

Children and Young People:

Emotional Wellbeing and Mental Health Project

July 2015 – November 2015



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<u>Summary</u>

Healthwatch Salford is a consumer champion for health and social care. We gather the views and experiences of local people to influence people who make decisions about services. We have a small staff team and a number of volunteers who help us to do the work.

Healthwatch Salford sets its priorities based on feedback from local people. We work with local people at the beginning of each year to find out what people think are the big topics in Health and Social Care.

This year, local people told us that it is important to listen to children and young people, particularly about emotional wellbeing and mental health issues.

A steering group of 4 children and young people aged 14-18 years were supported to develop a survey and tools to gather the views of young people in the city. The survey asked about people's emotional wellbeing and use of mental health services.

411 responses were analysed and the responses were used to develop recommendations for children and young people's services. In particular, the feedback gathered by this project will influence Salford's review of services for people aged 0-25 years and the transformation of Children and Adolescent Mental Health Services (CAMHS).

The report outlines recommendations on the following areas:

Resilience, prevention and early intervention

- Young people completing the survey aged 11-17 years old often report feeling happy less often than other age groups. This might mean that extra focus on this age group in school could help to identify people who need more support, to prevent them needing services later.
- There is local evidence for children and young people finding life events (e.g. loss of a family member, divorce) difficult and supporting the whole family to manage this is helpful. The earlier this is done, the more useful this can be. This fits with NICE Guidance¹.
- People aged 11-17 answering the survey reported less support from family members. This means that young people in this age group may need to know about other support that is available.
- Based on the responses of people answering this survey, in both the 0-10 and 11-17 age groups, support to help people have good emotional wellbeing should include some work that focusses on supporting girls. In other age groups, there should be more of a focus on supporting boys.
- There is some local evidence for good relationships being important for reducing stress. This may link with parents having good parenting skills and the mental wellbeing of parents, which could, in turn support good relationships with children

¹<u>http://www.nice.org.uk/guidance/cg28/chapter/1-guidance#step-1-detection-risk-profiling-and-referral</u>



and young people. Support to the whole family to develop this could be beneficial in reducing stress in young people.

- Responses from young people suggested that bonds formed from early childhood are a continuing protective factor and help people to stay happy. Protective work is needed to help families to build strong bonds. This strong theme of trust suggest that building trust in relationships with children and young people, and supporting families to develop effective and trusting relationships may help people to have better emotional wellbeing.
- There is some evidence in Salford that some children and young people have internalised expectations, unrealistic expectations or issues around self-belief. This may be an area that should be addressed in Personal, Social and Health Education (PHSE) sessions (if it is not already) to help young people to build strategies for managing school work and stress.
- The people answering this survey found techniques and tools to manage stress useful. Working with children and young people to teach them a range of techniques to manage stress could be useful.

Improving access to effective support

- There is some local evidence that females are more likely than males to talk to someone if they need help and support, particularly if they feel that they are often stressed. This might suggest that any discussions or preventative work with children and young people could benefit by having a focus on males to address this difference.
- Some of the young people answering this survey do not want to ask for help. This may indicate a need to address issues around stigma and acceptability in asking for help and support. Additionally, there may be issues relating to the accessibility of help.
- There is a feeling from the young people answering this survey that they would like to have a service that they can access when they need it. This might suggest the need to consider self-referrals.
- For all age groups, the people answering this survey felt that things either stayed the same or got worse whilst they were waiting for support. The young people accessing the survey told us that having some support (self-help, peer support or just someone to talk to) would make things better.
- There is some local evidence that children and young people found themselves waiting to access support from a service. It would be useful to compare this to the waiting times set for services by national guidance².
- Children and young people in Salford feel that most referrals to services are supported by a combination of teachers and parents. Additional support to teachers and parents might help to sooner identify those children needing support.
- There is evidence that most young people completing this survey did not feel that they had access to information about the service. It is important to make sure that the

² <u>http://www.nice.org.uk/guidance/cg28/chapter/1-guidance#step-2-recognition</u>



information sent out to young people is available in clear, accessible language to help them in making decisions about their support 3/4.

Care for the most vulnerable

• There is some evidence locally that young people would like earlier identification of the need for support. Given that most young people answering our survey said that they might not ask someone for help, there could be a need for raising awareness of the support available amongst young people. Supporting teachers and families to spot early signs of needing support is important as young people told us that they are often the ones making referrals.

Accountability and Transparency

- Whilst not in the information we collected, the Healthwatch Salford team had mixed responses in working with children's services. Some of the learning needed was for the Healthwatch Salford team to understand more about Children's services as well as the need to develop closer links with children's teams.
- Some teams and services were difficult to engage with and arranging focus groups and sharing surveys proved challenging in some areas. It would be useful to develop better partnership working across Healthwatch and Children's services to build on the positive work of this report.

Workforce Development

- The people answering our survey reported teachers, family members, police and parents / guardians to be trusted people, who were often the people they would speak to if they were feeling stressed. Making sure that these key people are able to identify mental health issues is important in early recognition of where people need support.
- Whilst not in the information we collected, the young people in the steering group talked about the caring/nurturing environment of Primary Schools compared to the transition to Secondary Schools where pressures are increased. Teachers in primary schools were described as calm, nurturing and caring compared to teachers in secondary schools being described as strict and more focussed on the work. It was suggested that this makes it harder to build relationship and to talk about emotional wellbeing issues. This suggests that there is a need for further support to children during this time of transition, as well as the wider workforce in addressing this issue.

³ http://www.nice.org.uk/guidance/cg28/chapter/1-guidance

⁴ https://www.england.nhs.uk/wp-content/uploads/2015/07/access-info-implmntn-guid.pdf



About Healthwatch Salford

Healthwatch Salford is a consumer champion for health and social care. We gather the views and experiences of local people to influence people who make decisions about services. We have a small staff team and a number of volunteers who help us to do the work.

Introduction

Healthwatch Salford sets its priorities based on feedback from local people. We work with local people at the beginning of each year to find out what people think are the big topics in Health and Social Care.

This year, local people told us that it is important to listen to children and young people, particularly about emotional wellbeing and mental health issues.

Emotional Wellbeing and mental health is more than just being happy. It includes self-esteem, self-confidence and enjoyment⁵.

Mental health problems are very common and lots of people experience them. Mental health problems can include feeling anxious, stressed, low and depressed.

As well as hearing that this topic was a big issue for local people, we also know that there are big pieces of work coming up in Salford about mental health for young people. These pieces of work include:

<u>0-25 Years Review</u>

This work is being carried out by organisations in Salford. It will offer something new to children and young people to support them to have a good start in life. This includes supporting children and young people to think big about the things they want to achieve.

It will look at how young children can be supported to be ready for school as well as children and young people's pathways through services and how they are supported inside and outside of school.

• Child And Adolescents Mental Health Services (CAMHS)

Salford wants to support children and young people earlier and make sure that their families have enough support. The plan is to support people to get help from services when then need it, and help people to get back into their community as soon as they are ready.

⁵ Stewart-Browne, S (2014) <u>http://www.nhs.uk/Conditions/stress-anxiety-depression/Pages/improve-mental-wellbeing.aspx</u>



There is also lots of guidance and information which is developed nationally. This guidance helps us to think about what could be improved for children and young people. This includes:

- The 'Future in Mind'⁶ report which suggested lots of ways that mental health services could be made better for children and young people. Salford wants to make that happen for the young people in the city.
- NICE Guidance⁷ this is guidance, based on evidence to help services and local people to understand what 'good' looks like. There are lots of guidelines for children and young people around mental health and emotional wellbeing.

