Leicestershire Partnership NHS Trust: CQC Mental Health Community Service User Survey 2017

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

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Introduction

Aim

The present report looks at the 2017 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 include[1]:

- 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 2017 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 and gender; unlike in previous years, a breakdown by ethnicity was not available.

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[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 publically 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 Office[2]. 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). In the tables of analysis throughout this report, the letter "R" is used to indicate a redacted number.

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

Summary

Main themes from the CQC Mental Health Community Service User Survey 2017 affecting service users at Leicestershire Partnership NHS Trust:

Less likely to report that they had seen NHS mental health services often enough (or more than often enough) for their needs:
- Adult General Psychiatry Community and Outpatient Teams
- patients aged 50 and under
- worse than in 2016

Less likely to report that they had agreed with someone from NHS mental health services what care they will receive:
- MHSOP Memory Clinics
- patients aged 66 and over
- worse than in 2016

Less likely to report that they felt that decisions were made together by them and the person they saw during discussions on how their care is working:
- LPT overall
- Adult General Psychiatry Community and Outpatient Teams
- patients aged 35 and under
- worse than in 2016

Less likely to report that they knew who was in charge of organising their care while a change was taking place:
- LPT overall
- Adult General Psychiatry Community and Outpatient Teams
- women
- worse than in 2016

Less likely to report knowing who to contact out of office hours in a crisis:
- LPT overall
- MHSOP Memory Clinics
- patients aged 66 and over
- women
- similar to 2016

Less likely to report having been given any help or advice with finding support for finding or keeping work (from amongst those who wanted this service):
- LPT overall
- Adult General Psychiatry Community and Outpatient Teams
- worse than in 2016

Less likely to report having been given information by NHS mental health services about getting support from people who have experience of the same mental health needs as them:
- LPT overall
- patients aged 35 and under
- women
- similar to 2016

Less likely to rate their overall experience using the most positive ranks (ranks 8 to 10 where rank 0 indicates a very poor experience and rank 10 indicates a very good experience):
- Adult General Psychiatry Community and Outpatient Teams

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.

Your care and treatment

- In 2017, compared to LPT overall, service users in Adult General Psychiatry Community and Outpatient Teams were less likely to report that they had seen NHS mental health services often enough (or more than often enough) for their needs; there was a trend for this issue to disproportionately affect patients aged 50 and under (Table 1). This reflects a worsening of the position as in 2016, although direct comparisons by service area are not possible due to changes in the grouping of service areas (Table 2).

Planning your care

- In 2017, compared to LPT overall, service users in MHSOP Memory Clinics were less likely to report that they had agreed with someone from NHS mental health services what care they will receive; there was a trend for this issue to disproportionately affect patients aged 66 and over (Table 3). This reflects a worsening of the position as in 2016, although direct comparisons by service area are not possible due to changes in the grouping of service areas (Table 4).

Reviewing your care

- In 2017, compared to the national benchmark, service users in LPT, and especially in Adult General Psychiatry Community and Outpatient Teams, were less likely to report that they felt that decisions were made together by them and the person they saw during discussions on how their care is working; there was a trend for this issue to disproportionately affect patients aged 35 and under (Table 5). This reflects a worsening of the position as in 2016, although direct comparisons by service area are not possible due to changes in the grouping of service areas (Table 6).

Changes in who you see

- Compared to the national benchmark, service users in LPT, and especially in Adult General Psychiatry Community and Outpatient Teams, were less likely to report that they knew who was in charge of organising their care while a change was taking place; this issue was more likely to affect women (Table 7). This reflects a worsening of the position as in 2016, for service users in LPT overall, and especially for women (Table 8).

Crisis care

- In 2017, compared to the National benchmark, service users in LPT, and especially in MHSOP Memory Clinics, were less likely to report knowing who to contact out of office hours in a crisis; this issue was more likely to affect patients aged 66 and over and women (Table 9). This reflects a similar position to that seen in 2016 for service users in LPT overall, but with an improvement for men relative to women (Table 10).

