

Experience of service evaluation from a child, young person and carer perspective in a Specialist Child and Adolescent Mental Health Service (Sp-CAMHS)

Hywel Dda University Health Board

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Note: Some of the information in this report has been taken from the previous service user evaluation report (KD, 2017)

Abstract

A service evaluation was conducted in March-April 2021 to capture the experiences of service users (child/young person and parent/carer) in Specialist Child and Adolescent Mental Health Services (Sp-CAMHS) across the four localities within Hywel Dda University Health Board: Canolfan Gwili (Carmarthen), Preseli Centre (Pembrokeshire), Ty Helyg (Ceredigion) and Elizabeth Williams Clinic (Llanelli). This study replicated previous service user evaluations undertaken in 2011, 2014, and 2017 for a temporal comparison of outcomes. However, it is also noteworthy that the present study produced distinctive outcomes due to the effects of the COVID-19 pandemic on health care practices. Data was collected over an eight-week period by clinicians administering three versions of the Experience of Service Questionnaire (ESQ; 9-11 years, 12-18 years and Parent/carer) to 101 service users (65 children and young people above age 9; 35 parent/carer[s]) who had clinical contact with Sp-CAMHS face-to-face, telephone and/or online within the data collection time frame. The ESQ provided quantitative and qualitative data which were analysed using descriptive statistics and thematic analysis, respectively. The results showed a high proportion of service users' satisfaction and compliments to the Sp-CAMHS service. Feedback from the service users also highlighted key areas of recommendations for future practice.

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Introduction

The Children, Young People and Education Committee was developed in June 2011 to inspect legislations and examine the policies and expenditures of the Welsh Assembly Government (WAG) concerning education, health and wellbeing of children and young people in Wales. Several concerns were raised from the preliminary examination of Sp-CAMHS across Wales, which subsequently triggered an external review of Sp-CAMHS to modernise service practices. As a result, the review established key priorities to address, which included: appropriate and timely access; resources for Sp-CAMHS; appropriate referrals; primary care provision; transition from child to adult services; inpatient care; access to psychological therapies; and the use of prescription medication with children and young people with mental health problems.

Such recommendations presented an opportunity for Sp-CAMHS to investigate service user experiences to determine whether current practices met the needs and standards reported by the service users of Sp-CAMHS, which include children, young people and their parent/carer(s) in Modern Wales. Three previous audits were conducted as follows: the first in 2011 prior to the implementation of the Choice and Partnership Approach (CAPA) model; the second in 2014 by JJ (Consultant Psychologist); and the third in 2017 by KD (Assistant Psychologist). The present study aims to replicate prior service user evaluations to compare data over the years in Sp-CAMHS localities across Wales.

The 2021 service user evaluation was conducted during the COVID-19 pandemic. In response to the global pandemic, services were faced with the challenge of rapidly adapting health care practices in accordance to the COVID-19 government guidelines, whilst maintaining practice standards to meet service user needs. Examples of such changes include, but are not exclusive to: staff working in 'bubbles' and maintaining social distance with fellow staff and service users; restrictions on the number of people permitted to occupy an indoor space or room; wearing face covering in indoor premises; staff working from home; restriction of face to face appointments; and the use of online appointments (e.g. Attend Anywhere). It is without a doubt that such implementations have had an effect on clinical practice and the process of therapeutic interventions across Sp-CAMHS. As such, data collected from this audit offers a unique perspective on the service users' experiences of Sp-CAMHS compared to previous service user evaluations.

The report concludes with recommendations for future practices in Sp-CAMHS in accordance to the service users' feedback to ensure that services meet the needs of young people and the community in Modern Wales.

Method

Questionnaire

The Experience of Service Questionnaire (ESQ) was used to gain feedback from young people and their parents/carers about their experience of Sp-CAMHS.

Three versions of the ESQ were used: 9-11 years, 12-18 years and the parent/carer version. Each ESQ consists of 12 items rated 'certainly true', 'partly true' and 'not true' and three open-ended questions looking at what they liked about the service, what they felt needed improving, and any other comments. Adding up the 'certainly true' responses for each item across a sample can provide information on respondents' subjective satisfaction with the service. The Satisfaction with Care construct can be obtained by adding up items 1, 2, 3, 4, 5, 6, 7, 11 and 12, and the Satisfaction with Environment construct can be obtained by adding up items 8,9 and 10 (Brown et al., 2014).

Participants

Participants were any young person and carer that was currently receiving support in Sp-CAMHS. All staff were therefore, asked to take part in the service evaluation and to ask their service users to participate.

The Experience of Service Questionnaire (ESQ) was administered to 66 children and young people (9 years and above) and 35 parents and carers, giving a total of 101 completed ESQ's.

Procedure

Staff in Sp-CAMHS were told in advance via email that the service user evaluation was going to take place and were given guidance on how to support with data collection. Emails were then sent out on a weekly basis to remind staff to give out the ESQs to those they were working with.

Questionnaires were administered over a period of eight weeks, from March to April 2021, across the four locality team bases: Canolfan Gwili (Carmarthen), Preseli Centre (Pembrokeshire), Ty Helyg (Ceredigion) and Elizabeth Williams Clinic (Llanelli). Specific psychological therapies were also asked to contribute, for example, art therapy and DBT, this data was collated within the locality data.

In order to gain informed consent, all children, young people and parents/carers were informed that the data collected from the ESQs would be used for service evaluation purposes and shared with the directorate. It was also conveyed to the respondents that they could refuse to participate, if they so wished. Importantly, those who did participate were informed that their information would remain anonymous and stored confidentially. Any data that would identify clinicians was also kept anonymous. However, it could be linked back to relevant teams, for service improvement purposes.

Due to COVID-19 restrictions, a lot of clinicians are working remotely by delivering therapy online or over the telephone. Therefore, electronic versions of the ESQs were also provided via email (see Appendix A) in addition to paper copies for service users/carers to complete these electronically. Guidance was given to the services on how to administer these questionnaires, for both face-to-face and remote working scenarios. Please see Appendix B for the procedural flowchart and Appendix C for the instructional emails distributed to the staff across the four Sp-CAMHS localities.

Results

Altogether, 101 ESQs were completed, 35 of these were by parents and/ carers, 6 of these by young people aged 9-11, and 60 by young people aged 12-18. Table 1 provides an overview of the number of ESQs collected by each locality. As table 1 highlights, the highest number of ESQs were provided by young people aged 12-18 years old, following this were parents/ carers, and a very small number of 9-11 year olds participated.

	9-11 years old	12-18 years old	Parent or Carer	Total n
Carmarthen	*	18	12	34
Ceredigion	0	12	6	18
Pembrokeshire	*	17	10	29
Llanelli	0	13	7	20
Total n	6	60	35	101

Table 1. Number of ESQs collected from each locality.

Overall Quantitative Data

Table 2 (below) provides the quantitative data collated from all of the ESQs collected in Sp-CAMHS. The table provides the combined findings for each of the individual 12 statements on the ESQs, for parents/ carers, 9-11 year olds and 12-18 year olds. Results are shown in both percentages and the n score is provided. The highest proportion of answers for all three versions of the ESQ was 'certainly true' which can be interpreted as positive feedback. To see the graphical representation of the compiled quantitative data for all four localities, please refer to Appendix D. Please see Appendix E — H for data provided by each separate locality.