With this in mind, Healthwatch Salford agreed that one of our priorities for 2015 would be to gather views on children and young people's experiences of emotional wellbeing and mental health services.

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https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/414024/Childrens_Men tal_Health.pdf

⁷ http://www.nice.org.uk/



Methodology

Healthwatch Salford approached the development of a project, co-produced with local children and young people on three levels.

- The Healthwatch Chief Officer held conversations with managers and commissioners of services to highlight that this issue had been raised by local people. Conversations about the remit and purpose of a project in this area was discussed to help narrow the focus of the work. Service leads and commissioners were engaged to make sure that they were aware of the work taking place within Healthwatch Salford, and to make sure that it would have the greatest impact for local people.
- 2. The Healthwatch Engagement Officer identified key organisations and groups with children and young people on their agendas and work plans. This was followed up with detailed discussions to identify areas where we could work with other organisations and groups on the project. The Engagement Officer also identified groups of young people and children who often struggled to have their voices heard, as well as going to meetings where children and young people's voices were shared.
- 3. The Healthwatch Information and Signposting Officer shared information relating to the project with groups, schools and via social media.

This approach enabled a good response from many local services and organisations. In particular, the Young Carer's Service agreed to be a key partner in the work and have been heavily involved throughout the project.

Using flyers, posters and word of mouth, Healthwatch Salford promoted the opportunity for a small number of children and young people aged 14-18 to be involved in a project steering group. In particular, young people who had experience of CAMHS, Early Intervention and Wellbeing Services were invited to take part, alongside people using the Young Carers Service and people involved in the Youth Council.

A steering group of 4 young people was set up from the responses received. The age range of steering group members was between 14 years and 18 years.

The steering group met 3 times. The steering group agreed to develop a survey for children and young people in Salford to gather their experiences of issues surrounding emotional wellbeing and use of mental health services. Supported by Healthwatch Salford and the Young Carer's Service, a detailed survey was developed by the steering group. The language, questions and planning for the survey was led by the young people involved. The survey was split into two areas: one focusing on emotional wellbeing questions, and the second asking people who had used mental health services to share their experiences. Healthwatch Salford typed up the survey and produced this in to electronic, paper-based and web formats.

The young people in the steering group identified where the survey should be sent and this was accompanied with suggestions identified by the Young Carer's Service, engagement leads, the Salford Children's Trust Board, Commissioners and young people's leads.



The survey was shared widely through online and in paper-based formats across Salford from mid-September 2015. A deadline of October 31st 2015 was agreed for responses. Members of the steering group for the project were instrumental in sharing and promoting the surveys. To support this work, Healthwatch Salford and the Young Carer's Service promoted responses heavily via social media. Healthwatch Salford had dedicated online web content for the project, including an online version of the survey. All responses were collected anonymously.

Feedback in the middle of the project highlighted that there was a need for additional materials to support younger children to share their views. Working with a Salford Head Teacher, the Healthwatch Salford Engagement Officer supported the steering group to develop tools and session plans to help gather views from younger children. This information was sent out to primary schools and other key local groups supporting younger children. The Engagement Officer also held 1:1 sessions with young people to help them share their views and complete the surveys.

Healthwatch Salford collected all of the responses from the survey. The information was broken down into groups and shared with Salford's Public Health team to support the analysis of feedback.

Results

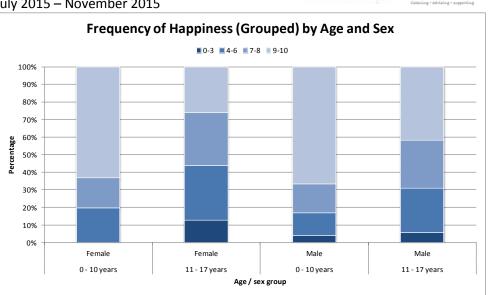
A total of 683 responses were received. It was identified that some of these responses were duplicates and, once these were removed, a total of 411 responses were left. Of these responses 16% people said that they had direct experience of mental health services and 8% said that they would rather not say.

There were 137 females and 173 males answering the survey.101 people did not answer this question. 26 people answering the survey identified as carers. One person identified as a veteran and 10 people told us that they had been / were in care. 4 people said that they had been or were homeless, 5 people identified as being from a traveller community and 3 people identified as being from a migrant community.

Findings

How often do you feel happy and good about your life? [0 = never 10 = everyday]

The average score for this was 7.5 out of 10. This suggests that people feel happy and good about their lives most days. The responses showed that, over the age of 11 years old, males reported being happy more often than females. Younger children between 0-10 years reported being happy more often than people aged 11-17 years old.



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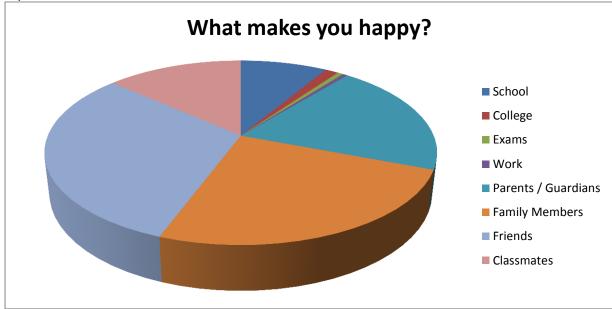
Salford

What makes you happy?

Most people (76%) told us that 'friends' made them happy. This was closely followed by people telling us that 'family members' (61%) and 'parents/guardians' (49%) made them happy. Those people who had told us earlier that they were never happy, or not happy very often, were only half as likely to say that parents or family made them happy.

		What makes you happy?						
Frequency of happiness (grouped)	Count	School	Classmates	Friends	Parents / Guardians	Family members		
0-3	22	9%	18%	73%	23%	32%		
4-6	101	17%	31%	81%	47%	58%		
7-8	109	18%	37%	78%	49%	64%		
9-10	169	28%	36%	74%	56%	65%		
Grand Total	401	21%	33%	76%	49%	61%		





As well as ticking options, people were able to write in other things that made them happy. Lots of people (38 people) told us about different types of electronic entertainment that made them happy.

"Playing my Xbox 1" "My phone"
"My Ipod" "Watching Netflix"
"Computer games" "YouTube"
"Fifa"

A high number of people (34 people) told us that sport or other physical activity made them happy.

"Football and any sport"

"Dancing makes me happy because it's fun"

Food or baking was mentioned by 17 people.

"Food"

"Pie"

17 people also mentioned pets.

"My horse and my dog"

"My pet dog"

"Going to clubs like dancing, gymnastics and swimming"

"Baking"

"My auntie's pets make me happy"

"My guinea pig"



As well as ticking the option for 'friends', 16 people also mentioned their friends by name.

"Playing with people who are nice"

"Playing games with my friends"

"Friends"

Family were mentioned by 13 people. This was closely followed by music, which was mentioned by 9 people.

"When my sister smiles"

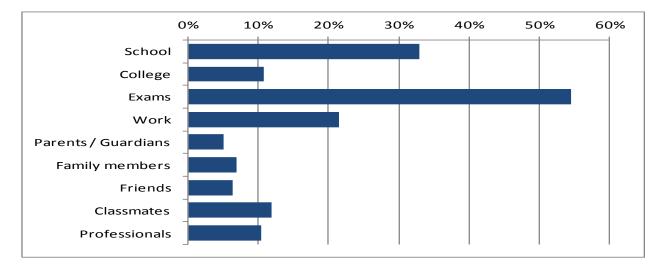
"Music"

"Family members"

"Listening to music and reading"

What makes you unhappy?

