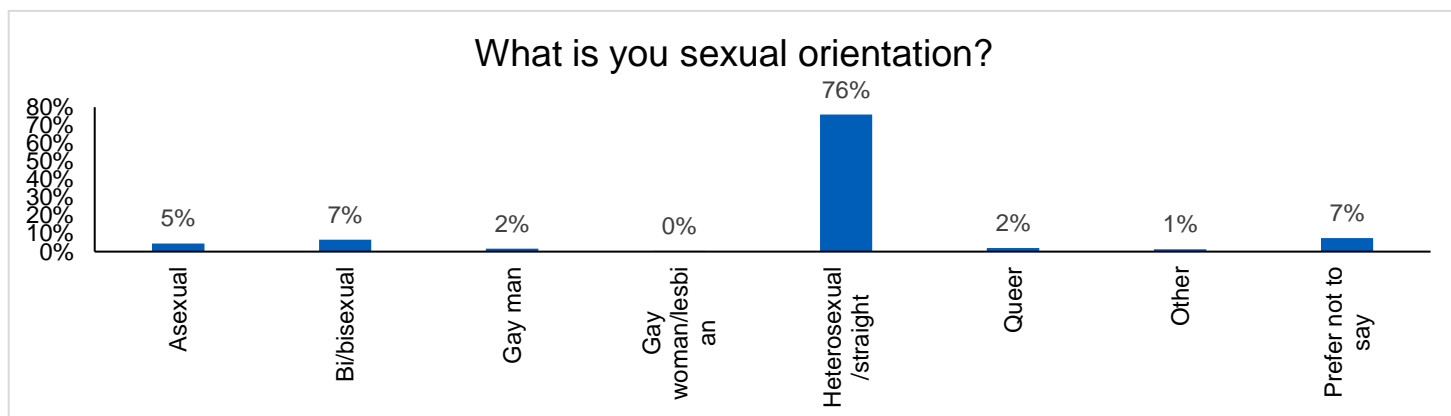
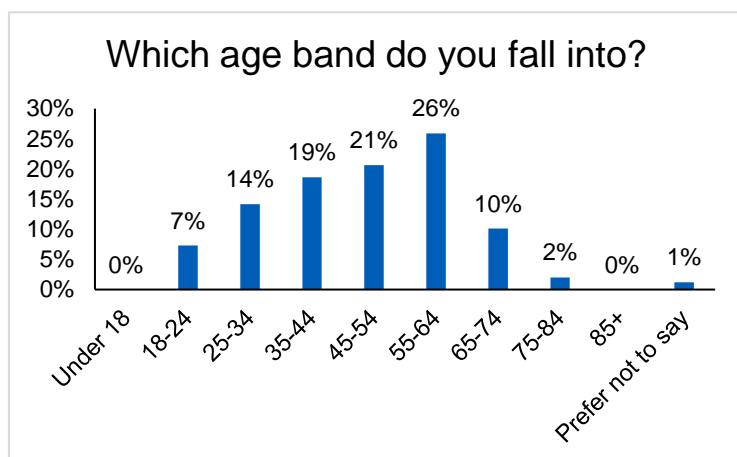
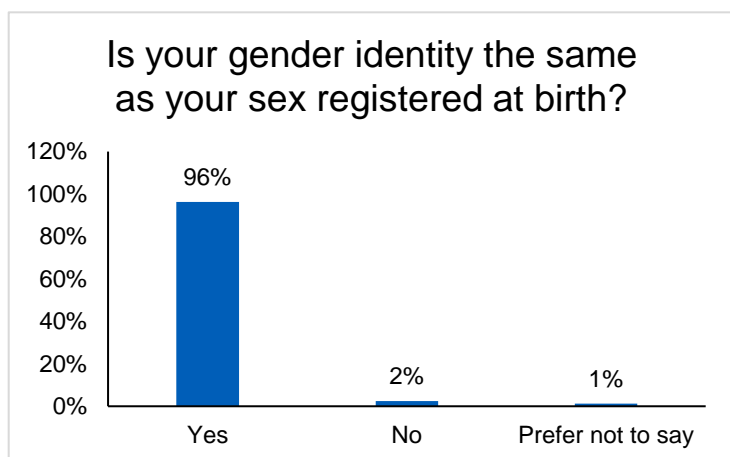
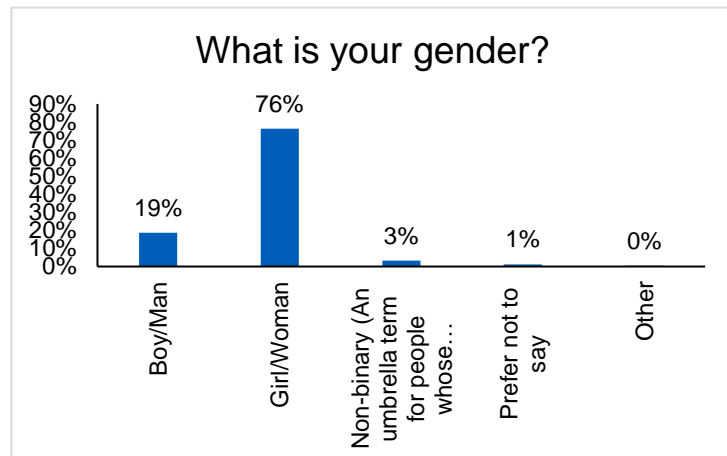
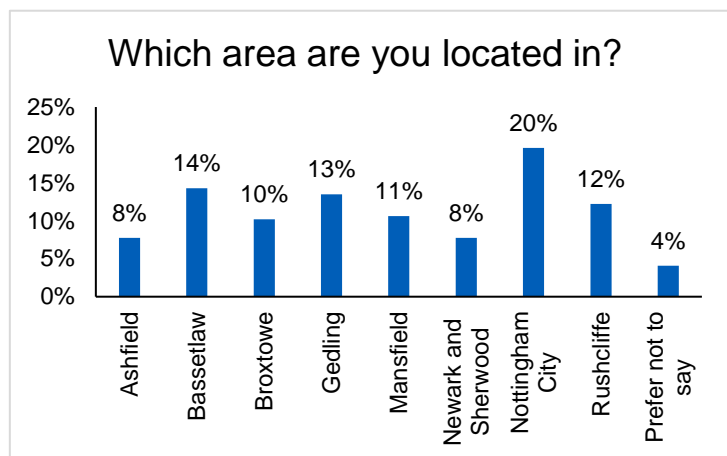
All engagement ends on Sunday 30 October 2022.