Item	Participant	Certain	ly True	Partly	y True	Not	True	Don't	Know
		%	n	%	n	%	n	%	n
Q1) I feel that the people who have	P/C (n=35)	97.14	34	2.86	*	0.00	0	0.00	0
seen me/my child listened to me	9-11 (n=6)	100.00	6	0.00	0	0.00	0	0.00	0
	12-18 (n=35)	86.67	52	11.67	7	*	*	0.00	0
Q2) It was easy to talk to the people	P/C	94.29	33	*	*	0.00	0	*	*
who have seen me/my child	9-11	*	*	*	*	0.00	0	0.00	0
	12-18	68.33	41	23.33	14	*	*	0.00	0
Q3) I was treated well by the people	P/C	97.14	34	*	*	0.00	0	0.00	0
who have seen me/my child	9-11	100.00	6	0.00	0	0.00	0	0.00	0
	12-18	91.67	55	*	*	0.00	0	*	*
Q4) My views and worries were taken	P/C	97.14	34	*	*	0.00	0	0.00	0
seriously	9-11	*	*	*	*	0.00	0	0.00	0
	12-18	86.67	52	10.00	6	0.00	0	*	*
Q5) I feel the people here know how to	P/C	88.57	31	*	*	0.00	0	*	*
help with the problem I came for	9-11	*	*	0.00	0	0.00	0	*	*
	12-18	60.00	36	33.33	20	*	*	*	*
Q6) I have been given enough	P/C	80.00	28	20.00	7	0.00	0	0.00	0
explanation about the help available here	9-11	*	*	0.00	0	0.00	0	*	*
	12-18	66.67	40	30.00	18	*	*	0.00	0
Q7) I feel that the people who have	P/C	82.86	29	17.14	6	0.00	0	0.00	0
seen me/my child are working together to help with the problem(s)	9-11	*	*	0.00	0	0.00	0	*	*
	12-18	83.33	50	10.00	6	*	*	*	*

Q8) The facilities here are comfortable	P/C	74.29	26	*	*	*	*	*	*
(e.g. waiting area)	9-11	*	*	*	*	0.00	0	*	*
	12-18	68.33	41	21.67	13	*	*	*	*
Q9) The appointments are usually at a	P/C	74.29	26	20.00	7	*	*	0.00	0
convenient time (e.g.	9-11	*	*	0.00	0	0.00	0	*	*
don't interfere with work, school)	12-18	65.00	39	28.33	17	*	*	0.00	0
Q10) It is quite easy to get to the place	P/C	82.86	29	*	*	*	*	0.00	0
where the	9-11	*	*	*	*	0.00	0	*	*
appointments are	12-18	68.33	41	28.33	17	*	*	0.00	0
Q11) If a friend needed similar help, I	P/C	91.43	32	*	*	0.00	0	0.00	0
would recommend that he or she come here	9-11	*	*	0.00	0	*	*	0.00	0
	12-18	60.00	36	30.00	18	*	*	*	*
Q12) Overall, the help I have received	P/C	91.43	32	*	*	0.00	0	0.00	0
here is good	9-12	100.00	6	0.00	0	0.00	0	0.00	0
	12-11	86.67	52	10.00	6	0.00	0	*	*

Table 2. Overall quantitative findings.

Overall Qualitative Analysis

A thematic analysis (Braun and Clarke, 2006) approach was used to analyse the qualitative data. Initially, the qualitative data was analysed separately for each locality. This entailed going through the participants answers and drawing upon common themes within the data. Following this, the themes from each locality were pooled together to create super-ordinate themes. From this process, three super-ordinate themes were devised: 'The therapeutic experience', 'The service' and 'The facilities'. Each super-ordinate theme contains data from all of the ESQs (parents/carers, 9-11 year olds, 12 -18 year olds) and has several subthemes. Below is a descriptive overview of the themes devised, please also refer to Table 3 which demonstrates how these themes were captured from the raw data. To see the raw qualitative data for each locality, please refer to Appendix I – L.

1) The Therapeutic Experience

Service users across all ages in the four localities reported a satisfactory therapeutic experience in Sp-CAMHS. Three sub-themes were identified in this super-ordinate theme: 'staff-patient relationships', 'communication', and 'intervention'.

Staff-Patient Relationship: Comments predominantly reflected positive experiences. There were notable reports of service users feeling warmth, trust, comfortable, relaxed, reassured, supported, and understood.

"[My child] feels relaxed...opens up to [staff] who's very supportive and warm to the both of us"

"It was really good that people understood"

"[The staff are] very understanding of our needs and concerns"

Communication: Service users noted positive and negative feedback about their experience in communicating with staff. Positive comments indicated prompt and regular communication, clinicians' listening skills, ability for clients to express or talk about sensitive matters to clinicians, receiving feedback from the clinicians, and effective problem solving as a result of open communication.

"I've been listened to"

"Calls are returned promptly"

"I get to talk about stuff here that I can't usually talk about anywhere else"

"We were able to talk through an unhelpful appointment and resolve it"

Comments reflecting negative experiences illustrated the need for more listening, suggestion of a clear written plan of treatment, and poor reception on online services (i.e., Attend Anywhere).

"Important to receive a written plan in regards to medical needs"

"More listening from the start"

"[To have] better reception on Attend Anywhere video calls"

Intervention: Service users reported positive and negative feedback about their experience in the intervention process and outcome. Service users reported that the intervention was clear, informative, and person-centred.

"Informative and clear, good positive goals/plans in place"

There were also comments that service users had increased insight as a result of the support, such as "helped me understand my issues". Moreover, service users noted that they were better equipped with coping skills and tools to help with their issues to enhance recovery, such as "I was given skills/tools to deal with my struggles and anxieties".

Negative feedback reflected subjective reports of persistent or ongoing mental health issues, parent/carer(s) feeling in need of more support, and concerns about future support and recovery.

"I just have a few concerns as [my child] is still having issues emotionally at home"

"[At] times I [parent/carer] still don't know where to turn or how to deal with [my child's mental health]"

"Sometimes I feel like we only focus on what I've been admitted for and not any further mental health issues I could be struggling with".

2) The Experience of the Overall Service

Positive and negative comments were prominent in regards to the service users' experiences within the Sp-CAMHS service. Suggestions for further improvement were also identified, thus forming the three sub-themes for this superordinate theme as outlined below.

Positive experiences of the service: Service users described the service as excellent, kind, friendly, helpful, professional, non-judgemental and collaborative, and reported positive experiences within the service.

"Excellent, person-centred care!"

"Friendly yet professional"

"A non-judgemental service"

"It was a collaboration of positive support"

Negative experiences of the service: Service users reported long waiting times, difficulty accessing intervention, and few reported relocation of localities.

"Too much moving around [different localities]"

"It took so long to get support...we were on a waiting list"

"It's been difficult to access medication"

"There was a period where the appointments were very sparse, we felt a bit lost at this time"

Suggestions for improvement: Future suggestions included provision of further information on the support being offered, consistent location of appointments, provision of more information for parents, and increasing Autism Spectrum Disorder (ASD) awareness

"[Need] information on available help"

"It would have been better to have consistency [of location] from the very beginning"

"In the beginning it would have been good for us as parents to have a one to one session for help...and answer questions which we had"

"More needs to be addressed on autism"

3) The Therapeutic Environment

Service users also reports positive and negative comments in regards to the facilities in the four localities. Comments also indicated suggestions for improvement.

Positive therapeutic environment: Service users reported positive aspects of the environment such as feeling comfort, calm and safe.

"Comfortable"

"The chairs are ... soft"

"Calm space. No noise, pretty large room with enough tools to do what I might like to do"

"A safe and anonymous environment"

Challenges to the therapeutic environment: Comments indicated negative features of the facilities, such as car parking difficulties, technical/online appointment issues, and old building facilities.

"Really hard to park"

"It was quite hard for [the staff] to hear me over zoom so it was hard for him to help me"

"The rooms are old and need updating. Can be very hot. No private waiting room. The whole building does not feel relaxing"

Suggestions for the improvement of facilities: Comments reflected suggestions for allocated parking spaces and room redecoration.