'Exams' and 'school' were ticked the most often in this question. Those people who said that they were not happy very often were twice as likely to say that they were unhappy with school. They were also three times as likely to report being made unhappy by parents / guardians, family members, friends and classmates compared to those people who said that they were happy fairly often.



The most mentioned item was school (this included school, college and exams). People said that school made them unhappy because of pressure, stress, and boredom.

"Pressure of exams"

"School – I get bored"

"Because it [exams / school] is stressful and it can be pressured"

The second most mentioned source of unhappiness was bullying.

"When class mates bully me"

"When somebody picks on you"

"When people are mean to me"

"When classmates are unkind to me because it stresses me out and distracts my learning"



A number of children and young people mentioned death and fear of death:

"Family members dying because I miss them"

"Losing family members"

"It makes you cry when a family member dies"

"Thinking about my grandad because he died and I normally see him every Monday"

Other things mentioned by people answering the survey included life events which left them feeling unhappy.

"Not having any money because you can't do anything";

"Being ill and sick"

"Family [make me unhappy] because they come to me with their problems then I can't help them".

"Dad, because I don't see him very often"

Looking at how children and young people can be supported early when facing these types of events is important as this might protect people from experiencing emotional wellbeing and mental health problems. Some of the comments suggested that support to the whole family would be useful in helping to make sure that young people are supported from an early age.

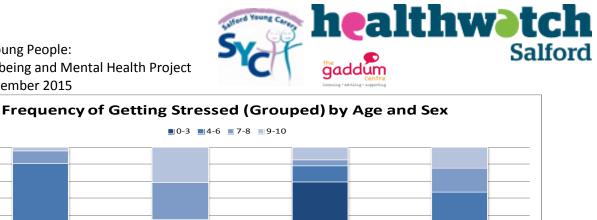
How often do you get stressed?

Girls who are aged 0-10 and 11-17 years, scored themselves (on average) 25% higher than boys on how often they feel stressed. In other age groups, boys scored higher on average.

This suggests that in the 0-10 and 11-17 year groups, support to help people have good emotional wellbeing should include some work that focusses on supporting girls. In other age groups, there should be more of a focus on supporting boys.

Female

0 - 10 years



Male

0 - 10 years

Male

11 - 17 years

What stresses you out?

100% 90% 80% 70% 60%

Percentage 50% 40% 30% 20% 10% 0%

Most people ticked 'exams' (55%) and 'school' (37%) to answer this question. Those people who said that they were a 9 or a 10 on the frequency of how often they got stressed (very often) were also twice as likely to tick 'parents/guardians', 'family members', 'friends'. 'classmates' and 'professionals' as things that made them stressed. They were also more likely to tick the other options, but not to the same extent.

Age / sex group

Female

11 - 17 years

This suggests that having good relationships is important in reducing stress, which may link with parents having good parenting skills and the mental wellbeing of parents, which could, in turn support good relationships with children and young people.

What else stresses you out?

These answers overlap somewhat with the previous question, including comments on 'school', 'exams' and 'teachers', although these feature less prominently. Bullying is rarely mentioned.

A number of people (9) commented on feelings about success or lack of success.

"Exams, because I have a feeling that I will fail" "Not giving your best because I am not reaching my goal"	"Not being able to do something or being discouraged by someone. It gets to me too easily."
<i>"When things don't go to plan. It's not how I pictured it, so to me it's not perfect and I like to be how I picture"</i> <i>"When I don't get my work done I get upset and stressed"</i>	<i>"When teachers say you won't amount to anything because of bad behaviour. It's unfair that teachers can say things like that"</i> <i>"Thoughts of not being able to get a job when I am older, because I want a good lifestyle"</i>



This may indicate that some children and young people have internalised expectations, unrealistic expectations or issues around self-belief. Conversely, this could also be a source of healthy stress that helps young people to strive for success.

This may be an area that is addressed in Personal, Social and Health Education (PHSE) sessions to help young people to build strategies for managing school work and stress. Given that the people answering the questionnaire felt able to share their experiences, this may be an indication that this discussion is already taking place.

There were also a few replies (4) noting menstrual periods as a source of stress.

"When I am on my period"

"Time of the month"

"Hormones"

Who would you ask if you needed help because you were feeling unhappy or stressed?

The most commonly ticked options were 'parents/ guardians' (58%), 'family members'(49%) and 'friends' (43%). Those who scored highest (9 or 10) on frequency of getting stressed were slightly more likely than other people completing the questionnaire to tick 'teachers' and were less likely to tick 'parents/guardians', 'friends' or 'classmates'.

Those people who suggested they were stressed more often were also almost three times as likely to say that they don't like to ask for help (46% vs. 16% for those scoring under 9). This might suggest that they may only get support from people where they have close family bonds. This indicates that bonds formed from early childhood are a continuing protective factor and help people to stay happy.

70 people said that they would not ask for help if they were feeling stressed. This may suggest a need to address issues around stigma and acceptability in asking for help and support. Additionally, there may be issues relating to the accessibility and visibility of help for children and young people.

Who else would you ask if you needed help because you were feeling unhappy or stressed?

In response to this question, a number of people in the family circle were mentioned (parents, nanna, cousins, siblings). Teachers were mentioned quite frequently, as well as police, Childline, gymnastic coach and trusted adults, indicating that many children and young people had someone they felt that they could turn to for help. Friends were also mentioned, including a few mentions of 'online friends'. Some children noted god as a source of help.

"My friends online because I know that they might be going through the same things"

"God because I can always talk to God and he will always be there"

Children and Young People: Emotional Wellbeing and Mental Health Project July 2015 – November 2015 *"Friends because I know they can help me and they wouldn't mind having a conversation with me about this"*

althw**a**tc

"Friends and classmates because they make me laugh"

"My best friend because she cheers me up and always tells me to fight through this"

Some people named a family member; usually saying that this was because they trusted them and felt safe in talking to them. This strong theme of trust suggest that building trust in relationships with children and young people, and supporting families to develop effective and trusting relationships may help people to have better emotional wellbeing. Knowing that someone had the ability or power to do something about the issue was also mentioned, although less often.

"Nana, because they would sort it out"

"I would go to the doctors because they always know what to do"

"Childline or Healthwatch Salford, because I trust them"

"Childline – I trust them"

"Auntie, Uncle, Granddad, Teacher or Police because they are my family, or because I know that they police can help. I also know my teacher can help"

Some young people indicated that they had no one. This was usually due to not trusting anyone else.

How do you cope when you are feeling stressed or unhappy?

Responses to this question ranged from no ways of coping, through to both helpful and unhelpful activities.

A small number of young people said that they were unable to cope with feeling stressed or unhappy and commented that they didn't manage it well.

"I can't cope with stress it makes me feel too sad to do anything"

"I try to feel happy by fake smiling but on the inside I feel like crying".

52 responses gave examples of unhelpful responses to stress, including losing their temper (13 people), drinking or smoking (2 people), bottling things up (15 people) and sleeping (22 people). There was not much difference between the unhelpful ways of coping between males and females.

