CAMHS
RC PSYCH
ROYAL COLLEGE OF PSYCHIATRISTS
Welcome to
QNIC COVID-19 Open Discussion Forum:
Psychological professionals working on inpatient adolescent mental health wards
Thursday 23 July 2020
@RCPsych #QNIC
COLLEGE CENTRE FOR QUALITY IMPROVEMENT

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Guidance for psychological professionals on inpatient mental health wards during the COVID-19 pandemic

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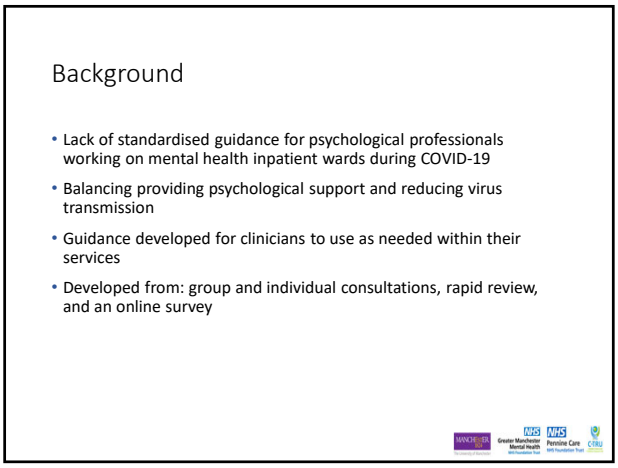
Background
Lack of standardised guidance for psychological professionals working on mental health inpatient wards during COVID-19
Balancing providing psychological support and reducing virus transmission
Guidance developed for clinicians to use as needed within their services
Developed from: group and individual consultations, rapid review, and an online survey

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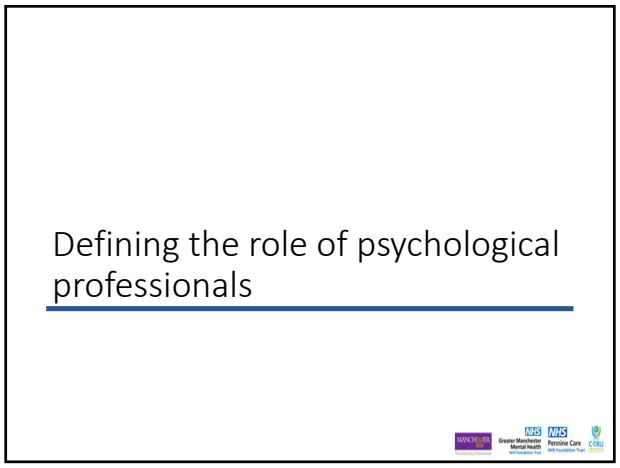
Defining the role of psychological professionals

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Different ways of working

Psychological professionals are essential to the ward and where possible should remain present in some capacity. Depending on ward-specific factors, their work may need to be adapted.

- Working remotely into all wards
- Working physically on one ward and remotely into others
- Splitting the psychology team to work one member per ward
- Working remotely the majority of the time, with short periods spent physically on ward.
- Travelling across wards in one direction in a day i.e. from low-risk wards to high-risk

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Face-to-face work

Psychological professionals highlighted that remaining physically present on the wards, at least some of the time, was considered essential to provide psychological input at all levels of the system.

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Face-to-face work

Benefits:

- More available to staff and patients
- Able to contribute to informal check-in
- Improved relations with ward staff and service users
- Reduces risk of cross-contamination across wards.

Challenges:

- Infection control: using PPE, room sizes
- If only working on one ward: ethical considerations over unequal access to psychology
- Service user access to private space for remote therapy
- Psychology staffing resource

Considerations:

- Additional support: for service users without leave or those shielding
- Ward staff providing psychologically-informed interventions
- Access to IT systems

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Remote working

In other circumstances, psychological professionals weighing up the possible risks to service users, staff and themselves, may deem remote working to be a safer option during the COVID-19 outbreak.

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Remote working

Challenges of remote working

- Feeling disconnected or forgotten
- Receiving fewer referrals
- Harder to provide informal support
- Hard to continue their usual psychological activities.

Benefits of remote working

- Virtual ward meetings benefitted service user wellbeing
- Attending meetings remotely reduced the number of people in a contained space.
- Able to attend more multidisciplinary meetings when using remote channels
- Clinicians do not have to wear PPE for remote calls

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Support provision

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Support for staff

Psychological professionals were likely to have experienced increased requests and opportunities to provide interventions to support the wellbeing of ward staff.

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Support for ward staff

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Support for ward staff

Wobble Rooms and NOvid Rooms

Used as a break from the ward environment.

Rooms included:
- snacks
- soft furnishings
- magazines
- music
- staff support phone numbers
- No talking about COVID

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Support for ward staff

Self-Help Resources

These include:
- self-care resources
- 'going home checklists'

Can be shared with staff in well-being packs or via email

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Support for ward staff

Walk and talk

Taking staff off the ward to informally talk about anything that was concerning the staff member (work and personal related)

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Support for ward staff

Reflective Practice

Offer reflective practice to ward managers and also non-clinical staff

Can be held off the ward, or outside in open-air spaces such as gardens

Needs to be consistent but also flexible

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Support for ward staff

20-Minute Care Spaces

Based on Andy Bradley's work on Compassion Circles.

They are spaces to provide self-care in groups of up to ten.

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Support for service users

Psychological professionals were likely to have experienced increased requests and opportunities to provide interventions to support the wellbeing of service users.