Support and Wellbeing

- In 2017, compared to the National benchmark, service users in LPT, and especially in Adult General Psychiatry Community and Outpatient Teams, were less likely to report having been given any help or advice with finding support for finding or keeping work (Table 11). This reflects a worsening of the position as in 2016 for service users in LPT overall, although direct comparisons by service area are not possible due to changes in the grouping of service areas (Table 12).

- With respect to help or advice with finding support for physical health needs, help or advice with finding support for financial advice or benefits, and support for taking part in an activity locally, the position in 2017 (Table 11) was similar to or better than the position in 2016 (Table 12).

- Compared to the National benchmark, service users in LPT were less likely to report having been given information by NHS mental health services about getting support from people who have experience of the same mental health needs as them; this issue disproportionately affected patients aged 35 and under and women (Table 13). This reflects a similar position to that seen in 2016 for service users in LPT overall; however direct comparisons by service area are not possible due to changes in the grouping of service areas (Table 14).

Overall

- Compared to LPT overall, service users in Adult General Psychiatry Community and Outpatient Teams were less likely to rate their overall experience using the most positive ranks (ranks 8 to 10 where rank 0 indicates a very poor experience and rank 10 indicates a very good experience, Table 15). Even so, there was a slight improvement to the position as in 2016 for service users in LPT overall; however direct comparisons by service area are not possible due to changes in the grouping of service areas (Table 16).

Appendix of analyses

A key to the colour coding in the tables of analysis can be found in Table 20.

Your care and treatment

- In 2017, compared to LPT overall, service users in Adult General Psychiatry Community and Outpatient Teams were less likely to report that they had seen NHS mental health services often enough for their needs (or more); there was a trend for this issue to disproportionately affect patients aged 50 and under (Table 1).

- This reflects a worsening of the position as in 2016, although direct comparisons by service area are not possible due to changes in the grouping of service areas (Table 2).

Table 1: 2017 Q3. In the last 12 months, do you feel you have seen NHS mental health services often enough for your needs? Analysed by service area, age group, and gender, compared against LPT overall

	Service area	% Yes, definitely / Yes, to some extent / It is too often*
	LPT Overall	71.7% (152/212)
Service area	Adult General Psychiatry Community and Outpatient Teams	56.7% (51/90)
	MHSOP Memory Clinics	88.1% (37/42)
Age group	18-35	58.6% (17/29)
	36-50	56.5% (26/46)
	51-65	70.2% (40/57)
	66+	86.3% (69/80)
Gender	Female	69.1% (85/123)
	Male	75.3% (67/89)

* % calculated out of the total responding "Yes, definitely" "Yes, to some extent" "It is too often" and "No"

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Table 2: 2016 Q3. In the last 12 months, do you feel you have seen NHS mental health services often enough for your needs? Analysed by service area, age group, and gender, compared against LPT overall

	Service area	% Yes, definitely / Yes, to some extent / It is too often*
	LPT Overall	74.9% (182/243)
Service area	AMH Community Mental Health	91.4% (32/35)
	AMH Outpatients	64.9% (48/74)
	MHSOP Memory Service	90.3% (28/31)
Age group	18-35	62.9% (22/35)
	36-50	70.0% (42/60)
	51-65	75.0% (51/68)
	66+	83.8% (67/80)
Gender	Female	75.8% (94/124)
	Male	73.9% (88/119)

* % calculated out of the total responding "Yes, definitely" "Yes, to some extent" "It is too often" and "No"

Planning your care

- In 2017, compared to LPT overall, service users in MHSOP Memory Clinics were less likely to report that they had agreed with someone from NHS mental health services what care they will receive; there was a trend for this issue to disproportionately affect patients aged 66 and over (Table 3).

- This reflects a worsening of the position as in 2016, although direct comparisons by service area are not possible due to changes in the grouping of service areas (Table 4).