"I would get really angry"	"Punch things"
"If I am sad, I try to block the thing out and	"I shout and have an attitude"
if I am stressed I would go to my own room and lie down"	"I smoke weed"



More helpful responses included moving away from the stress by going to another room or going outside (30 people), asking for help (8 people), keeping busy (9 people), speaking to a family member (11 people) and listening to music (29 people). Some people mentioned physical activities to help them manage stress (6 people). Listening to music and leaving the room (often going to their bedroom) was mentioned the most by children and young people as a way of managing stress. Again, these responses were similar across males and females.

"I go to my room to calm down, I can carry on".

"I just listen to music on my own"

"I ask for help"

"I do karate"

"Go on my bike on a ride on my own"

A number of males (13 people) mentioned playing on computer games compared to females (2 people). Both males and females mentioned using electronic devices such as laptops, tablets, YouTube and mobile phones, however this was slightly higher for females (8 people) compared to males (6 people).

"I go to my room and watch YouTube"

"I try not to think about it and play on Ipad"

"Go on Xbox"

"Play games on PS3 and relax"

32 responses talked about ways of managing stress that could have been learnt from family, school, services or television dramas or other organised activities. These included specific techniques to help with relaxation (12 people), positive thinking (15 people) and counting to 10 alongside other activities (5 people).

"Count to 10 and squeeze my hand"

"Squeeze my stress ball and play up-stairs"

"I cope by rationalising and assessing the problem".

"I do breathing techniques"

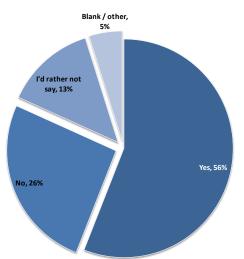
"I breathe and do yoga"

By mentioning learned ways of managing stress, some evidence is provided for the value of working with children and young people to teach techniques and tools to manage stressful situations. Although it might be useful for some young people to 'bottle up' their feelings, this might not be the case for others. Having a range of techniques could help to provide options for managing stressful situations.

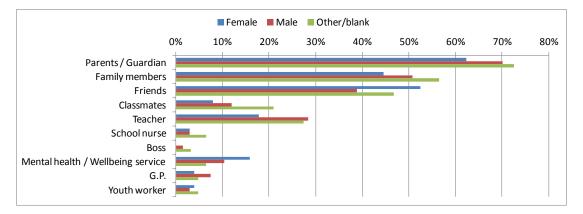


Have you ever talked to someone about feeling stressed or unhappy?

58% of people answering the survey said '*Yes*' to this question, with females (63%) more likely than males (50%) to say that they had talked to someone. This gap was more noticeable amongst those people who are stressed more often (with a score of 7-10). Amongst this group 36% (10 out of 28) of males had spoken to someone compared to 67% (35 out of 52) of females.



This might suggest that any discussions or preventative work with children and young people could benefit by being gender specific to address this difference. Most people indicated that they talked to their parents/guardians, family members of friends for support when they were experiencing stress.



Most people mentioned family members and a variety of other people (e.g. old childminder) and said that the people they had chosen were ones that they could trust.

'They have known me all my life'

"They are my parents why wouldn't I."

Some respondents mentioned that they could rely on the person they named to keep the issue confidential. The fact that the chosen person (and this might include professionals) would know appropriate sources of help was also mentioned.



Do you get support from anyone?

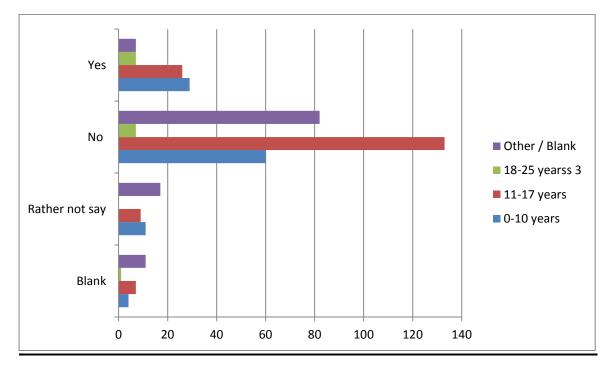
Around half of all of the people answering this question told us that they got support from 'parents / guardians' (55%), 'family members' (45%) and/or 'friends' (43%). There was little difference between males and females, but children aged 0-10 years were more likely to report getting support than young people aged 11-17 years, particularly from 'family members' (63% compared to 30%).

Experiences of Mental Health Services

The responses from people using mental health services was significantly less than the responses received relating to emotional wellbeing. This may be due to the lower numbers of people that would be expected to be accessing mental health services, or there may be a lack of understanding of what is meant by 'mental health services'. Additionally, some people might believe that there is a stigma towards admitting to accessing mental health services. This may also be a reason for the lower numbers of people responding to these questions.

Have you ever used a mental health service?

A higher number of young people aged 0-10 years commented that they had used mental health services (29 people), closely followed by the 11-17 age group (26 people). This dropped significantly in the 18-25 year old group. This may be due to lower numbers of this group completing the survey, or could be linked to issues around stigma.





Of those people who said that they had used a mental health or emotional wellbeing service, 39 people told us the reasons for their referral. Most referrals (16%) were related to anxiety or worry.

"For panic attacks"

"Coz it makes me feel less worried"

13% of people answering this question mentioned anger or needing to 'calm down' as their main reason for referral.

"To calm me down"

"Because when I get angry I lash out at people"

Needing to talk to someone, stress and mixed anxiety and depression were also mentioned.

"Wanted to talk privately"

"Because I want to let it all out"

"I feel bad about myself"

"I was sad"

"I was feeling incredibly depressed and suicidal and had no outside opinion to talk to who could give me advice"

"I can't handle my feelings – anxiety and depression"

"I was referred because of insomnia and accepted into CAMHS because it escalated into depression and anxiety - which I still struggle with"

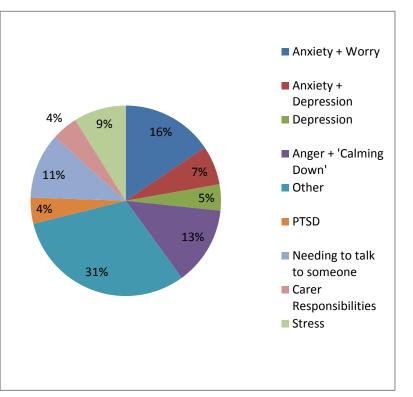
Post Traumatic Stress Disorder (PTSD) and caring roles were also discussed by a number of young people.

"Anxiety and PTSD"

"Because I am a young carer and I like the release from caring"

"Stress and caring role"

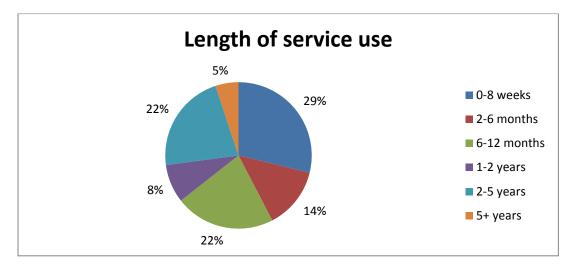
Other responses included needing medication, racism and coping with everyday life.



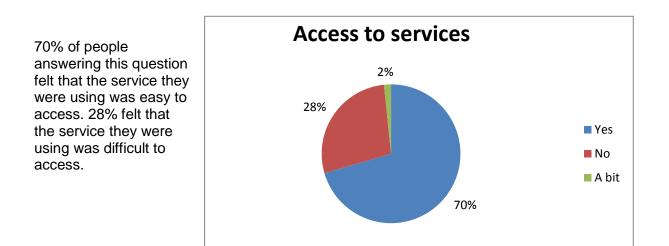


How long have you used this service?