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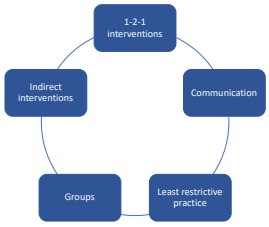
Support for service users



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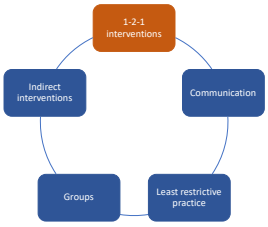
Support for service users



1-2-1 interventions

Some service users started or continued psychological therapy during COVID-19

Informal interventions, such as walk and talk

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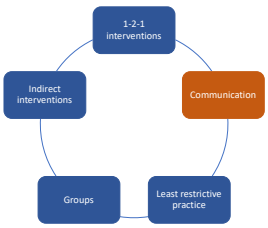
Support for service users



Communication

Provide clear and simple information about the COVID-19:

- ward-based changes
- government guidance level and updates about restrictions in the community

Communicated through:

- Regular meetings with staff
- Question and answer sessions

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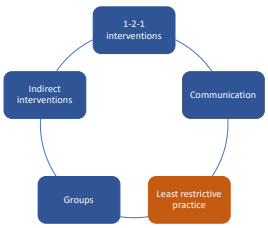
Support for service users



Least restrictive practice

The role of psychological professionals:

- Support ward staff to use least restrictive practice
- Supporting staff through formulation work
- Encouraging innovative ideas to engage service users, for example, running coping groups to develop emotional regulation skills

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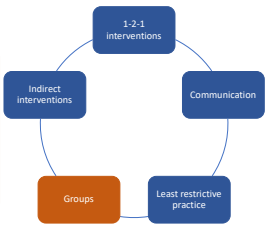
Support for service users

Groups

- Some psychologists offered brief 1-2-1 sessions with service users who were unable to attend
- Group topics respond to ward needs
- Can be outdoor spaces
- Groups were valued by service users as a space to connect with others and to discuss specific concerns relating to COVID-19



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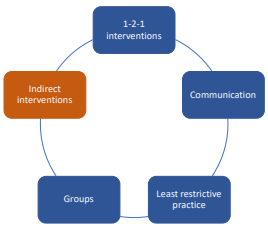
Support for service users

Indirect interventions

- Facilitating team formulation meetings, both virtually and face-to-face
- Supporting staff to develop COVID-19/isolation-specific care plans.
- Supervising staff to deliver psychosocial interventions.
- Increasing psychologist contact with families/carers and supporting service users to contact their loved ones
- Liaison with community psychology teams to support discharge planning.



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Support for family and carers

Psychological professionals reported providing increased support to the families and carers of service users, due to COVID-19 related restrictions on wards such as stopping visits or service user leave.

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Support for families and carers

- Increasing frequency of carer contact with professionals to provide updates
- Facilitating increased contact between service users and their families via video or phone.
- Providing families with information (leaflets or letters) outlining current restrictions on wards and the rationale for these measures.
- Providing psychological support to families
- Creating bereavement packs for carers

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Support for psychological professionals

While demand for support from psychological professionals increases, it is important to consider how they themselves are being supported to reduce the likelihood of exhaustion and burnout.

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Support for psychological professionals

- Connecting with other psychological professionals
- Involving community psychological professionals in these meetings to provide additional support
- Increasing the frequency of clinical supervision
- Accessing and contributing to online webinars on relevant topics
- Facilitating and partaking in remote CPD days with other psychological professionals.

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Access to digital technology

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To support staff

Psychological staff require rapid access to appropriate technology, provided by their Trust, in order to continue in their multifaceted role as a psychologist, and to support the wellbeing of ward staff.

- Many felt remote attendance at meetings had worked well and would like it to continue
  - Increases attendance to group meetings, and reduces travel time and costs.
- Established a deeper relationship between inpatient and community teams
- Remote meetings allowed care co-ordinators and other clinicians to attend when they might not usually

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To support family and carers

Psychological professionals reported benefits of providing service users with technology to support their engagement with psychological professionals, other staff involved in their care and families/carers.

- Technology facilitated interaction with family and friends, particularly when leave and visits were restricted
- Patients could contact psychological professional more frequently
- More structured remote psychological therapy meant reduced anxiety over virus transmission, and combats challenges of PPE
- Service users engaged with professionals from outside the ward, promoting safe and timely discharges

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Key messages

- Each psychologist should make a decision whether to work remotely/on ward themselves (with senior support) factoring in ward and own personal circumstances
- We advocate at least some direct work on ward to maintain finger on the pulse to support psychological ways of thinking
- Stress has been placed on psychologists to be innovative and be 'heroes'
  - Remember that support is crucial for psychologists
- They should look to increase staff and patient support through informal channels where possible
- Patient groups are considered important and if not already established would be a good way for peer support – outdoor spaces or large space indoors
- Access to good technology is fundamental
  - Enforced use of technology may change ways of working going forward

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www.khub.net

Sign-up and access the following groups for more information:

- COVID-19 Mental Health Improvement Network
- Quality Network for Inpatient CAMHS (QNIC)
- Quality Network for Community CAMHS (QNCC)

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Thank you!

If you are interested in presenting a webinar for QNIC, please email us at QNIC@rcpsych.ac.uk

Access this session here: https://www.rcpsych.ac.uk/improving-care/ccqi/quality-networks-accreditation/child-adolescent-inpatient-services

All questions will be added to the dedicated QNIC KnowledgeHub forum

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