Meaningful Online Psychiatric Care in an era of COVID19
Webinar
11 November 2020

Digital Priorities:
The College and Mental Health

Dr Adrian James
President
President of RCPsych

- Virtual inauguration 1 July 2020
- Elected post by members
- Voluntary 3-year term
- One of four Officers: President, Registrar, Dean Treasurer
- Chair, Council and Board of Trustees
About Me

- 47th President after winning the Presidential Election at the start of 2020
- A Forensic Psychiatrist and front-line clinician for 33 years, served as the College Registrar for the last 5 years
- My priorities as President are:
  - Equity between physical and mental health
  - Championing diversity
  - Supporting the workforce
  - Sustainability at the heart of all we do
Core Purpose of the College

- Set standards and promote excellence in psychiatry and mental healthcare
- Lead, represent and support psychiatrists
- Work with patients, carers and other organisations interested in delivering high quality mental health services
- Represent the expertise of the psychiatric profession to governments and other agencies
RCPsych Values

- Courage
- Innovation
- Respect
- Collaboration
- Learning
- Excellence

Our Values and Behaviours

At the RCPsych, we want to build a consistent culture that is positive, empowering and enabling for all of our staff and members. Please take the time to look at our new values and behaviours and think about how you can play your part.

Courage
- Champion the specialty of psychiatry and its benefits to patients
- Make every opportunity to promote awareness of mental health among society
- Take pride in our organisation and demonstrate self-belief
- Provide conflict resolution
- Lead and ensure those affected by mental illness, learning difficulties and disabilities are treated with dignity

Innovation
- Be open to innovation and explore new ways to deliver services
- Challenge ourselves and be open to new ideas
- Keep our steps and mind open to new ways of working
- Have the confidence to take calculated risks
- Promote the development of new opportunities and encourage new ways of thinking and working

Respect
- Create a safe, friendly and challenging environment
- Encourage a culture of continuous improvement
- Support a culture of feedback and constructive criticism
- Create a culture of transparency and accountability
- Support a culture of inclusivity and accept others as they are
- Promote a culture where our behaviour might affect others, and on them, and not be undermined

Collaboration
- Work together as one College – incorporating all members, employees, organisations and stakeholders with similar organisations
- Collaborate with relevant stakeholders to achieve effective services for the College
- Work together with patients and their family members
- Value everyone’s unique contribution and approach

Learning
- Learn from all experiences
- Share learning and experience and ideas in the same way
- Continuously develop personal knowledge
- Use feedback to make continuing improvements
- Take action to ensure that everyone is treated equally
- Make the most of every opportunity

Excellence
- Deliver outstanding service to members, patients, and other stakeholders
- Promote the development of any personal or professional development
- Make every opportunity to continue personal development
- Accept work to improve our sale performance
- Promote and encourage all to be creative and personal
- Demonstrate accountability in all that we do
- Lead the College in the way that is expected
Clinical applications of technology –
digital technology in care provision:
Evoking Empathy

- In a systematic review of 10 studies simulation of auditory hallucinations through ear pieces has consistently shown to increase empathy towards people with mental illness in healthcare professionals (Ando et al 2011).
- A further study had replicated this finding using Virtual Reality to simulate psychosis (Formosa et al 2017).
- Simulations tended to produce significant negative emotional reactions as well as generating empathy.
- Therefore needs to be used with caution as a teaching tool.

Ando et al. (2011). The simulation of hallucinations to reduce stigma in schizophrenia. Schizophrenia Research. 133:8-16
Clinical applications of technology – online education

- ‘Telesupervision’ offers innovative means to undertake supervision, there remain gaps in the literature in terms of its parameters of use in clinical practice (Martin et al. 2017)
- Telesupervision offers a very promising approach particularly for geographically isolated practitioners
- A Hybrid model (combination of face to face and telesupervision) was ‘positively related to attitudes toward technology in counselor education, future professional practice, and the overall supervisory experience.’ (Conn, S et al. 2009)
- Remote supervision for new trainees should include attention to the trainee experience and self-care
Clinical applications of technology – future potential

- Trainees can tackle unfamiliar and challenging situations in a safe, virtual world
- Practice communication, critical thinking and decision-making
- VR can capture situations that you can’t easily replicate with actors, such simulating a crowded or public place
- Can demonstrate best practices eg. Seclusion Reviews
- VR can provide scalability at lower cost
- Delivery and experience of learners can be standardized
- Wider audience could be reached
Psychiatric education, training and practice in an era of COVID-19

- The NHS has rapidly changed during COVID-19, with a significant increase in remote consultations; this is key to enabling people to access to healthcare during physical distancing.