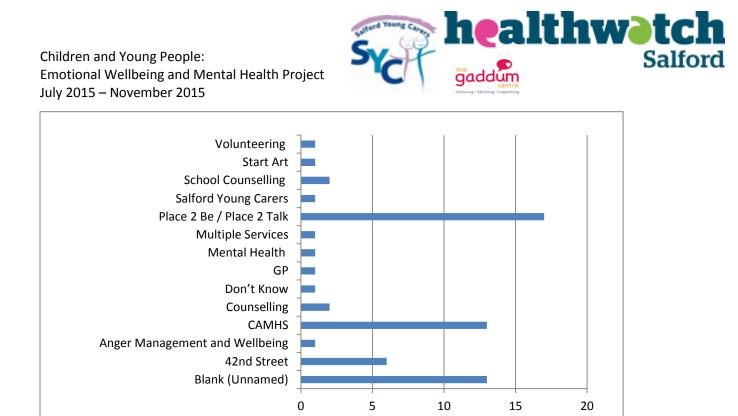
Most people using a service had been doing so for 0-8 weeks. This was closely followed by people using services for 6-12 months and those people using services for 2-5 years.



Was it easy to get help from this service?



13 services were specifically mentioned. This illustrated the services being used by children and young people answering this question. The most frequently used service was Place 2 Be / Place 2 Talk, closely followed by Child and Adolescent Mental Health Services (CAMHS). 42nd Street, Young Carers and Start Art were also mentioned. A number of people answering the question mentioned 'mental health services', 'blank / unnamed' and 'anger and wellbeing services' which may come under the delivery of a service which has already been named. Some people were also using lots of different services.



Most services mentioned were reported as easy to access. On the whole, the feedback for this was fairly balanced, with no specific services standing out as hard to access.

Is there anything that would have helped to get support from this service?

Most people answering this question talked about quicker referral times.

"No waiting list"

"Quicker referral"

"Referred quicker"

There were also comments relating to more flexible waiting times, earlier identification and having support through the referral process. One person also commented that being able to go to the service at any time would also have been helpful.

"Someone to support me through it"

"Perhaps to have been identified earlier"

"To go to the service at any time"

"More flexible times"



Who referred you to the service and why?

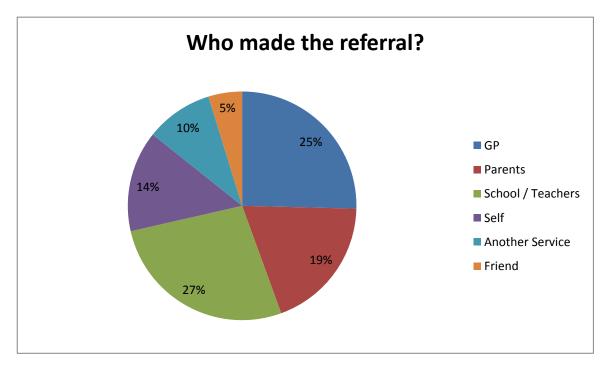
Most people talked about a combination of people supporting them to access services and to help organise the referral.

"GP and school"

"GP because my mum asked them if there was anything that could help me"

"Friend told school"

"School and the police"



Most people mentioned school or teachers as the people responsible for making referrals. Other people mentioned parents, friends and other services as people making referrals on their behalf.

"Teachers"

"Parent because they noticed the anxiety getting worse"

"My best friend because I was really depressed"

A number of people also talked about making the referral themselves.

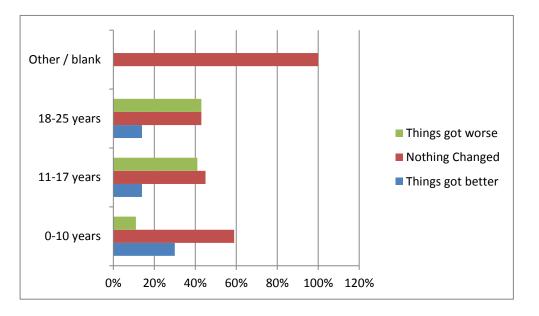


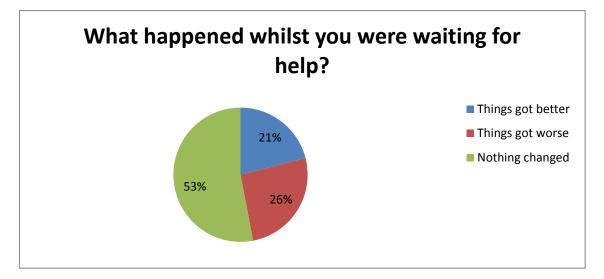
How long did it take to get help?

40 people answered this question. 6 people said that they had received help immediately or on the same day. Place 2 Be/ Place 2 Talk and School Counselling were specifically mentioned as the only two services where people completing the questionnaire were able to get help on the same day. 9 people said that they had received help within 2-7 days. 7 people said that they had waited 1-3 months and 8 people said that they had waited longer than 6 months to get support. Those waiting longer than 6 months for support referred to 'anger management', CAMHS and Place 2 Be / Place 2 Talk as the specific services they were accessing.

What happened whilst you were waiting for help?

58 people answered this question. 53% of people answering said that nothing changed for them whilst they were waiting for support. 26% of people answering said that things got better for them whilst they waited for support and 21% of people said that things got worse.







In the 18- 25 years category, only 14% said that things had improved whilst they were waiting for help and support, compared to 43% of people getting worse or experiencing no change in their symptoms. The 11-17 year category showed that for most people (45%), nothing changed whilst they were waiting for support. 43% of people in this category felt that things had got worse for them whilst they waited for support. In the 18-25 year category, 86% of people had experienced no change or worsening symptoms whilst they waited for support.

This suggests that all ages of children and young people had a large number of people saying that things had become worse whilst waiting for support from a service.



What would have helped whilst you were waiting?

Most people answering this question suggested that some form of help or support whilst they were waiting would have made a difference in managing their experiences whilst waiting for access to a service. This ranged from self-help information, more conversation with family and friends, short-term sessions whilst on the waiting list through to someone who could talk to them.

"Someone coming up and helping"

"To speak to a family member"

"My parents"

"someone to talk to like I have now – a school counsellor"

"Self-help info – forms in first appointment sent in post"

"Feeling like I could be better"

"Key work sessions whilst on the waiting list"

"Support from another service"

"Talking to big sister and [service manager]"

"Maybe temporary, interim counselling"

Did you get information about the service whilst you were waiting?

Most people (65%) received information about the service they were waiting to access before they received help or support. Some of the services were not named and therefore it is difficult to make assumptions about the level of information provided within each service. Information may also have been sent to parents and or guardians rather than the young person accessing the service. The survey did not ask about how accessible information was to the children and young people being referred and this may be an additional area to explore.

How did you feel about the first time you used the service?

69% of the people answering this question spoke about a negative experience of using the service for the first time compared to 31% of people sharing a positive experience.

"Scared"

"Nervous"

"No info on CAMHS – need a web site"

"Uncomfortable"

"Shy"

Children and Young People: Emotional Wellbeing and Mental Health Project July 2015 – November 2015 *"Nervous, a bit cynical"*



"Happy and a lot better"

"Felt really good"

"I felt relieved"

Did you have a say in the date / time / venue?