"There needs to be allocated parents parking"

"Decorate the room"

"[The room] would be less intimidating if they were more cosy and inviting and welcoming"

SUPER-ORDINATE THEMES	SUB-THEMES							
1) The	Staff-Patient Relationship	Relationship Communication			Communication		Inter	vention
Therapeutic	Approachable	Positive	Negative	Positive	Negative			
Experience	Comfortable	Prompt communication	Feeling accused	Informative	Persistent mental health			
	Relaxed	Regular communication	Lack of a written plan of	Clear	issues			
	Enjoys	Clinicians' listening skills	medical treatment	Use of goal-setting	Parents feeling lost on			
	Supportive	Ability to express or talk	More listening	Improving lives	managing their child's			
	Warm	with clinicians about	Poor reception on Attend	Coping skills and tools	mental health			
	Helpful	sensitive matters	Anywhere	Helped with issues	Lack of family support			
	Trust	Feedback from clinicians		Increased	Talking therapy prior to			
	Looking forwards to sessions	Problem-solving		insight/awareness	medical treatment			
	Person-centred			Progress	Little direction for future			
	Understanding			Meal plan	support/recovery			
	Reassuring			Managing emotions	Lack of consistency in			
	Non-judgemental			Recovery	intervention			
				Person-centred				
				Advice from clinician				
2) The Experience	Positive Experiences of the Service	Negative Experien	ices of the Service	Suggestions for	or Improvement			
of the Overall	Excellent	Long wait time to receive tre	atment	Provide more information	on the support offered			
service	Person-centred	Moving through different loc		Initial Q&A session for pare				
	Positive support	Difficulty accessing medication	on	Consistent location of appo	ointments			
	Non-judgemental	Difficulty accessing mental h	ealth support	Increase ASD awareness				
	Kind							
	Helpful							
	Friendly							
	Professional							
	Collaborative							
	Grateful							
	Promptness of help							
	Access to medication							
	Thorough assessment							
3) The	Positive Therapeutic Environment	Challenges to the The	rapeutic Environment		nprovement of Facilities			
Therapeutic	Comfortable	Parking issue		Allocated parking for patie	nts			
Environment	Calm	Technical online appointmen	nt issues	Room re-decoration				
	No noise	Old building facilities						
	Safe environment							
	Soft chairs							

Table 3. An overview of the themes devised from the qualitative data.

Discussion

The service user evaluation 2021 was conducted with the aim of capturing the views of the Sp-CAMHS service users and their parents/carers. Data was collected across Hywel Dda Health Board, from 4 locality teams, using ESQs which collected quantitative and qualitative data; analysed using descriptive statistics (Appendix D – H) and a thematic analysis (Appendix I – L), respectively.

Overall, the service evaluation found a profoundly positive result, noted from the outcome measure data (quantitative data) with most questions scored as 'certainly true' or 'partly true.' This was mirrored in the thematic analysis (qualitative data) too; finding an overall satisfactory service from Sp-CAMHS, with particularly strong evidence for the staff-patient relationship. Yet, there were some areas of the data, which suggests a need for improvement. The rest of this discussion will focus on these areas, followed by some recommendations.

Limitations

It is important to note that these results have not been analysed using statistical methods. Therefore we are unable to reach a conclusion on whether responses are statistically significant within the current data set in comparison to the previous service user evaluations. Also, without further investigations, this report is limited due to the small sample size of 101 individuals, which could suggest a possible response bias from people who wanted to voice their opinions. It also only provides some degree of understanding of the services user and their parents/care givers' perspective. Furthermore, it is important to mention that the Sp-CAMHS service has been working quite differently due to the COVID-19 restrictions and regulations, therefore the results gathered for this evaluation cannot offer a true comparison.

Interpretations

The data decidedly suggests that the overall experience of Sp-CAMHS is positive. It would seem that the service's particular strengths lie in the care constructs, evidenced in the quantitative data, with a high proportions of people answering 'certainly true' for feeling listened to, the help and treatment received and feeling treated well by those they saw. Mirrored in the qualitative data, people reported feeling listened to, their needs and concerns being met, developing the skills and tools to cope and finding the interventions person-centred. Although not as encouraging, there were some positive responses about the therapeutic environment, mostly the psychological aspects, such as it being calming and comfortable.

From the quantitative data (Table 2 and Appendix D), it can be noted that there were some questions that received a higher number of 'not true' responses, suggesting that for some 12-18's they found it difficult to talk to the people who saw them and the appointment time was not always convenient. A few 9-11's would not recommend the service to their friends and some of the parent/carer(s) did not find the therapeutic environment, i.e. facilities, comforting.

From the thematic analysis (see Table 3 and Appendix I – L) several different themes and subthemes were identified, with mixed views across and within localities. For some people, there were clear concerns regarding the need for clearer treatment plans and for staff to be more informed in specific areas such as autism. There were consistent themes finding that some service users felt that there was a lack of support after treatment/recovery and some parents feeling unsupported or uninformed whilst the young person was engaging with Sp-CAMHS. Across the

localities, service users commented on the length of waiting times, difficulty to access the service and experience of irregular contact or sessions. Feedback on the physical therapeutic environment of the service included the difficulty to park, not finding the building inviting, relaxing or comforting, as well as a lack of privacy.

Looking at both the quantitative and qualitative results, there appears to be a common concern regarding the therapeutic environment, which may also be reflected in some of the 9-11's views of not wanting to recommend the service to their friends, suggesting that the current Sp-CAMHS environment may not be user-friendly. For some, there appear to be psychological concerns around access of Sp-CAMHS, particularly the start and end of interventions, as suggested by the users' experience of needing more information, more informed staff and support to transition out of the service.

Recommendations

Based on the interpretations of the results we suggest:

- 1. Invest in the therapeutic environment, including practical facilities such as parking to ensure it is more inviting and user friendly.
- 2. Consider the barriers to accessing Sp-CAMHS, including the appointment times and how they conflict with school or college. Also, the explanations and/or language used by staff, ensuring it is delivered in a way that service users can understand.
- 3. Consider endings and the young person's transition out of Sp-CAMHS. Provide further support and resources for service users and parents/carers finishing their intervention.
- 4. Continuing to take a person-centred approach where the young person and carers' voice is paramount to the support and interventions provided.

Future

From completing this service user evaluation it was noted that there were benefits for both staff and service users. For the young person in particular, it gives the service a unique perspective on mental health services and how they could improve the quality of care, whilst offering an opportunity to give them a voice within their community. With this in mind, the evaluation echoes previous reports, requesting further opportunities that encourage service user feedback. By embedding this philosophy, the service can develop and improve to meet the needs of our clients and the community. This could be done in a variety of ways, for example:

- 1. Using platforms such as social media or other online platforms which are often a popular form of communication among young people.
- 2. Using in-service meetings or away days to share across the localities what they feel has worked well for them and what they would like to improve on.
- 3. Using notice boards within locality buildings can be a user friendly and accessible way to share with clients that their feedback has been listened to and how it is being used.
- 4. To continue to use the young people's forum to ensure that the young persons' voices are heard.
- 5. To repeat this service user evaluation for consistent monitoring and an opportunity for young people and carers' perspectives to be captured.

Conclusion

In conclusion, the service user evaluation 2021 reports a largely positive experience from the service users of Sp-CAMHS across the four localities. It is important to reflect that these experiences came from a time when the service was not able to function in its usual way due to the COVID-19 pandemic. Although there have been many challenges to the operations of the service, for both staff and service user, it is comforting to know that the experience of the care provided by the service has been upheld throughout. It is equally important to know how the service can evolve and develop in line with the need and perspective of the service user, and it is hoped that this evaluation can contribute to those discussions.

References

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- Brown, A., Ford, T., Deighton, J., & Wolpert, W. (2014). Satisfaction in Child and Adolescent Mental Health Services. *Administration and Policy in Mental Health and Mental Health Services Research*, *41*(4), 436-446. doi:10.1007/s10488-012-0433-9
- National Assembly for Wales: Children Young People and Education Committee (2014) Inquiry into Child and Adolescent Mental Health Services.

Appendices

Appendix A: Email Template sent to Service Users for Electronic Copies of the ESQs

DRAFT EMAIL FOR SENDING OUT ESQ'S

Dear Client and Parent/Caregiver,

Thank you for agreeing to participate in the Service User Evaluation.