<p>Before continuing, we need to get your permission that you agree for your views to be recorded. Your views will be used to analyse and produce a report. This information may be shared with other services but it will be anonymous and WILL NOT contain anything that could identify you as an individual. Do you give your permission?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Are you completing this as:</p>	<p><input type="checkbox"/> Someone with lived experience of mental health problems <input type="checkbox"/> A carer of a loved one with mental health needs <input type="checkbox"/> A professional <input type="checkbox"/> Member of the public <input type="checkbox"/> other (please state): Click or tap here to enter text.</p>
<p>1. Where would you go if you need help with accessing information about local mental health services?</p>	
<p>2. How would you describe your current experience accessing information about mental health services online? <i>(if don't access information online, skip to Q7)</i></p>	
<p>3. (online only) If looking online, where would you go if you needed help with your mental health?</p>	
<p>4. (online only) Are you happy to share with us names of example websites that work well?</p>	

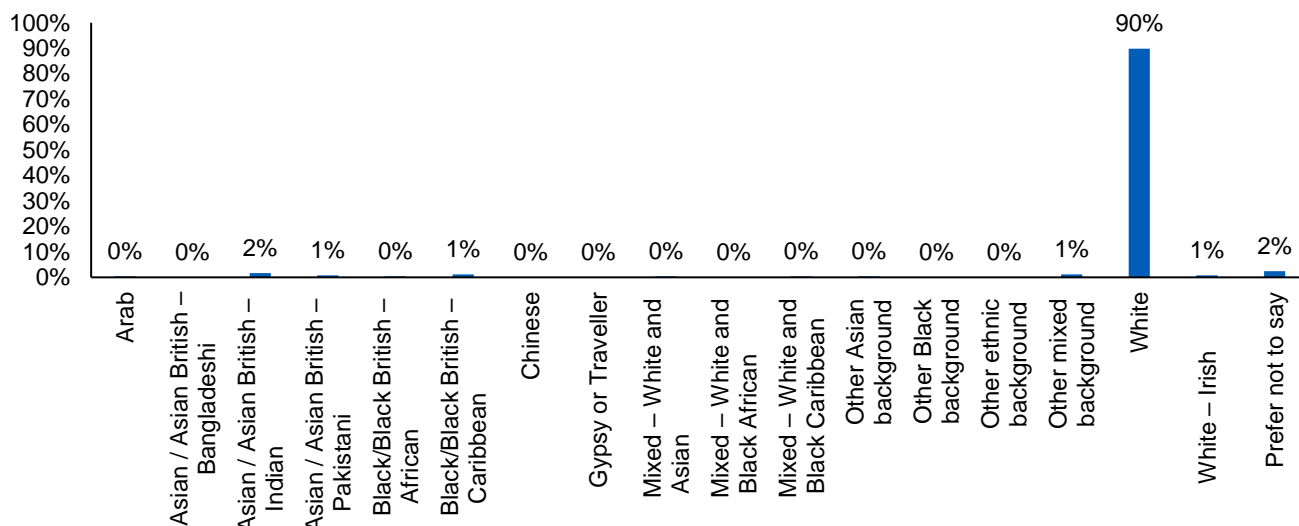
<p>5. <i>(if don't access information online only)</i> What would prevent you from accessing information online?</p>	
<p>6. <i>(if don't access information online only)</i> If you don't access information online, what are your preferred ways of accessing information about local services?</p>	
<p>7. <i>(All)</i> What would you like to know about local mental health services?</p>	
<p>Any other comments?</p>	

We will be looking continue working with people who have lived experience, carers and professionals on a more on-going basis to further develop and co-produce this mental health website. To express your interest in being involved in a future co-production working group, please contact nnicb-nn.engagement@nhs.net or call or text 07818580719.

Appendix 3 – Equality and Diversity Information



Which race/ethnicity best describes you?



Do you have a health condition or disability that impacts on your life?