Feedback on this question showed a mixed picture of people's involvement in choosing a venue to meet when accessing a service. In some cases, the service provision is only provided in one place e.g. support in schools. However, there may need to be some further discussion around the preferred places for young people to access mental health services, particularly given the high levels of nervousness and discomfort indicated by the previous question around people's first experience of a service.

29 people said that they had not been asked about the time and date of their appointments, compared with 23 people who had been asked what time / date suited them best. 27 people felt that they had input into what was discussed at their appointments, with 9 people saying that they felt that they did not have a say.

Overwhelmingly, 63% of people answering the question felt that they did have a say, or sometimes had a say in what they felt would be useful in supporting them to feel better, with only 37% of people responding feeling that they did not have a say or they were unsure.

What help did you get from the service?

"More friends"

"It allowed me to talk without getting into trouble"

"Talking therapy"

"Counselling"

"Tablets and help to calm my anger"

"Therapist was really nice"

"Talking Therapies"

66% of people responding told us that they felt differently after using services, compared to 34% of people who suggested that there was no difference or that they only felt a difference sometimes.



Of those people who felt that accessing services had made a difference to how they feel, we asked them what they felt helped and what difference it had made.

"We discussed coping techniques so I now feel more able to deal with intrusive suicidal thoughts and depressive episodes".

"We did a few work sheets about coping with things"

"Because it made me calm down"

"Made me more friends"

"Not as sad"

"I can speak more"

"More confident and I didn't feel alone"

How would you rate this mental health service? / Would you recommend this service to friends / family?

Children and young people were asked to rate the mental health services they were using on a scale of 0-10, 10 being excellent and 0 being terrible. Using the same scale, they were also asked to rate how likely they would be to recommend the services to a friend or family member, with 0 being not at all, and 10 being extremely likely.

7 services were named in people's answers and the average score was recorded for each.

Service	Average Rating for the Service	How Likely to Recommend to Friend / Family
Young Carers	9	10
Counselling	8.5	10
School Counselling	8	8.5
Place 2Be / Place 2 Talk	8	8
GP	8	8
42 nd Street	7	7
CAMHS	7	5

Is there anything that could have made it better?

We asked children and young people if there was anything that could have made their experience or the service better. People talked about having more time in their sessions, less time waiting to access the service and spotting problems sooner so that help was available quickly.

"Yeah, spotting the problem sooner"

"If family was in school"

"Less waiting times, more flexible"

"More toys"



" No I like it"

"Take more time"

"Get someone else to work so that we can talk to someone at any time"

"Go at any time"

"More choice for extra sessions"

"Waiting list needs to be considered faster"

"More friendly and bright people"

Out of the people answering why they stopped using the service, 62% felt that it was because they had noticed an improvement and they were ready to stop the sessions. 24% had stopped accessing the service due to feeling that it was not helpful and 14% of people answering the question said that they had stopped going to the service due to reaching their maximum number of sessions. When asked if there were any other reasons that the young person might have stopped using the session, there were comments about the stress of turning up to the session and the loss of the information about the appointment.

"I felt too stressed to turn up"

"I can't find the letter"

How did you feel after using the service?

We asked children and young people how they felt after using the service. Most people talked about positive things that had come from the service such as feeling more confident, 'calming down' and improvements at school. Some people talked about being worried that they would start to feel unhappy again after leaving the service.

"Confident"

"Worried that how I felt would come back"

"I was very keen on it from the start but now I just hate being involved"

"Needed more help – I wanted to get another service"

"Good because I calmed down a lot and I got good reports"

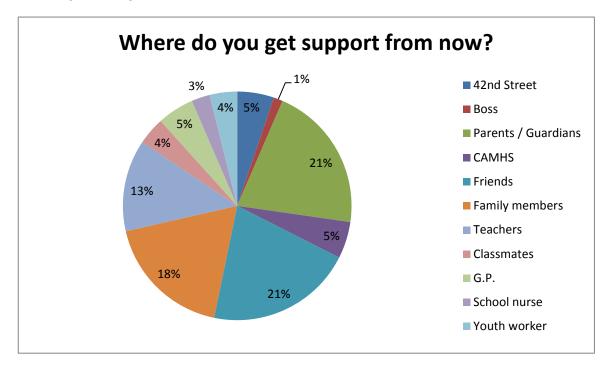
"Unhappy but then I started using it [the service] again"

"Slightly more able to cope with everything"



If you have stopped using the service, where do you get support from now?

Most people answering this question told us that they get support from their friends, parents /guardians and other family members. Teachers were also mentioned as supporting people following discharge from a service.





Recommendations

Information from the survey can help services to meet the needs of children and young people. We will be sharing the information with commissioners (people who plan, buy and check services) and other decision makers in health and social care.

To help us to highlight the main things we think we can learn from the survey, we have used the recommendations from the 'Future in Mind' report, alongside the areas that Salford is focusing on in the CAMHS review and the 0-25 years review.

Our recommendations are based on the local information from children and young people answering our survey.

Resilience, prevention and early intervention

Future in Mind Recommendations

- Improved public awareness and understanding less fear / stigma
- Improving access for parents to evidence based programmes to strengthen attachment build resilience and reduce trauma.

What our report adds:

- It tells us that those young people completing the survey aged 11-17 years old often report feeling happy less often than other age groups. This might mean that extra focus on this age group in school could help to identify people who need more support, to prevent them needing services later.
- It tells us that there is local evidence for children and young people finding life events (e.g. loss of a family member, divorce) difficult and supporting the whole family to manage this is helpful. The earlier this is done, the more useful this can be. This fits with NICE Guidance⁸.
- It tells us that those people aged 11-17 answering the survey reported less support from family members. This means that young people in this age group may need to know about other support that is available.
- It tells us that, based on the responses of people answering this survey, in both the 0-10 and 11-17 age groups, support to help people have good emotional wellbeing should include some work that focusses on supporting girls. In other age groups, there should be more of a focus on supporting boys.
- It tells us that there is some local evidence for good relationships being important for reducing stress. This may link with parents having good parenting skills and the mental wellbeing of parents, which could, in turn support good relationships with children and young people. Support to the whole family to develop this could be beneficial in reducing stress in young people.
- Responses from young people suggested that bonds formed from early childhood are a continuing protective factor and help people to stay happy. Protective work is needed to help families to build strong bonds. This strong theme of trust suggest that building trust in relationships with children and young people, and supporting families

⁸http://www.nice.org.uk/guidance/cg28/chapter/1-guidance#step-1-detection-risk-profiling-and-referral



to develop effective and trusting relationships may help people to have better emotional wellbeing.

- It tells us that there is some evidence in Salford that some children and young people have internalised expectations, unrealistic expectations or issues around self-belief. This may be an area that should be addressed in Personal, Social and Health Education (PHSE) sessions (if it is not already) to help young people to build strategies for managing school work and stress.
- It tells us that the people answering this survey found techniques and tools to manage stress useful. Working with children and young people to teach them a range of techniques to manage stress could be useful.