Table 3: 2017 Q11. Have you agreed with someone from NHS mental health services what care you will receive? Analysed by service area, age group, and gender compared against LPT overall

	Service area	% Yes, definitely / Yes, to some extent*
	LPT Overall	71.5% (153/214)
Service area	Adult General Psychiatry Community and Outpatient Teams	77.2% (71/92)
	MHSOP Memory Clinics	42.5% (17/40)
Age group	18-35	69.7% (23/33)
	36-50	89.1% (41/46)
	51-65	76.8% (43/56)
	66+	58.2% (46/79)
Gender	Female	72.0% (90/125)
	Male	70.8% (63/89)

* % calculated out of the total responding "Yes, definitely" "Yes, to some extent" and "No"

Table 4: 2016 Q11. Have you agreed with someone from NHS mental health services what care you will receive? Analysed by service area, age group, and gender, compared against LPT overall

	Service area	% Yes, definitely / Yes, to some extent*
	LPT Overall	75.4% (181/240)
Service area	AMH Community Mental Health	83.8% (31/37)
	AMH Outpatients	78.9% (56/71)
	MHSOP Memory Service	65.6% (21/32)
Age group	18-35	74.3% (26/35)
	36-50	74.6% (44/59)
	51-65	81.2% (56/69)
	66+	71.4% (55/77)
Gender	Female	82.6% (100/121)
	Male	68.1% (81/119)

* % calculated out of the total responding "Yes, definitely" "Yes, to some extent" and "No"

Reviewing your care

- In 2017, compared to the national benchmark, service users in LPT, and especially in Adult General Psychiatry Community and Outpatient Teams, were less likely to report that they felt that decisions were made together by them and the person they saw during discussions on how their care is working; there was a trend for this issue to disproportionately affect patients aged 35 and under (Table 5).

- This reflects a worsening of the position as in 2016, although direct comparisons by service area are not possible due to changes in the grouping of service areas (Table 6).

Table 5: 2017 Q16. Did you feel that decisions were made together by you and the person you saw during this discussion? (Follows on from Q15. Were you involved as much as you wanted to be in discussing how your care is working?) Analysed by service area and age group, compared against National benchmark

	Service area	% Yes, definitely / Yes, to some extent*
	National	90.5% (6215/6867)
Service area	LPT Overall	83.0% (88/106)
	Adult General Psychiatry Community and Outpatient Teams	75.0% (42/56)
	MHSOP Memory Clinics	85.7% (12/14)
Age group	18-35	73.7% (14/19)
	36-50	87.5% (21/24)
	51-65	82.1% (23/28)
	66+	85.7% (30/35)
Gender	Female	83.6% (46/55)
	Male	82.4% (42/51)

* % calculated out of the total responding "Yes, definitely" "Yes, to some extent" and "No"

Table 6: 2016 Q16. Did you feel that decisions were made together by you and the person you saw during this discussion? (Follows on from Q15. Were you involved as much as you wanted to be in discussing how your care is working?) Analysed by service area and age group, compared against National benchmark

	Service area	% Yes, definitely / Yes, to some extent*
	National	92.0% (7480/8132)
Service area	LPT Overall	92.4% (134/145)
	AMH Community Mental Health	96.2% (25/26)
	AMH Outpatients	95.0% (38/40)
	MHSOP Memory Service	90.9% (20/22)
Age group	18-35	85.7% (18/21)
	36-50	92.3% (24/26)
	51-65	91.7% (44/48)
	66+	96.0% (48/50)
Gender	Female	91.5% (65/71)
	Male	93.2% (69/74)

* % calculated out of the total responding "Yes, definitely" "Yes, to some extent" and "No"

Changes in who you see

- Compared to the national benchmark, service users in LPT, and especially in Adult General Psychiatry Community and Outpatient Teams, were less likely to report that they knew who was in charge of organising their care while a change was taking place; this issue was more likely to affect women (Table 7).

- This reflects a worsening of the position as in 2016, for service users in LPT overall, and especially for women (Table 8).

