

# **Covid-19 Guidance into practice across a forensic system keeping service users safe in the current crisis**



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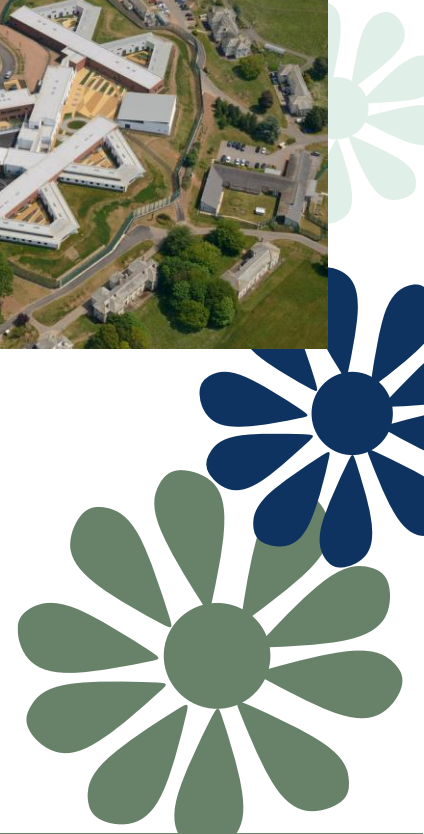
# Who are we?

## Devon Partnership NHS Trust – Secure Services

- 60 medium secure beds
- 29 low secure beds
- 21 open beds (5 suspended)
  
- Community forensic team
- Pathfinder team
- Intellectual learning disability community forensic team
- Offender personality disorder consultation service
- Devon prison cluster (3 prisons)



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# What I wish I had known 8 weeks ago...



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# Pre Covid-19 directorate infrastructure



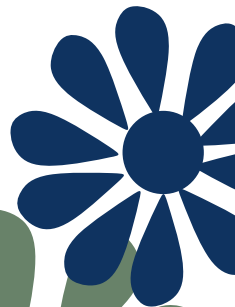
Thrice weekly  
central clinical huddle

Weekly medical  
meeting

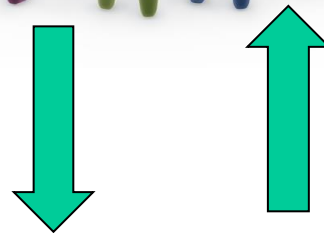


Multiple patient  
engagement meetings

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# New Covid-19 infrastructure



Ward staff



Patients and families



One email box



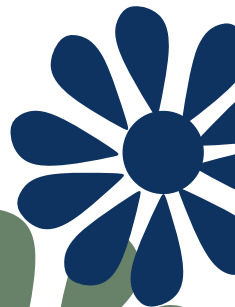
# Basic principles of maintaining Covid-19 threat

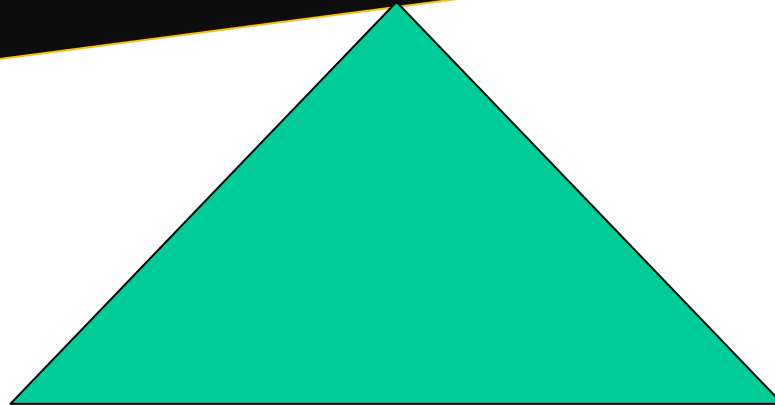
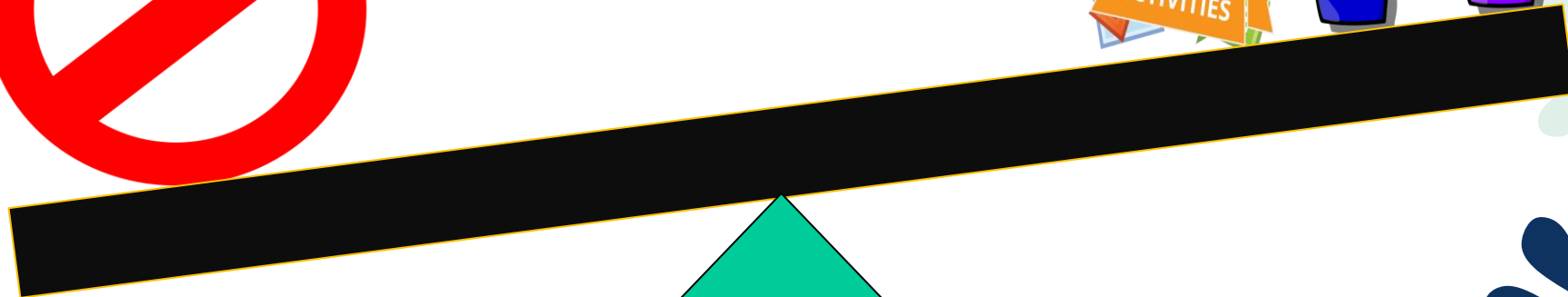
## Prevention