Improving access to effective support

Future in Mind Recommendations

- Timely access to clinically effective mental health support
- Move away from tiered model of mental health and towards needs based for young people and families
- Increased use of evidence based treatments with focus on outcomes
- Mental health support more visible and accessible for children and young people

What our report adds:

- There is some local evidence that females are more likely than males to talk to someone if they need help and support, particularly if they feel that they are often stressed. This might suggest that any discussions or preventative work with children and young people could benefit by having a focus on males to address this difference.
- It tells us that some of the young people answering this survey do not want to ask for help. This may indicate a need to address issues around stigma and acceptability in asking for help and support. Additionally, there may be issues relating to the accessibility of help.
- It tells us that there is a feeling, from the young people answering this survey that they would like to have a service that they can access when they need it. This might suggest the need to consider self-referrals
- It tells us that for all age groups, the people answering this survey felt that things either stayed the same or got worse whilst they were waiting for support. The young people accessing the survey told us that having some support (self-help, peer support or just someone to talk to) would make things better.
- There is some local evidence that children and young people found themselves waiting to access support from a service. It would be useful to compare this to the waiting times set for services by national guidance⁹.

⁹ <u>http://www.nice.org.uk/guidance/cg28/chapter/1-guidance#step-2-recognition</u>



- It tells us that children and young people in Salford feel that most referrals to services are supported by a combination of teachers and parents. Additional support to teachers and parents might help to sooner identify those children needing support.
- There is evidence that most young people completing this survey did not feel that they had access to information about the service. It is important to make sure that the information sent out to young people is available in clear, accessible language to help them in making decisions about their support ¹⁰/¹¹.

Care for the most vulnerable

Future in Mind Recommendations

- Improved treatment for children and young people in crisis right time, right place.
- Better offer for the most vulnerable young people

What our report adds:

 There is some evidence locally that young people would like earlier identification of the need for support. Given that most young people answering our survey said that they might not ask someone for help, there could be a need for raising awareness of the support available amongst young people. Supporting teachers and families to spot early signs of needing support is important as young people told us that they are often the ones making referrals.

Accountability and Transparency

Future in Mind Recommendations

• Improved transparency and accountability

What our report can add:

- Whilst not in the information we collected, the Healthwatch Salford team had mixed responses in working with children's services. Some of the learning needed was for the Healthwatch Salford team to understand more about Children's services as well as the need to develop closer links with children's teams.
- Some teams and services were difficult to engage with and arranging focus groups and sharing surveys proved challenging in some areas. It would be useful to develop better partnership working across Healthwatch and Children's services to build on the positive work of this report.

¹⁰ http://www.nice.org.uk/guidance/cg28/chapter/1-guidance

¹¹ https://www.england.nhs.uk/wp-content/uploads/2015/07/access-info-implmntn-guid.pdf



Workforce Development

Future in Mind Recommendations

• Professionals trained in child development and mental health

What our report can add:

- It tells us that the people answering our survey reported teachers, family members, police and parents / guardians to be trusted people, who were often the people they would speak to if they were feeling stressed. Making sure that these key people are able to identify mental health issues is important in early recognition of where people need support.
- Whilst not in the information we collected, the young people in the steering group talked about the caring/nurturing environment of Primary Schools compared to the transition to Secondary Schools where pressures are increased. Teachers in primary schools were described as calm, nurturing and caring compared to teachers in secondary schools being described as strict and more focussed on the work. It was suggested that this makes it harder to build relationship and to talk about emotional wellbeing issues. This suggests that there is a need for further support to children during this time of transition, as well as the wider workforce in addressing this issue.



Thank You

Healthwatch Salford would firstly like to thank all of the Children and Young People involved in the project. Without your help, we wouldn't have developed a survey that people felt happy filling in. You gave up lots of time to help with this work and we want to say thank you. You have been excellent in developing and promoting the survey and we hope that you will continue to be involved in the work of Healthwatch Salford.

A big thank you to all of the children and young people in Salford who completed the survey. Thank you for being so honest and for sharing your thoughts and ideas with us. Your views will help to improve services for everyone in Salford.

The Young Carer's Service has been working very closely with Healthwatch Salford throughout this project. They have helped to run steering group sessions, shared ideas and helped to get a brilliant response to the survey. As well as practical help, they have also been sharing information on social media and promoting the project at various meetings and boards. Thank you for all of your help with this project.

Teachers, schools and educational leads have helped us to develop tools to use in schools and have kindly shared information with the young people they support. Thank you for your help in encouraging children and young people to complete the survey and have their say.

Without the help of Public Health, analysis of the information we gathered would have taken a significant amount of time. Their input supported us to be able to look at the information in depth and gain a great understanding of the things that local young people were telling us.

Thank you to the children and young people's services in Salford. By promoting the project, helping us to run focus groups and sharing our survey, you have helped young people in Salford to have a voice in the future of their services.

To everyone else involved in the project, thank you for all of your hard work and dedication.



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Report produced November 2015.



Appendix A – Survey.





Children and Young People Emotional Wellbeing and Mental Health

1. How often do you feel happy and good about your life?

	0 □ Never	1 🗆	2 🗆	3 🗆	4 🗆	5 🗆	6 🗆	7 🗆	8 🗆	9 □ E\	10 □ veryday
2.	What make Scho Exam Pare Frier Profe Other:	ol ns nts / Gi nds essional	uardian s (like (GPs, Te	,		Classm	[,] Membe	ers		
3.	What make Scho Exam Pare Frien Profe Other:	ool ns nts / Gi nds essional	uardian s (like (s GPs, Te			Classm	[,] Membe	ers		
4.	Why? Click here	to ente	er text.								
5.	How often	do you	get str	ressed?	1						
	0 □ Never Everyday	1 🗆	2 🗆	3 🗆	4 🗆	5 🗆	6 🗆	7 🗆	8 🗆	9 🗆	10 🗆
6.	What stress School Exams Parents Friends Profession Other: Chin	/ Guard	dians ike GPs		,	⊡W ⊡Fa ⊡Cl	-	embers es			
	Other: Cli	ck here	to ent	er text.	•						

Why?

Click here to enter text.



- 7. Who would you ask if you needed help because you were feeling unhappy or stressed?
 - □ Parents / Guardians
 - □ Friends
 - □ Teacher
 - \Box GP

 - Other Click here to enter text.
- □ Family Members
- □ Classmates
- □ School Nurse
- □ Youth Worker
- \Box I don't like to ask for help

Why would you choose them to talk to?

Click here to enter text.

8. How do you cope when you are feeling stressed or unhappy? Click here to enter text.

9 Have you ever talked to someone about feeling stressed or unhappy?

9. Have you ever talked to	D someone about ree □ No	Ing scressed of unhappy:
10. If yes, who did you tal	k to?	, ,
Parents / Guard	ians	Family Members
Friends		Classmates
🗆 Teacher		🗆 School Nurse
Boss		□ Mental Health / Wellbeing Service
🗆 GP		Youth Worker
🗆 I don't like to as	k for help	
Other: Click here t	to enter text.	
Why did you choose th Click here to enter text		
11. Do you get support fro	om anyone?	
🗆 Parents / Guard	ians	Family Members
Friends		Classmates
🗆 Teacher		🗆 School Nurse
		□ Mental Health / Wellbeing Service
🗆 GP		□ Youth Worker
🗆 I don't like to as	k for help	
Other: Click here t	•	
Did it help?		
□ Yes	□ No	I'd rather not say
12. Have you ever used a	mental health / well	being service?
	□ No	□ I'd rather not say



If yes, can you tell us why?

Click here to enter text.

Thank you for filling in our survey. If you answered yes to the last question, please can you answer the next set of questions about the service you used. If you answered no to the last question, please jump to page 6!