Table 7: 2017 Q20. Did you know who was in charge of organising your care while this change was taking place? (Follows on from Q17. In the last 12 months, have the people you see for your care or services changed?) Analysed by service area and gender, compared against National benchmark

	Breakdown	% Yes*
	National	54.1% (2206/4079)
Service area	LPT Overall	38.8% (26/67)
	Adult General Psychiatry Community and Outpatient Teams	29.7% (11/37)
	MHSOP Memory Clinics	45.5% (5/11)
Age group	18-35	33.3% (5/15)
	36-50	25.0% (4/16)
	51-65	33.3% (4/12)
	66+	54.2% (13/24)
Gender	Female	32.5% (13/40)
	Male	48.1% (13/27)

* % calculated out of the total responding "Yes" and "No"

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Table 8: 2016 Q20. Did you know who was in charge of organising your care while this change was taking place? (Follows on from Q17. In the last 12 months, have the people you see for your care or services changed?) Analysed by service area and gender, compared against National benchmark

	Breakdown	% Yes*
	National	54.9% (2179/3969)
Service area	LPT Overall	54.8% (51/93)
	AMH Community Mental Health	93.3% (14/15)
	AMH Outpatients	45.7% (16/35)
	MHSOP Memory Service	62.5% (R)
Age group	18-35	36.4% (4/11)
	36-50	46.2% (12/26)
	51-65	65.4% (17/26)
	66+	60.0% (18/30)
Gender	Female	59.6% (28/47)
	Male	50.0% (23/46)

* % calculated out of the total responding "Yes" and "No"

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Crisis care

- In 2017, compared to the National benchmark, service users in LPT, and especially in MHSOP Memory Clinics, were less likely to report knowing who to contact out of office hours in a crisis; this issue was more likely to affect people aged 66 and over and women (Table 9).

- This reflects a similar position to that seen in 2016 for service users in LPT overall, but with an improvement for men relative to women (Table 10).

Table 9: 2017 Q21. Do you know who to contact out of office hours if you have a crisis? Analysed by service area, age group and gender, compared against National benchmark

	Breakdown	% Yes*
	National	71.2% (8251/11595)
Service area	LPT Overall	55.2% (100/181)
	Adult General Psychiatry Community and Outpatient Teams	69.6% (55/79)
	MHSOP Memory Clinics	28.1% (9/32)
Age group	18-35	50.0% (15/30)
	36-50	70.3% (26/37)
	51-65	64.6% (31/48)
	66+	42.4% (28/66)
Gender	Female	52.8% (56/106)
	Male	58.7% (44/75)

* % calculated out of the total responding "Yes" and "No"

Table 10: 2016 Q21. Do you know who to contact out of office hours if you have a crisis? Analysed by service area, age group and gender, compared against National benchmark

	Breakdown	% Yes*
	National	69.5% (7773/11184)
Service area	LPT Overall	53.9% (117/217)
	AMH Community Mental Health	74.2% (23/31)
	AMH Outpatients	63.2% (43/68)
	MHSOP Memory Service	35.7% (10/28)
Age group	18-35	56.3% (18/32)
	36-50	73.5% (36/49)
	51-65	55.6% (35/63)
	66+	38.4% (28/73)
Gender	Female	54.6% (59/108)
	Male	53.2% (58/109)

* % calculated out of the total responding "Yes" and "No"

Support and Wellbeing

- In 2017, compared to the National benchmark, service users in LPT, and especially in Adult General Psychiatry Community and Outpatient Teams, were less likely to report having been given any help or advice with finding support for finding or keeping work (Table 11).

- This reflects a worsening of the position as in 2016 for service users in LPT overall, although direct comparisons by service area are not possible due to changes in the grouping of service areas (Table 12).

- With respect to help or advice with finding support for physical health needs, help or advice with finding support for financial advice or benefits, and support for taking part in an activity locally, the position in 2017 (Table 11) was similar to or better than the position in 2016 (Table 12).

Table 11: 2017 Q35 to Q38. Support and well-being. Analysed by service area, compared against National benchmark