## Protect

- Isolation developments
- Prioritisation of service
- Cohorting
- Patient flow





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# Building isolation unit

1. Structure (10 days)
2. Procedures
3. Stock
4. Staff
5. Patient mobilisation
6. Importance of established relationships





# Staff well-being

## Job planning leave

## Health well being lead

## Hydration – donning and doffing station



# Community Teams Background



Devon Partnership  
NHS Trust



Short of psychiatrists

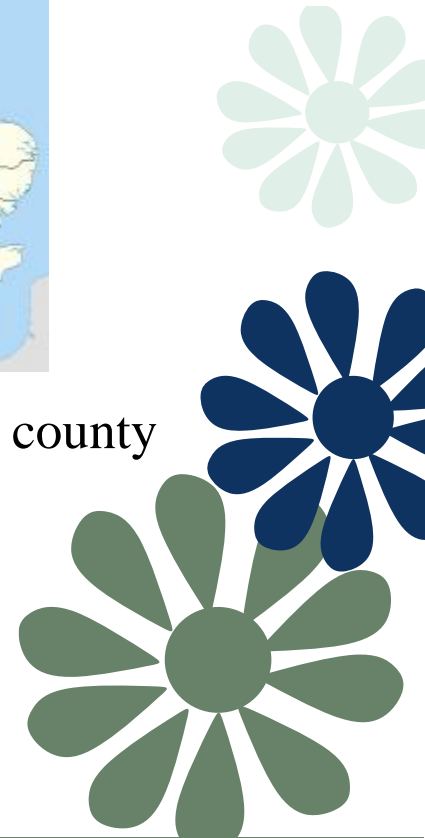


3<sup>rd</sup> largest county



Relatively new team learning to work together

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# New Infrastructure



Remote prison assessments



Regular contact with providers



Continued team development

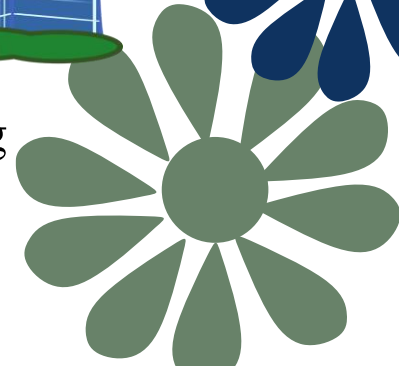
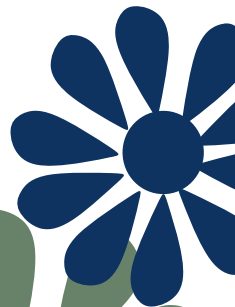


VS



Managing staff wellbeing

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# IMPROVING MENTAL HEALTH SAFETY