Mental Health and Wellbeing Service Questions

13. What service do you or did you use? Click here to enter text.

14. How long did you use this service for?

 \Box 6-8 weeks

 \Box 2-6 months

- □ 6-12 months
- \Box 2-5 years

- □ 1-2 years
- \Box 5 years or more

15. Was it easy to get help from this service?

- □ Yes
- 16. Is there anything that would have made it easier to get help from this service? Click here to enter text.

- 17. Who referred you to the service and why? Click here to enter text.
- **18. How long did it take to get help?** Click here to enter text.
- 19. What happened while you were waiting for help?
 - □ Things got better □ Things got worse □ Nothing Changed
- **20. What might have helped while you were waiting?** Click here to enter text.
- **21.** Did you get any information about the service before you started to use it? □ Yes □ No
- **22.** How did you feel about using the service for the first time? Click here to enter text.



23. Did you have a say in

	Yes	No	Sometimes	Don't Know
Where you met?				
What date and time you met?				
What you talked about?				
What would help?				
Anything else you would like to tell	Click	here to	o enter text.	
us?				

- 24. What type of help did you get from the service? Click here to enter text.
- 25. Did you feel differently after using the service? □Yes □No

If you said yes, can you tell us how? Click here to enter text.

□ No

26. Are you still using this service?

 \Box Yes

27. How would you rate this mental health service?

1 🗆 2 🗆 3 🗆 4 🗆 5 🗆 7 🗆 8 🗆 0 🗆 6 🗆 9 🗆 10 🗆 Terrible Excellent

28. How likely would you be to tell a friend or family member to use this service?

0 🗆	1 🗆	2 🗆	3 🗆	4 🗆	5 🗆	6 🗆	7 🗆	8 🗆	9 🗆	10 🗆
Very Unli	kely									Very
Likely										

29. Is there anything that could have made it better?

Click here to enter text.

30. If you have stopped using the service, can you tell us why?

\Box Things got better / I was ready to stop	🗆 I didn't find it helpful
going	
I had the maximum number of sessions I was allowed	\Box I was too old for the service
\Box I started going to a different service	Other: Click here to enter text.

31. How did you feel after you stopped using the service? Click here to enter text.



32. If you have stopped using the service, where do you get support from now?

□ 42 nd Street	□ Boss
Parents / Guardians	
Friends	Family Members
□ Teachers	Classmates
□ GP	🗆 School Nurse
Youth Worker	Other: Click here to enter text.

33. Is there anything else you would like to tell us about mental health and emotional wellbeing services?

Click here to enter text.

Thank you for answering our survey. Your answers are helping us to plan better services for children and young people in Salford. On the next page there are some questions that tell us a little bit about you so that we can make sure we are talking to a range of people. Don't worry, we don't need to know anything that could identify you - just some information to help us plan which communities and groups we might need to do more work with.

Equal Opportunities Monitoring Form

Healthwatch Salford is committed to the fair treatment of all people. We are an organisation that looks to include people and make sure people's differences are reflected throughout our work with the diverse communities across Salford. Monitoring helps us to identify significant trends and differences between groups, and then to explore why they exist. This helps us to be more involving and inclusive of everyone and enables us to remove any unfair barriers, so everyone has an equal opportunity.

Please help us by answering each question. Your response will be treated in confidence. This form will be separated from your questionnaire answers so that you are not identified. The answers will be used to advance equality of opportunity between people.

Age

- □ 0 10 years □ 11 - 17 years
- □ 18 25 years

□ 26 - 35 years
□ 36 - 45 years
□ 46 - 55 years

- □ 56 64 years
- \Box 65 years and over
- \Box Prefer not to say



Religion	or	Belief	System

Religion or Belief System Which religion or belief system do you identify with?						
 □ Jewish □ Hindu □ None Other (please state) 	□ S □ F	Buddhist Sikh Prefer not to s to enter text.	□ Christian □ Muslim ay			
Race Which race do you identify as? (including colour, nationality and ethnic or national origin)						
Asian/ Asian British:	 Bangladeshi Indian Other (please state): 	Click here to	Pakistani Chinese o enter text.			
Black/ Black British:	 African Other (please state): 		Caribbean o enter text.			
White:	 British English Scottish Other (please state): 	Click here to	Northern Irish Irish Welsh o enter text.			
Mixed/ Multiple:	☐ White & Asian Other (please state):	□ Click here to	White & Black o enter text.			
Other (please state): Click here to enter text. Prefer not to say						
Sex What is your sex/ gender?						
🗆 Male	🗌 Female	e	Prefer not to say			
Gender Reassignment						

Is your gender different from the one you were assigned with at birth?

	Yes	🗆 No		Prefer not to say			
Marriage and Civil Partnership Are you married or in a civil partnership?							
	Yes	🗆 No		Prefer not to say			

				Saltard Young Care		alunw	τςμ
Emot	ren and Young People: ional Wellbeing and Mental H 2015 – November 2015	ealth	Proje		the gac	Centre Kales - separation	Salford
-	gnancy and Maternity you pregnant?						
	Yes		No			Prefer not to say	
Do y	bility ou have a physical or me erse effect on your ability						
	Yes		No			Prefer not to say	
	es, please give details of there to enter text.	the	natu	re of your condition	n:		
Do y	ng Responsibilities ou spend a significant pr on who is ill, frail, disabl				-		
	Yes		No			Prefer not to say	
	ual Orientation t is your sexual orientation	on?					
	Heterosexual (straight) Questioning			Homosexual (gay/ Prefer not to say	lesbi	an) 🗌 Bisexua	ıl
	e Status you currently or have you	ı be	en in	care?			
	Yes		No			Prefer not to say	
Military Veteran Have you served in the armed forces?							
	Yes		No			Prefer not to say	
Are	Nelessness you currently or have you luding staying with friend				odatio	on)	
	Yes		No			Prefer not to say	
BME Communities Do you identify as belonging to a BME community?							
	Yes		No			Prefer not to say	

	Salterd Yo	🐃 health	wetch			
Children and Young People: Emotional Wellbeing and Mental I July 2015 – November 2015	Health Project	the decime tassis - expering	Salford			
If yes, please identify the c Click here to enter text.	ommunity you belon	g to:				
Traveller Communities Have you or do you identify	as belonging to a tra	veller community?				
□ Yes	🗆 No	Prefer not to	say			
If yes, please identify the c Click here to enter text.	ommunity you belon	g to:				
Migrant Communities Do you identify as belonging to a migrant community?						
□ Yes	🗆 No	Prefer not to	say			
If yes, please identify the c Click here to enter text.	ommunity you belon	g to:				
Criminal Justice Sentence Do you identify as an ex-offender?						
□ Yes	🗆 No	Prefer not to	say			
Employment Status Please let us know which of the following applies to you:						
 Employed full time Volunteering School 	 Employed part- Apprenticeship Higher Education 	□ Training	say			
Other (please Click state):	there to enter text.					

Thank you!

Please return this questionnaire by email to: <u>Feedback@healthwatchsalford.co.uk</u> or by post to: Healthwatch Salford, Innovation Forum, 51 Frederick Road, Salford, M6 6FP. If you need any help with this form, or you need the form in a different format, please call us on: 0330 355 0300 Children and Young People: Emotional Wellbeing and Mental Health Project July 2015 – November 2015 **Appendix B – Example Activity Sheet**