	Service area	In the last 12 months, did NHS mental health services give you any help or advice with finding support for physical health needs?	In the last 12 months, did NHS mental health services give you any help or advice with finding support for financial advice or benefits?	In the last 12 months, did NHS mental health services give you any help or advice with finding support for finding or keeping work?	Has someone from NHS mental health services supported you in taking part in an activity locally?
		% Yes, definitely / Yes, to some extent*			
	National	65.4% (4423/6768)	56.3% (4001/7106)	57.1% (1904/3332)	58.3% (3747/6424)
Service area	LPT Overall	60.2% (59/98)	48.5% (47/97)	32.4% (12/37)	46.7% (43/92)
	Adult Gen Psych Comm/Outpnt	47.9% (23/48)	44.9% (22/49)	25.0% (5/20)	46.7% (21/45)
	MHSOP Memory Clinics	64.3% (9/14)	46.2% (6/13)	0.0% (R)	36.4% (4/11)
Age group	18-35	57.1% (8/14)	46.7% (7/15)	36.4% (4/11)	28.6% (4/14)
	36-50	63.0% (17/27)	39.3% (11/28)	26.7% (4/15)	56.0% (14/25)
	51-65	53.8% (14/26)	50.0% (13/26)	33.3% (R)	48.1% (13/27)
	66+	64.5% (20/31)	57.1% (16/28)	40.0% (R)	46.2% (12/26)
Gender	Female	57.9% (33/57)	44.6% (25/56)	33.3% (7/21)	40.7% (22/54)
	Male	63.4% (26/41)	53.7% (22/41)	31.3% (5/16)	55.3% (21/38)

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

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Table 12: 2016 Q35 to Q38. Support and well-being. Analysed by service area, compared against National benchmark

	Service area	In the last 12 months, did NHS mental health services give you any help or advice with finding support for physical health needs?	In the last 12 months, did NHS mental health services give you any help or advice with finding support for financial advice or benefits?	In the last 12 months, did NHS mental health services give you any help or advice with finding support for finding or keeping work?	Has someone from NHS mental health services supported you in taking part in an activity locally?
		% Yes, definitely / Yes, to some extent*			
	National	66.2% (4324/6534)	57.9% (4010/6926)	58.2% (1925/3306)	59.7% (3720/6234)
Service area	LPT Overall	61.1% (80/131)	45.5% (55/121)	40.6% (26/64)	45.5% (51/112)
	AMH Community Mental Health	68.2% (15/22)	58.8% (10/17)	50.0% (7/14)	57.9% (11/19)
	AMH Outpatients	47.6% (20/42)	25.6% (10/39)	34.8% (8/23)	42.1% (16/38)
	MHSOP Memory Service	71.4% (10/14)	61.5% (8/13)	100.0% (R)	33.3% (R)
Age group	18-35	41.2% (7/17)	44.0% (11/25)	38.1% (8/21)	50.0% (9/18)
	36-50	45.9% (17/37)	31.4% (11/35)	26.1% (6/23)	30.3% (10/33)
	51-65	70.0% (28/40)	42.4% (14/33)	56.3% (9/16)	48.4% (15/31)
	66+	75.7% (28/37)	67.9% (19/28)	75.0% (R)	56.7% (17/30)
Gender	Female	63.8% (44/69)	46.7% (28/60)	42.4% (14/33)	48.3% (29/60)
	Male	58.1% (36/62)	44.3% (27/61)	38.7% (12/31)	42.3% (22/52)

* % calculated out of the total responding "yes definitely"

"yes to some extent," or "no, but I would have liked this"

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- Compared to the National benchmark, service users in LPT were less likely to report having been given information by NHS mental health services about getting support from people who have experience of the same mental health needs as them; this issue disproportionately affected patients aged 35 and under and women (Table 13).

- This reflects a similar position to that seen in 2016 for service users in LPT overall; however direct comparisons by service area are not possible due to changes in the grouping of service areas (Table 14).

Table 13: 2017 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 area, compared against National benchmark

	Service area	% Yes, definitely / Yes, to some extent*
	National	51.8% (4061/7838)
Service area	LPT Overall	40.0% (50/125)
	Adult General Psychiatry Community and Outpatient Teams	39.3% (24/61)
	MHSOP Memory Clinics	45.0% (9/20)
Age group	18-35	24.0% (6/25)
	36-50	44.8% (13/29)
	51-65	44.4% (16/36)
	66+	42.9% (15/35)
Gender	Female	30.7% (23/75)
	Male	54.0% (27/50)

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

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Table 14: 2016 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 area, compared against National benchmark

	Service area	% Yes, definitely / Yes, to some extent*
	National	51.8% (3853/7436)
Service area	LPT Overall	39.6% (57/144)
	AMH Community Mental Health	45.0% (9/20)
	AMH Outpatients	22.9% (11/48)
	MHSOP Memory Service	52.9% (9/17)
Age group	18-35	44.0% (11/25)
	36-50	27.8% (10/36)
	51-65	37.2% (16/43)
	66+	50.0% (20/40)
Gender	Female	41.9% (31/74)
	Male	37.1% (26/70)

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

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Overall

- Compared to LPT overall, service users in Adult General Psychiatry Community and Outpatient Teams were less likely to rate their overall experience using the most positive ranks (ranks 8 to 10 where rank 0 indicates a very poor experience and rank 10 indicates a very good experience, Table 15).