Please find the links to the forms below:

- Parent or carer: [esq_parentreport-interactive-pdf.pdf (corc.uk.net)]
- Self-report 9-11 years: [esq_selfreport_9-11-interactive-pdf.pdf (corc.uk.net)]
- Self-report 12-18 years: [esq_selfreport_12-18-interactive-pdf.pdf (corc.uk.net)]

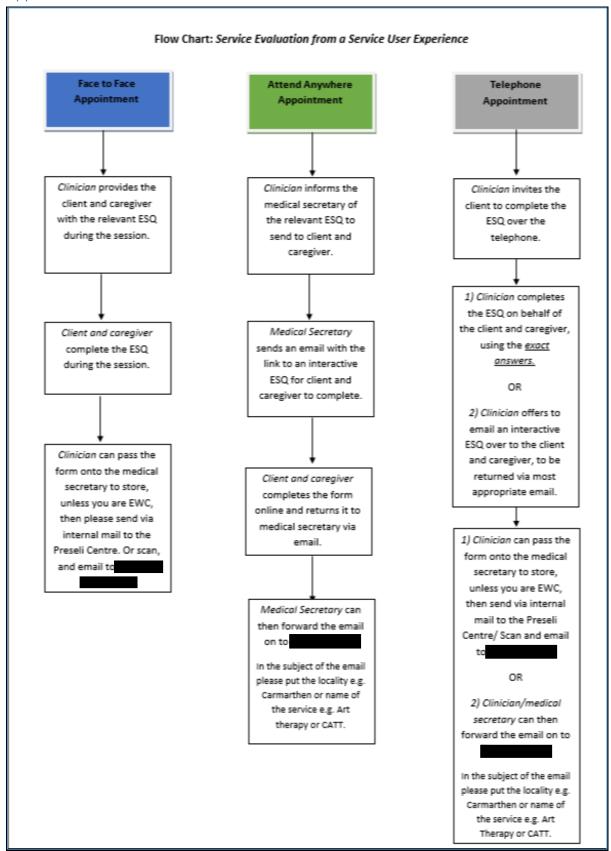
Please complete the relevant questionnaires and send them back to this email address.

We really appreciate hearing your perspectives, so that we can further develop our service for yourselves and future clients.

Many thanks,

SCAMHS

Appendix B: Flowchart of the Data Collection Procedure



Appendix C: Instructional Email Distributed to Staff

SERVICE EVALUATION FROM A SERVICE USER PERSPECTIVE

Dear Colleagues,

This email is to inform you that SP-CAMHs psychology will be carrying out the yearly service user evaluation next month (March). JC and KF will be carrying out the service user evaluation, and would be very grateful for your co-operation. To help encourage everyone, the service/locality that can accrue the most service user responses will win a very chocolatey prize.

Below are the steps to follow, please see attached to flow chart for a more visual explanation:

PROCESS

From 1st March 2021 to 31st March 2021, we want to give the Experience of Service Questionnaire to all the young people, parents and carers attending the service. There are 3 versions of the questionnaire, please find attached, so please select whichever one is appropriate for the person you are giving it to:

- Parent or carer
- Self Report 9-11 years
- Self Report 12-18 years

It is important to make the clients and their families aware that they do not have to respond, but if they do the information will be anonymous and used to improve the service we provide.

PAPER COPIES

If you are seeing the young person and parent/ carer in the clinic, then you can ask them to complete the questionnaires in one of your sessions. On the back of the ESQ at the bottom is a box for administration purposes. **PLEASE CAN YOU PUT THE NAME OF THE LOCALITY TEAM IN THE BOX** so that when we analyse the comments about the facilities and location of the building we will know which building it relates to (the locality name can be written in before photocopying takes place).

Please can you also specify if the service user is seen somewhere other than in a locality e.g. CATT and if they are receiving a specific therapy e.g. DBT, Art Therapy etc. If the questionnaire is given out by psychology then please can this also be highlighted so it can be used towards separate reviews.

Once the ESQ's are complete:

 If your service is Canolfan Gwili, Ty Llewellyn (CATT) or Ty Helyg, please store them for JC to collect.

- If your service is the Preseli Centre, please store them for KF to collect.
- If you your service is EWC, please send them via internal mail to the Preseli Centre.

(Preseli Centre, Withybush Hospital, Fishguard Road, Haverfordwest, SA61 2PZ)

ELECTRONIC COPIES

We understand that many sessions are now completed via attend anywhere or on the phone. In these circumstances, please can you ask service users and parents/carers to complete the questionnaires electronically; see links below. The secretaries have kindly agreed to support with this process and to send out the questionnaires via the generic email accounts. Please can you provide the secretaries with the appropriate email address and highlight which questionnaires need to be sent.

- Parent or carer: [esq_parentreport-interactive-pdf.pdf (corc.uk.net)]
- Self-report 9-11 years: [esq_selfreport_9-11-interactive-pdf.pdf (corc.uk.net)]
- Self-report 12-18 years: [esq_selfreport_12-18-interactive-pdf.pdf (corc.uk.net)]

Once the electronic ESQs have been received, please put the name of the locality team or service and if it is a specific therapy e.g. DBT, in the subject box of an email, attaching the ESQ forms to it. Then send the email to both KF and JC at the following email addresses:



The results of this service evaluation will be shared widely, and in previous years have been presented in the Business meeting, to the Sp CAMHS Dashboard and will outside of the Directorate, so please help us to get as good a response rate as we can.

And just another reminder about our **chocolatey incentive to the service that gathers the most data!!**

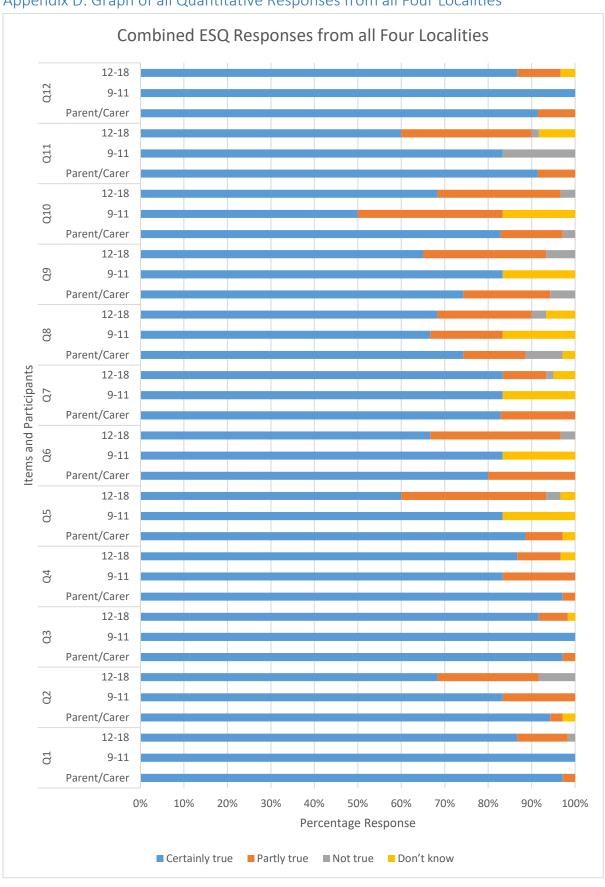
Any queries, please get in touch with KF at the Preseli Centre 01437 773774 or email either of us.

Thanks again for your help and support.

Best Wishes,

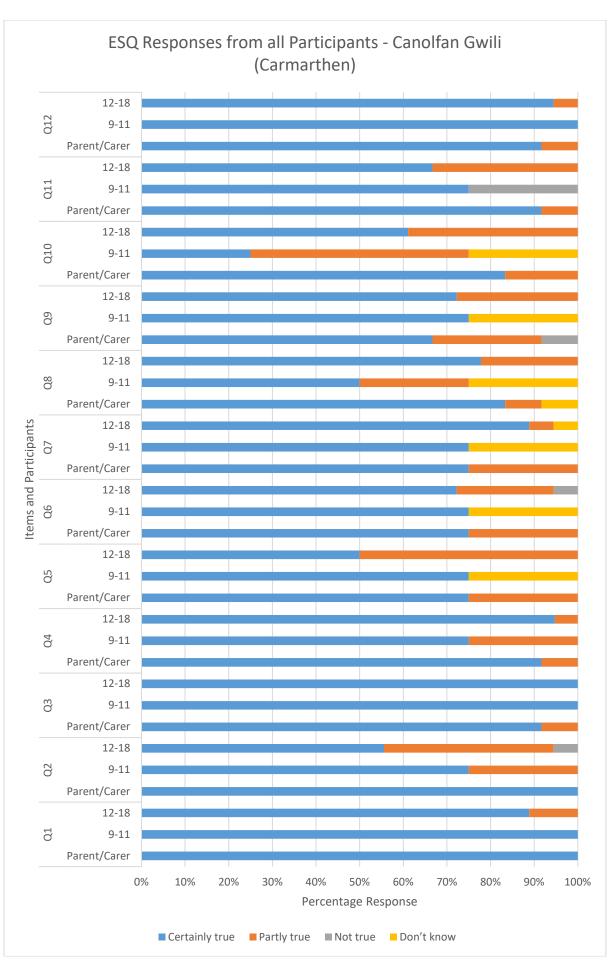
JC, Clinical Psychologist and KF, Assistant Psychologist.