COVID-19 mental health  
improvement network



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# OUR RAINBOW WALL



- 1. Create a collection of all the fantastic work and changes everyone has contributed to
- 2. Email it/share it with the team and ask them to add to it
- 3. Find a big blank wall to create your rainbow
- 4. Gather whatever bits of paper, scrap and crafts you can
- 5. Just start to create your rainbow wall
- 6. Keep adding all the greatness you're doing!
- 7. No creativity needed - just collect everything to always remember what you achieved
- 8. Tweet your rainbow wall so others can be inspired by your changes



## How Are You Doing Hubs

Steve Andrews, Associate Director for Leadership & Change from East & North Yorkshire NHS Trust shares how the How Are You Doing team are helping managers and leaders support staff.

Here, Steve shares 5 questions that are generating supportive discussions in the Trust. This support is in addition to a physical support sheet (below) which includes an appreciation wall of thank you cards and resources for staff, a rest area and someone from the How Are You Doing team present to support staff throughout the day. Steve is happy to be contacted with any questions on [steve.andrews@nhs.uk](mailto:steve.andrews@nhs.uk).

To learn about other change ideas being tested and discuss with others, join our COVID-19 Mental Health Improvement Network.



### 1. How are you doing?

We ask this all the time, it's almost a standard greeting. Most people respond with 'fine thanks, how are you?' This exchange is a chance for you to share something with them, to be honest, and demonstrate who you are, what you are engaged in and that you care.

### 2. How are your colleagues doing?

By asking this you offer colleagues an opportunity to share their experiences of others, to offer a wider perspective on the great things the team is doing and the barriers they are bumping into. Somewhere in this second question, answers to the first question might emerge.

### 3. How are your colleagues?

This question allows people to offer a wider perspective. The nurse might offer insight into how the doctors are coping. Ward A might share a story about Ward B. At this time useful exchanges are taking place, with both parties showing an interest and accepting their role. In wider groups of people.

### 4. What can you do to help them?

When events are urgent and fast, it is helpful if people feel they can act, be responsible for events, have some things they can control, have responsibilities and are supported in taking action. This question creates the opportunity to establish a climate where people feel empowered. Empowered to support others but also to take on and own actions. Here they can become creative in looking after each other and they will grow confident in taking action.

### 5. What can I/we do to help you?

You care for your people and your colleagues - this questions tangibly demonstrates that. Actions may emerge but you may also get some feedback. Be honest in this moment because, just like them, some things you have control of and some things you don't. If you leave the exchange with an action - keep your promises and communicate back. If you do, they will know that you care, have their best interest at heart, are dependable, reliable, they aren't alone - you have their back.



All mental health teams are making rapid changes in response to the continually changing situation of COVID-19 and finding ways to support each other.

The Mental Health Safety Improvement Team would like to collate these changes so we can share them as widely as possible to help teams learn from and inspire each other.

If you've made changes to the way you provide care or have a question for others, you can reach out in the following ways:

- Signing up to our COVID-19 Mental Health Improvement Network. Here you will also be able to post questions and have discussions with others.
- Sharing your change idea on Twitter using the hashtag #MHSIPC19
- Emailing covid19network@pcpsych.ac.uk and one of the team will get in touch with you.

Here are some examples of change ideas we've seen already.



Over the next few days @pcpsych will be implementing a new need & organisation role #MHSIPC19. Highly visible colleagues like @RachaelCorser & @CarolMunford are a team of volunteer colleagues.

1. Safe donning & doffing 2. Information
3. Resource & support
4. Human factors & fatigue



Thank you @BHPFT NHS for our treats to keep us going...much appreciated by the Team at Seward Lodge. Proud to be part of this wonderful team pulling together to keep Service Users safe and calm at this difficult time.



Level 7 staff taking a brief pause in the HowAreYouDoing Hub @MHSIPC19 they picked up information on looking after yourself and others - 5 questions - every leader - every day - every person @RachaelCorser @Carolebyd @CarolMunford @RachaelCorser @DeeptaAustin



Leanne Young, Ward Manager on Laurel Ward, Greater Manchester Mental Health NHS FT shares an idea on helping patients communicate with their carers and relatives during COVID-19. To learn about other change ideas being tested and discuss with others, join our COVID-19 Mental Health Improvement Network.