- Overall, the position at 2017 was similar to that at 2016 for service users in LPT; however direct comparisons by service area are not possible due to changes in the grouping of service areas (Table 16).

Table 15: 2017 Q40. Overall please indicate whether you had a very good or poor experience. Analysed by service area, compared against the LPT Overall benchmark

	Service area	% Rank 8 to 10*
	LPT Overall	52.2% (106/203)
Service area	Adult General Psychiatry Community and Outpatient Teams	35.6% (32/90)
	MHSOP Memory Clinics	62.9% (22/35)
Age group	18-35	41.9% (13/31)
	36-50	42.2% (19/45)
	51-65	49.1% (26/53)
	66+	64.9% (48/74)
Gender	Female	52.9% (63/119)
	Male	51.2% (43/84)

* % calculated out of the total responding Rank 0 (I had a very poor experience)
to Rank 10 (I had a very good experience)

Table 16: 2016 Q40. Overall please indicate whether you had a very good or poor experience. Analysed by service area, compared against the LPT Overall benchmark

	Service area	% Rank 8 to 10*
	LPT Overall	50.8% (120/236)
Service area	AMH Community Mental Health	55.6% (20/36)
	AMH Outpatients	39.2% (29/74)
	MHSOP Memory Service	66.7% (20/30)
Age group	18-35	41.2% (14/34)
	36-50	39.3% (24/61)
	51-65	48.5% (32/66)
	66+	66.7% (50/75)
Gender	Female	55.0% (66/120)
	Male	46.6% (54/116)

* % calculated out of the total responding Rank 0 (I had a very poor experience)
to Rank 10 (I had a very good experience)

Appendix of analytical methods

Excluded and included groups

Data available from the Care Quality Commission's 2017 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 and gender. 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 might be identified from the analyses. The excluded and included groups for the age group, gender, and service breakdowns are given Table 17, Table 18, and Table 19 respectively. Breakdowns by ethnicity were not available this year.

Table 17: Excluded and included groups for the age group breakdown

Excluded Groups
Missing (0)

Included Groups
National (13454)
My Organisation (227)
18 - 35 (34)
36 - 50 (46)
51 - 65 (61)
66+ (86)

Table 18: Excluded and included groups for the gender breakdown

Excluded Groups
Missing (0)

Included Groups
National (13454)
My Organisation (227)
Female (130)
Male (97)

Table 19: Excluded and included groups for the service breakdown

Excluded Groups
ADHD Service (R)
Adult General Psychiatry-Acute Recovery Team (R)
Assertive Outreach (R)
CAMHS- Outpatient & Community (R)
Cognitive Behavioural Psychotherapy (R)
Dynamic Psychotherapy Service (R)
Eating Disorders Service (R)
Homeless Service (City) (R)
Liaison Psychiatry (R)
Liaison Psycho Oncology (R)
LLR Perinatal Mental Health Service (R)
Medical Psychology (R)
METT Centre and Linnaeus Nursery (R)
MHSOP Community Teams (14)
MHSOP In-Reach (R)
MHSOP Outpatient Service (17)
Personality Disorder Service (R)
PIER (R)
SPA Acute Assessment and CRHT (R)
Missing (0)

R - REDACTED

Included Groups
National (13454)
My Organisation (227)
Adult General Psychiatry Community and Outpatient Teams (95)
MHSOP - Memory Clinics (44)

Equality and Human Rights Team

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 (α = .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 (α = .05, Bonferroni correction applied for multiple comparisons).

Table 20: 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".)

REDACTED FOR PUBLICATION