Appendix D: Graph of all Quantitative Responses from all Four Localities



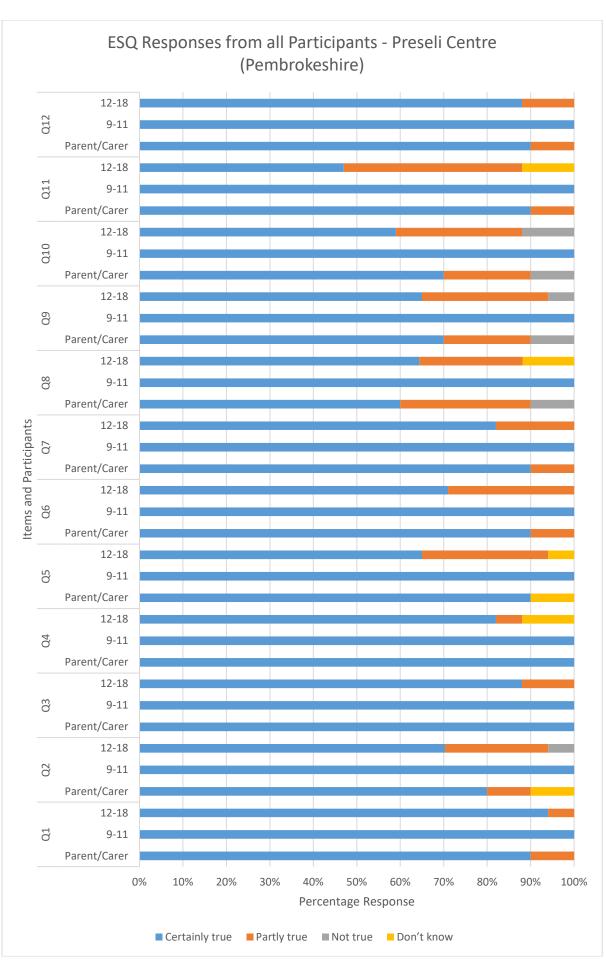
Appendix E: Table & Graph of ESQ Responses from Canolfan Gwili (Carmarthen)

Item	Participant		Percentage Re	sponse (n)	
item	Participant	Certainly true	Partly true	Not true	Don't know
Q1) I feel that the people who have seen me/my child listened to me	Parent/Carer	100 (12)	0 (0)	0 (0)	0 (0)
1) Their that the people who have seen me, my child listened to me	9-11	100 (4)	0 (0)	0 (0)	0 (0)
	12-18	88.89 (16)	11.11 (2)	0 (0)	0 (0)
Q2) It was easy to talk to the people who have seen me/my child	Parent/Carer	100 (12)	0 (0)	0 (0)	0 (0)
	9-11	75 (3)	25 (1)	0 (0)	0 (0)
	12-18	55.56 (10)	38.89 (7)	5.56 (1)	0 (0)
Q3) I was treated well by the people who have seen me/my child	Parent/Carer	91.67 (11)	8.33 (1)	0 (0)	0 (0)
	9-11	100 (4)	0 (0)	0 (0)	0 (0)
	12-18	100 (18)	0 (0)	0 (0)	0 (0)
Q4) My views and worries were taken seriously	Parent/Carer	91.67 (11)	8.33 (1)	0 (0)	0 (0)
	9-11	75 (3)	25 (1)	0 (0)	0 (0)
	12-18	94.44 (17)	5.56 (1)	0 (0)	0 (0)
Q5) I feel the people here know how to help with the problem I	Parent/Carer	75 (9)	25 (3)	0 (0)	0 (0)
came for	9-11	75 (3)	0 (0)	0 (0)	25 (1)
	12-18	50 (9)	50 (9)	0 (0)	0 (0)
Q6) I have been given enough explanation about the help	Parent/Carer	75 (9)	25 (3)	0 (0)	0 (0)
available here	9-11	75 (3)	0 (0)	0 (0)	25 (1)
	12-18	72.22 (13)	22.22 (4)	5.56 (1)	0 (0)
Q7) I feel that the people who have seen me/my child are working	Parent/Carer	75 (9)	25 (3)	0 (0)	0 (0)
together to help with the problem(s)	9-11	75 (3)	0 (0)	0 (0)	25 (1)
	12-18	88.89 (16)	5.56 (1)	0 (0)	5.56 (1)
Q8) The facilities here are comfortable (e.g. waiting area)	Parent/Carer	83.33 (10)	8.33 (1)	0 (0)	8.33 (1)
	9-11	50 (2)	25 (1)	0 (0)	25 (1)
	12-18	77.78 (14)	22.22 (4)	0 (0)	0 (0)
Q9) The appointments are usually at a convenient time (e.g.	Parent/Carer	66.67 (8)	25 (3)	8.33 (1)	0 (0)
don't interfere with work, school)	9-11	75 (3)	0 (0)	0 (0)	25 (1)
	12-18	72.22 (13)	27.77 (3)	0 (0)	0 (0)
Q10) It is quite easy to get to the place where the	Parent/Carer	83.33 (10)	16.67 (2)	0 (0)	0 (0)
appointments are	9-11	25 (1)	50 (2)	0 (0)	25 (1)
	12-18	61.11 (11)	38.89 (7)	0 (0)	0 (0)
Q11) If a friend needed similar help, I would recommend that	Parent/Carer	91.67 (10)	8.33 (1)	0 (0)	0 (0)
ne or she come here	9-11	75 (3)	0 (0)	25 (1)	0 (0)
	12-18	66.67 (12)	33.33 (6)	0 (0)	0 (0)
Q12) Overall, the help I have received here is good	Parent/Carer	91.67 (10)	8.33 (1)	0 (0)	0 (0)
	9-11	100 (4)	0 (0)	0 (0)	0 (0)
	12-18	94.44 (17)	5.56 (1)	0 (0)	0 (0)



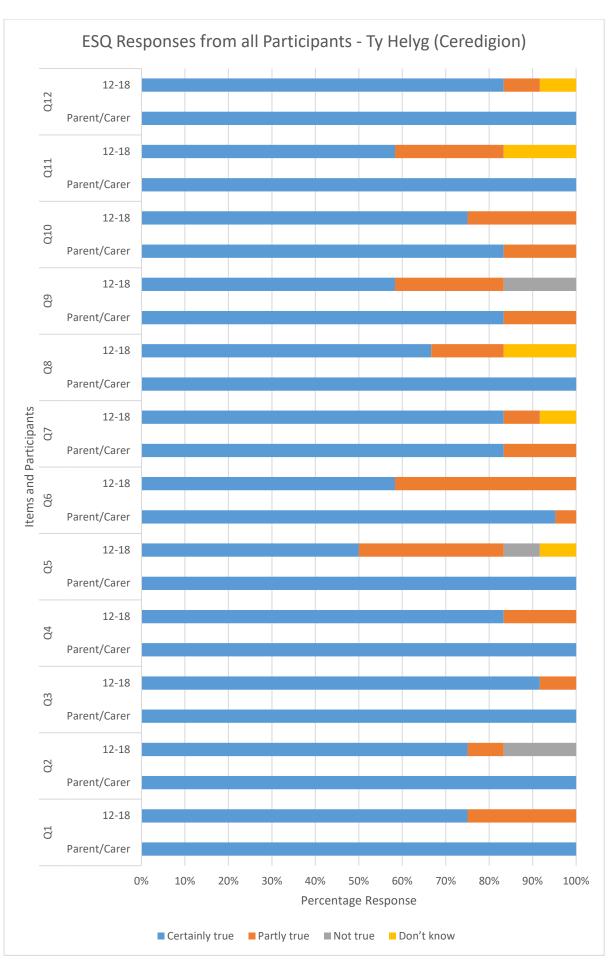
Appendix F: Table & Graph of ESQ Responses from Preseli Centre (Pembrokeshire)