### 1. What problem were you trying to solve?

Due to COVID-19 and visiting restrictions, patients have been limited with the communication they have had with the carers and relatives. They have found it difficult to adapt to their loved ones not being able to visit. Therefore we tried to explore other lines of communication.

### 2. What did you do?

We had a mutual help meeting to discuss how we can support our patients, then we designed some cards and wrote letters to our loved ones. Staff supported patients to post the letters with stamps previously purchased. We maintained government guidelines on social distancing by ensuring we were all two seats apart whilst the activity took place, hands were washed before and after the activity.



### 3. How did it go?

This lifted spirits and made both staff and patients smile and I am sure when the carers receive their cards they will be smiling also. We incorporated the Easter theme into this activity so patients could send well wishes to loved ones for Easter.

### 4. What was the main learning from your intervention?

On Laurel Ward we learnt that although restrictions are in place it is so important to maintain communication and keep connected and this was great way to do that. We also learnt the value of sending well wishes to others in this difficult time. This is something we will continue to offer going forward.

## Virtual Ward Reviews

Dr Gurprit Pannu, Consultant Psychiatrist from Sussex Partnership NHS Foundation Trust, shares tips on how to use Attend Anywhere for virtual ward reviews.

To learn about other change ideas being tested and discuss with others, join our COVID-19 Mental Health Improvement Network.



### 1. What were you trying to solve?

Carrying out ward reviews remotely so inpatient Doctors who are vulnerable or self-isolating can still attend.

### 2. What did you do?

We used Attend Anywhere (AA) as a virtual consultation package and set up a virtual waiting room for each ward. Vulnerable or self isolating inpatient doctors were prioritised for AA licences and online training was provided daily.

### To set up

- The ward review room needed setting up using a desktop with a suitable screen with webcam and Jabra microphone/speaker. A Jabra picks up and transmits high-quality sound when there are multiple people in a room and it is essential to be able to hear the patient if they are not sat next to the computer/laptop.
- It is essential that patients can hear clearly what the Doctor is saying.
- We ensured there was a suitable seating arrangement in the room.
- On the Doctor's side - they can use their usual laptop. Ideally with a Jabra microphone/speaker but it is less critical on this side of the consultation.

### On the day

- One member of the ward team needs to log on to the ward-side set up.
- Doctor sets up AA on their laptop and sends a link to the ward team member by email.
- Ward team member clicks the link and enters the waiting room, the Doctor can then let them in and the set up is ready for seeing patients.

This is very straightforward, but might be worth setting up 5 minutes early, as if you use the Jabra you also need to check the sound is coming out of this and not the computer's speaker. There is a 'cueheel' for settings on the screen for Attend Anywhere in which you can change where the sound comes from.

### 3. How did it go?

- Some adjustments needed in settings when using Jabra speakers.
- Patient needs to be advised of set-up prior to coming in.
- Usually we have at least 2 staff in the interview, but as 1 staff is now attending from home, we need to ensure enough staff in the room for any safety/risk purposes. Most patients have been happy with set up.
- One patient sat off camera and then left early due to feelings of paranoia.
- We found that you can shrink the size of the AA window, so you can also see the electronic patient record at the same time.

### 4. What did you learn and would like to offer as advice to others?

- You need a few people on the ward who know how to set up the Jabra and webcam.
- Need to think through what you will do if patients refuse to be seen via AA - what is the back-up plan? We managed this by turning off the video camera and just having audio.
- Prescription cards - need to think about how you will see them. Either the staff on the ward can read them out, or hold them up to the camera. Neither is ideal, but will be resolved when electronic prescribing and medicines administration (EPMA) is implemented.



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# Keeping Services Safe at Ground Level



Clinically Focused regular discussion



Ward Infrastructure for patients and staff

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## Relational Security

Max ward activity



# Grassroots changes



Mutual Support Meeting

Top Tips For Supporting X

Top Tips for Supporting meds well



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# Coming out of Covid-19

1. What to keep
2. What to throw away
3. Positive energy this crisis created