lhous	Doutisinout		Percentage Re	esponse (n)	
Item	Participant	Certainly true	Partly true	Not true	Don't know
Q1) I feel that the people who have seen me/my child listened to me	Parent/Carer	90 (9)	10 (1)	0 (0)	0 (0)
	9-11	100 (2)	0 (0)	0 (0)	0 (0)
	12-18	94 (16)	6 (1)	0 (0)	0 (0)
(2) It was easy to talk to the people who have seen me/my child	Parent/Carer	80 (8)	10 (1)	0 (0)	10 (1)
	9-11	100 (2)	0 (0)	0 (0)	0 (0)
	12-18	71 (12)	24 (4)	6 (1)	0 (0)
Q3) I was treated well by the people who have seen me/my child	Parent/Carer	100 (10)	0 (0)	0 (0)	0 (0)
	9-11	100 (2)	0 (0)	0 (0)	0 (0)
	12-18	88 (15)	12 (2)	0 (0)	0 (0)
Q4) My views and worries were taken seriously	Parent/Carer	100 (10)	0 (0)	0 (0)	0 (0)
	9-11	100 (2)	0 (0)	0 (0)	0 (0)
	12-18	82 (14)	6 (1)	0 (0)	12 (2)
Q5) I feel the people here know how to help with the problem I	Parent/Carer	90 (9)	0 (0)	0 (0)	10 (1)
came for	9-11	100 (2)	0 (0)	0 (0)	0 (0)
	12-18	65(11)	29 (5)	0 (0)	6 (1)
Q6) I have been given enough explanation about the help	Parent/Carer	90 (9)	10 (1)	0 (0)	0 (0)
available here	9-11	100 (2)	0 (0)	0 (0)	0 (0)
	12-18	71 (12)	29 (5)	0 (0)	0 (0)
Q7) I feel that the people who have seen me/my child are working	Parent/Carer	90 (9)	10 (1)	0 (0)	0 (0)
together to help with the problem(s)	9-11	100 (2)	0 (0)	0 (0)	0 (0)
	12-18	82 (14)	18 (3)	0 (0)	0 (0)
Q8) The facilities here are comfortable (e.g. waiting area)	Parent/Carer	60 (6)	30 (3)	10 (1)	0 (0)
	9-11	100 (2)	0 (0)	0 (0)	0 (0)
	12-18	65 (11)	24 (4)	0 (0)	12 (2)
Q9) The appointments are usually at a convenient time (e.g.	Parent/Carer	70 (7)	20 (2)	10 (1)	0 (0)
don't interfere with work, school)	9-11	100 (2)	0 (0)	0 (0)	0 (0)
	12-18	65 (11)	29 (5)	6 (1)	0 (0)
Q10) It is quite easy to get to the place where the	Parent/Carer	70 (7)	20 (2)	10 (1)	0 (0)
appointments are	9-11	100 (2)	0 (0)	0 (0)	0 (0)
	12-18	59 (10)	29 (5)	12 (2)	0 (0)
Q11) If a friend needed similar help, I would recommend that	Parent/Carer	90 (9)	10 (1)	0 (0)	0 (0)
he or she come here	9-11	100 (2)	0 (0)	0 (0)	0 (0)
	12-18	47 (8)	41 (7)	0 (0)	12 (2)
Q12) Overall, the help I have received here is good	Parent/Carer	90 (9)	10 (1)	0 (0)	0 (0)
	9-11	100 (2)	0 (0)	0 (0)	0 (0)
	12-18	88 (15)	12 (2)	0 (0)	0 (0)



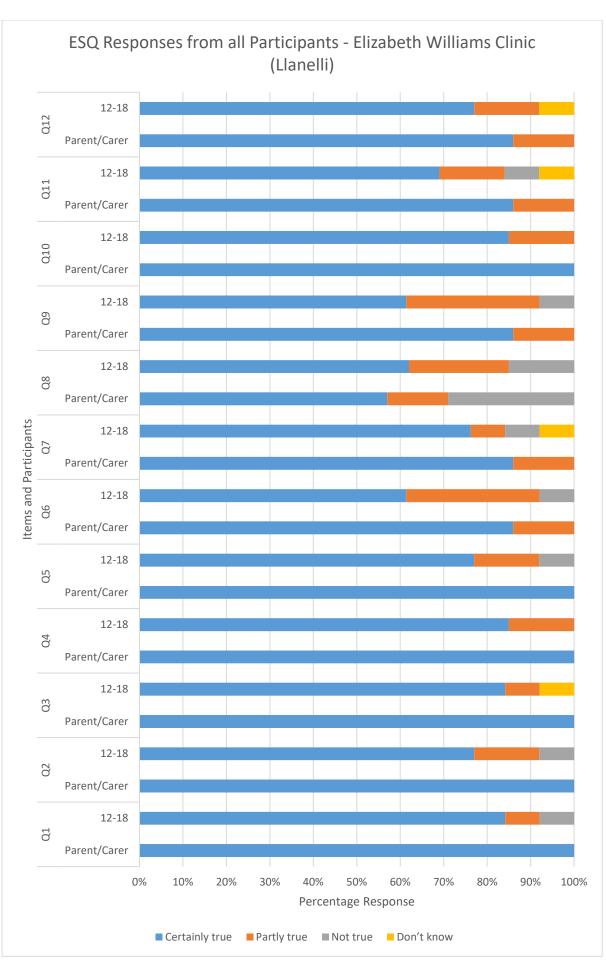
Appendix G: Table & Graph of ESQ Responses from Ty Helyg (Ceredigion)

Have	Double in out		Percentage Re	esponse (n)	
Item	Participant	Certainly true	Partly true	Not true	Don't know
Q1) I feel that the people who have seen me/my child listened to me	Parent/Carer	100 (6)	0 (0)	0 (0)	0 (0)
	9-11	0 (0)	0 (0)	0 (0)	0 (0)
	12-18	75 (9)	25 (3)	0 (0)	0 (0)
2) It was easy to talk to the people who have seen me/my child	Parent/Carer	100 (6)	0 (0)	0 (0)	0 (0)
	9-11	0 (0)	0 (0)	0 (0)	0 (0)
	12-18	75 (9)	8.33 (1)	16.67 (2)	0 (0)
Q3) I was treated well by the people who have seen me/my child	Parent/Carer	100 (6)	0 (0)	0 (0)	0 (0)
	9-11	0 (0)	0 (0)	0 (0)	0 (0)
	12-18	91.67 (11)	8.33 (1)	0 (0)	0 (0)
Q4) My views and worries were taken seriously	Parent/Carer	100 (6)	0 (0)	0 (0)	0 (0)
	9-11	0 (0)	0 (0)	0 (0)	0 (0)
	12-18	83.33 (10)	16.67 (2)	0 (0)	0 (0)
Q5) I feel the people here know how to help with the problem I	Parent/Carer	100 (6)	0 (0)	0 (0)	0 (0)
came for	9-11	0 (0)	0 (0)	0 (0)	0 (0)
	12-18	50 (6)	33.33 (4)	8.33 (1)	8.33 (1)
Q6) I have been given enough explanation about the help	Parent/Carer	66.67 (4)	3.33 (2)	0 (0)	0 (0)
available here	9-11	0 (0)	0 (0)	0 (0)	0 (0)
	12-18	58.33 (7)	41.67 (5)	0 (0)	0 (0)
Q7) I feel that the people who have seen me/my child are working	Parent/Carer	83.33 (5)	16.67 (1)	0 (0)	0 (0)
together to help with the problem(s)	9-11	0 (0)	0 (0)	0 (0)	0 (0)
	12-18	83.33 (10)	8.33 (1)	0 (0)	8.33 (1)
Q8) The facilities here are comfortable (e.g. waiting area)	Parent/Carer	100 (6)	0 (0)	0 (0)	0 (0)
	9-11	0 (0)	0 (0)	0 (0)	0 (0)
	12-18	66.67 (8)	16.67 (2)	0 (0)	16.67 (2)
Q9) The appointments are usually at a convenient time (e.g.	Parent/Carer	83.33 (5)	16.67 (1)	0 (0)	0 (0)
don't interfere with work, school)	9-11	0 (0)	0 (0)	0 (0)	0 (0)
	12-18	58.33 (7)	25 (3)	16.67 (2)	0 (0)
Q10) It is quite easy to get to the place where the	Parent/Carer	83.33 (5)	16.67 (1)	0 (0)	0 (0)
appointments are	9-11	0 (0)	0 (0)	0 (0)	0 (0)
	12-18	75 (9)	25 (3)	0 (0)	0 (0)
Q11) If a friend needed similar help, I would recommend that	Parent/Carer	100 (6)	0 (0)	0 (0)	0 (0)
ne or she come here	9-11	0 (0)	0 (0)	0 (0)	0 (0)
	12-18	58.33 (7)	25 (3)	0 (0)	16.67 (2)
Q12) Overall, the help I have received here is good	Parent/Carer	100 (6)	0 (0)	0 (0)	0 (0)
	9-11	0 (0)	0 (0)	0 (0)	0 (0)
	12-18	83.33 (10)	8.33 (1)	0 (0)	8.33 (1)



Appendix H: Table & Graph of ESQ Responses from Elizabeth Williams Clinic (Llanelli)

House	Dautisiaaut		Percentage Re	sponse (n)			
Item	Participant	Certainly true	Partly true	Not true	Don't know		
Q1) I feel that the people who have seen me/my child listened to me	Parent/Carer	100 (7)	0 (0)	0 (0)	0 (0)		
	9-11	0 (0)	0 (0)	0 (0)	0(0)		
	12-18	85 (11)	8 (1)	8 (1)	0 (0)		
Q2) It was easy to talk to the people who have seen me/my child	Parent/Carer	100 (7)	0 (0)	0 (0)	0 (0)		
	9-11	0 (0)	0 (0)	0 (0)	0(0)		
	12-18	77 (10)	15 (2)	8 (1)	0 (0)		
Q3) I was treated well by the people who have seen me/my child	Parent/Carer	100 (7)	0 (0)	0 (0)	0 (0)		
	9-11	0 (0)	0 (0)	0 (0)	0(0)		
	12-18	85 (11)	8 (1)	0 (0)	8 (1)		
Q4) My views and worries were taken seriously	Parent/Carer	100 (7)	0 (0)	0 (0)	0 (0)		
	9-11	0 (0)	0 (0)	0 (0)	0(0)		
	12-18	85 (11)	15 (2)	0 (0)	0 (0)		
Q5) I feel the people here know how to help with the problem I	Parent/Carer	100 (7)	0 (0)	0 (0)	0 (0)		
came for	9-11	0 (0)	0 (0)	0 (0)	0(0)		
	12-18	77 (10)	15 2)	8 (1)	0 (0)		
Q6) I have been given enough explanation about the help	Parent/Carer	86 (6)	14 (1)	0 (0)	0 (0)		
available here	9-11	0 (0)	0 (0)	0 (0)	0(0)		
	12-18	62 (8)	31 (4)	8 (1)	0 (0)		
Q7) I feel that the people who have seen me/my child are working	Parent/Carer	86 (6)	14 (1)	0 (0)	0 (0)		
together to help with the problem(s)	9-11	0 (0)	0 (0)	0 (0)	0(0)		
	12-18	77 (10)	8 (1)	8 (1)	8 (1)		
Q8) The facilities here are comfortable (e.g. waiting area)	Parent/Carer	57 (4)	14 (1)	29 (2)	0 (0)		
	9-11	0 (0)	0 (0)	0 (0)	0(0)		
	12-18	62 (8)	23 (3)	15 (2)	0 (0)		
Q9) The appointments are usually at a convenient time (e.g.	Parent/Carer	86 (6)	14 (1)	0 (0)	0 (0)		
don't interfere with work, school)	9-11	0 (0)	0 (0)	0 (0)	0(0)		
	12-18	62 (8)	31 (4)	8 (1)	0 (0)		
Q10) It is quite easy to get to the place where the	Parent/Carer	100 (7)	0 (0)	0 (0)	0 (0)		
appointments are	9-11	0 (0)	0 (0)	0 (0)	0(0)		
	12-18	85 (11)	15 (2)	0 (0)	0 (0)		
Q11) If a friend needed similar help, I would recommend that	Parent/Carer	86 (6)	14 (1)	0 (0)	0 (0)		
he or she come here	9-11	0 (0)	0 (0)	0 (0)	0(0)		
	12-18	69 (9)	15 (2)	8 (1)	8 (1)		
Q12) Overall, the help I have received here is good	Parent/Carer	86 (6)	14 (1)	0 (0)	0 (0)		
	9-11	0 (0)	0 (0)	0 (0)	0(0)		
	12-18	77 (10)	15 (2)	0 (0)	8 (1)		



Appendix I: Table of Qualitative ESQ Responses from Canolfan Gwili (Carmarthen)

THEMES	SUB-THEMES						
1) The	Staff-Patient Relationship	Commu	nication	Interv	vention		
Therapeutic Experience	"Approachable, flexible staff." "my son felt comfortable and at ease" "[My child] actually really enjoys his sessions." "[My child] is relaxed when coming here. Really enjoys it." "I can't praise [the staff] enough!" "[My child] feels relaxedopens up to [staff] who's very supportive and warm to the both of us" "we could take our concerns and worries somewhere." "Really helpful." "Made to feel comfortable and at ease." "[The staff] have been fantastic and understand my [child] and supporting me." "[My child is] getting much needed support by a professional [my child] has grown to trust and look forward to seeing. [My child] looks forward to coming every week." "[The staff] has been fantastic and very supportive to our child (and to us as parents) during this difficult time." "[My child] is happy to attend." "I like to see [member of staff]." "[The staff] tried their best to help." "[The staff] understand me." "Reassuring." "I feel like it's really helping me and it's easy for me to talk about my issues."	Positive "Calls are returned promptly." "[My child was] was listened to" "It's very rare for [my child] to talk to people, it's nice to see." "[My child] finds it hard to communicatebut she opens up" "The people - Easy to talk to" "Excellent communication Conversations aren't rushed." "Finally feel listened to" "They listened to my worries" "I've been listened to my problems." "I was listened to and wasn't interrupted etc." "I get to talk about stuff here that I can't usually talk about anywhere else."# "People tried to listen."	Negative "We felt partly accused at times of what has happened to [my child] - not helpful." "Important to receive a written plan in regards to medical needs" "more listening from the start"	Positive "Informative and clear, good positive goals/plans in place." "really helped with issues and improved our lives." "Get to play." "I can take a break." "[The staff] helped me understand situations going and ways to deal with them." "Being able to realise the situation I'm" "It helped me with some of my issues." "helped me understand my issues." "I'm getting somewhere for the first time in a while"	Negative "I just have a few concerns as [my child] is still having issues emotionally at home" "Times I [parent/carer] still don't know where to turn or how to deal with [my child's mental health]." "Family therapyneed support." "Getting some sort of therapy before trying to physically treat me." "Blood tests [were] frequent."		
2) The	Positive Experiences of the Service	Negative Experien	ces of the Service	Suggestions fo	or Improvement		
Experience of the Overall service	"excellent care provided." "Promptness of help" "First class" "Friendly yet professional." "Gratefulfor all the help and support myself and my [child] have received." "Excellent, person-centred care!" "[The service] always want the best for me and want to help me get better and happier." "That the people that are working with me are very kind and helpful." "everyone here is really kind and are very helpful people"	d		ole help."			
	Positive Therapeutic Environment			Suggestions for the Im			

3) The	"Comfortable."	"Really hard to park."	"There needs to be allocated parents parking"
Therapeutic	"Calm space. No noise, pretty large room with enough	"Parking"	
Environment	tools to do what I might like to do."	"The parking to get here is almost impossible."	

Appendix J: Table of Qualitative ESQ Responses from Preseli Centre (Pembrokeshire)

THEMES	SUB-THEMES							
1) The	Staff-Patient Relationship	Commu	nication	Intervention				
Therapeutic Experience	"I was taken seriously" "my problems were taken seriously." "Seeing the same people who know the [patient's] background at each appointment" "A feeling of genuine concern and a sincere desire to help the situation." "[The staff] kept trying to help." "Peopleunderstand and care." "They [the staff] are very kind." "Wework withvery empathetic people." "Counsellor is very patient." "[The staff] is very caring and approachable for my [child]." "The person I am working with is very approachable and I feel like I can relate." "[My child] feels comfortable talking to [staff]." "[My child] feels comfortable around [staff]." "It allowed me to feel comfortable with talking about my feelings." "Friendly"	Positive "[I was] listened to." "I felt listened to" "[Feeling] Listened to" "Feeling heard" "Clinicians have listened" "They listened that I wanted additional help" "I was heard." "I feel they could say anything without judgement" "Having someone to talk to who will listen" "to be able to talk to somebody and know what they are talking about." "[Staff] is easy to talk to." "Helpful feedback." "[Staff] have fed back to me after discussions amongst the team" "We were able to talk through an unhelpful appointment and resolve it." "Regular meetings/video calls were very helpful"	Negative N/A	Positive "I'm getting help with my issues" "[The intervention is] Specialised enough for my problems." "[The staff] took the time to see what the best way was to help me" "[The staff] gave me advice on how to deal with my problems. It's useful." "[Helpful] advice." "Getting advice." "It helped me calm down and think of ways to calm myself down." "Willing to try various methods of CBT [Cognitive Behavioural Therapy]" "Making progress" "[Clinicians] have acted on the concerns I had." "Dietician sessions were good, helped a lot." "Limade my life so much easier for both me and [my child]." "Very obvious progression since taking part in CBT/integrated therapy with regular sessions." "[Therapy has] helped my daughter massively"	Negative N/A			
2) The	Positive Experiences of the Service	Negative Experier	nces of the Service	Suggestions for I	mprovement			
Experience of the Overall service	"This is a super good service" "It is amazing" "How fast they were on to it [providing support]." "The positive result of the care package provided by the service." "non-judgemental service."	"at the startthe sessions were "It was confusing [when] we were "There was a period where the ap felt a bit lost at this time." "Long wait to get CBT/integrated	e crossing within the services." opointments were very sparse, we	N/A				
	Positive Therapeutic Environment	Challenges to the The	rapeutic Environment	Suggestions for the Impr	ovement of Facilities			

3) The "The chairs are like soft sand." "The rooms are very clinical and	cold." "[To have] Better reception on Attend Anywhere video calls."
Therapeutic "I like it here."	"Decorate the room."
Environment	"[The room] would be less intimidating if they were more cosy
	and inviting and welcoming"

Appendix K: Table of Qualitative ESQ Responses from Ty Helyg (Ceredigion)

THEMES	SUB-THEMES SUB-THEMES				
1) The	Staff-Patient Relationship	Communication		Intervention	
Therapeutic Experience	"Everyone was approachable and caring offering amazing support. We didn't feel alone." "Only been twice but supported." "People understood. It was really good that people understood." "the staff want the best possible outcome for my child." "everyone has been so helpful feels like they've become friends." "Thank everybody for the support" "I've just been really impressed with the care my child has received, thanks." "People were nice." "They take my problems and try to understand me the best they can" "Everyone took part as a team to help me get better." "They offered me a lot of support to help my recovery." "[The staff] did not rush the process [of the intervention]." "they are reassuring."	Positive "When times were hard, there was always somebody to turn to and listen, a voice of reassurance." "The contact with the psychiatrist is really tricky" "I could talk to people with experience" "They listened" "I was able to express my worries and concerns." "[The staff] communicated with me to checkand offered to listen to my input." "There was always someone there to talk."	Negative "Less talking about past when it's not needed." "It's not as easy as 'just faking'."	Positive "The people seeing me taught me how to cope with my emotions." "The meal plan." "The fact that I was given skills/tools to deal with my struggles and anxieties." "[The staff] helped me emotionally." "It has helped me get my life back together." "They helped a lot more than most other people would"	Negative "Focus on how to help in the future." "Sometimes I feel like sessions can be a little condescending or that I'm being told things I already know with little direction." "Sometimes I feel like we only focus on what I've been admitted for & not any further mental health issues I could be struggling with."
2) The	Positive Experiences of the Service	Negative Experiences of the Service		Suggestions for Improvement	
Experience of the Overall service	"Our referral didn't take too long." "CAMHS went out of their way to see our daughter outside of her appointments and at different venues." "I feel that all available resources are being provided." "It has been excellent" "They provided medication straight away." "I appreciate the service I have received."	"It took so long to get supportwe were on a waiting list" "it's been difficult to access medication" "[Travelling between localities] proved to be unsettling for the family and even as an individual." "How they only gave help to those that they thought needed itHave to be very mentally ill to be accepted into facilities by their standards of mental illness."		"In the beginning it would have been good for us as parents to have a one to one session for helpand answer questions which we had." "At the beginning we were seen by Carmarthenthen Aberystwyth. It would have been better to have consistency from the very beginning."	
3) The	Positive Therapeutic Environment	Challenges to the Therapeutic Environment		Suggestions for the Improvement of Facilities	
Therapeutic Environment	N/A	"It was quite hard for [the staff] to hear me over zoom so it was hard for him to help me."		N/A	

Appendix L: Table of Qualitative ESQ Responses from Elizabeth Williams Clinic (Llanelli)

THEMES	SUB-THEMES					
1) The	Staff-Patient Relationship	Communication	Intervention			
Therapeutic Experience	"All staff are really kind and helpful." "My child feels really supported and I feel they are safe in their care." "Both the counsellor and the home visitor officers have been amazing." "The home visitors and counsellor have been very good and understanding." "Very understanding of our needs and concerns" "It was a collaboration of positive support, which made [my child] feel reassured" "I enjoyed working with [staff]" "I am made to feel comfortable at all the time." "I found that it was easy to talk openly not to be judged" "It was personaland made me feel at ease." "All the professionals were really friendly, comforting and motivating"	Positive "Staff are quick to respond to me when I call." "The person we sawlistened" "excellent listening skills." "They listen to what I have to say." "That they listened to me and understand me." "They listened and take concerns seriously." "The counsellors listening skills and ability to take the right information out of what I saying." "Everything I said was taken into consideration." "The explanation of how they can help." "[I was] given a clear view of the help I need."	Positive "[Staff] gave us helpful advice going forward." "Gave me good ways to cope." "and supportive to my needs." "push me forward in my recovery and to challenge myself." "It helped me going forward."			
2) The	Positive Experiences of the Service	Negative Experiences of the Service	ce Suggestions for Improvement			
Experience of the Overall service	"Very good service." "They saw my child quickly." "It was a thorough investigation into my [child's] condition." "The assessment was good." "Fantastic service. I am happy with everything." "The amount of support and the extent that the service would go towas really beneficial and enjoyable."	N/A	"More needs to be addressed on autism." "They should cover more illnesses."			
3) The	Positive Therapeutic Environment	Challenges to the Therapeutic Environ	ment Suggestions for the Improvement of Facilities			
Therapeutic Environment	"A safe and anonymous environment." "I feel it is a safe environment."	"The rooms are old and need updating." "[The rooms] Can be very hot." "No private waiting room." "The rooms are old and need updating. Can be very private waiting room. The whole building does not Room was horrible, not a nice feeling. Waiting are horrible and did not look private - we weren't allow to COVID."	r feel relaxing. a looked			