- Applications like Microsoft Teams has provided secure instant messaging, direct audio and video calls between NHS colleagues, and has enabled virtual meetings between multidisciplinary team to enable the continuation of complex care.

- ‘Attend Anywhere’ has enabled video consultation between patients and care providers across a range of platforms.
Psychiatric education, training and practice in an era of COVID-19 – Remote working

Figure 1 shows the number of calls that have taken place on Microsoft Teams in South London & Maudsley over the last 12 months (the organisation’s preferred virtual platform).

Figure 1: number of Microsoft Teams calls over the last 12 months
Data source: Internal Microsoft quality dashboard
Psychiatric education, training and practice in an era of COVID-19

Table 23: Advantages and disadvantages of remote working

<table>
<thead>
<tr>
<th>Advantages</th>
<th>Disadvantages</th>
</tr>
</thead>
<tbody>
<tr>
<td>People able to keep in touch (with care coordinators, have supervision, etc.)</td>
<td>Impact on work/ life balance and boundary setting</td>
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<tr>
<td>Continue with treatment and work</td>
<td>Limitation of interactions:</td>
</tr>
<tr>
<td></td>
<td>- extent of treatments that can be offered (e.g. behavioural experiments, interactions with young people, loss of body language cues)</td>
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<td></td>
<td>- Collegial interactions and support</td>
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<tr>
<td>Meetings are more focussed which means less time spent on one appointment</td>
<td>Some meetings and assessment have taken much longer to be able to get an accurate understanding</td>
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<td></td>
<td>Can exacerbate symptoms (e.g. more anxious as not used to technology)</td>
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<tr>
<td>An individual can be more open and honest and they are comfortable in their home</td>
<td>An individual can become more withdrawn, or 'check out' as they are distracted by being at home</td>
</tr>
</tbody>
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Experience of virtual appointments/meetings survey report July 2020

Reshaping Our Services: Remote Working Work stream Quality Centre South London & Maudsley NHS Foundation Trust

Authors Noushig Nahabedian Organisational Consultant Dr Kia-Chong Chua Lecturer in Applied Health Statistics, KCL
Psychiatric education, training and practice in an era of COVID-19

The risk of ‘digital burn-out’

- Digital burnout occurs as a result of spending excessive amounts of time on digital devices.
- It causes stress, fatigue, desensitization toward the environment, loss of interest, and physical and mental problems.
- Institutions must be aware of risks, including digital burn-out, and take steps to protect workforce and trainee health and wellbeing.

Clinical applications of technology

Successful Remote Working
There are clear contributors to the success of remote working, namely

- Access to necessary equipment and data
- Support to facilitate virtual working
- Clear virtual working guidelines
- Choice of interaction type
- Access to the appropriate environment in which to work remotely
Clinical applications of technology – Remote working

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The College’s approach

Proportion of members doing remote consultation:
The College’s approach

Membership view on remote consultations in clinical practice

<table>
<thead>
<tr>
<th>Region</th>
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<tbody>
<tr>
<td>West Midlands</td>
<td>39</td>
</tr>
<tr>
<td>Trent</td>
<td>15</td>
</tr>
<tr>
<td>South West</td>
<td>55</td>
</tr>
<tr>
<td>South Eastern</td>
<td>50</td>
</tr>
<tr>
<td>Northern &amp; Yorkshire</td>
<td>62</td>
</tr>
<tr>
<td>North West</td>
<td>44</td>
</tr>
<tr>
<td>London</td>
<td>80</td>
</tr>
<tr>
<td>Eastern</td>
<td>30</td>
</tr>
<tr>
<td>Wales</td>
<td>16</td>
</tr>
<tr>
<td>Scotland</td>
<td>51</td>
</tr>
<tr>
<td>Northern Ireland</td>
<td>12</td>
</tr>
<tr>
<td>England</td>
<td>375</td>
</tr>
<tr>
<td>UK</td>
<td>454</td>
</tr>
</tbody>
</table>

The chart shows the distribution of agreement levels across different regions and the UK. The categories are:
- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly Agree

The chart indicates the percentage of members who fell into each category for each region and the UK as a whole.
The College’s approach

Challenges faced with technology RCPsych member survey, September

- 67.0% of respondents from across the UK confirmed that a ‘video consultation couldn’t take place’ (371 of 554) during the past six months, which was the most frequently identified issue overall.
- The next most frequently identified challenge was ‘postponed medical appointments’, which was selected by 62.5% of members across the UK (346 of 554).
- 43.5% of UK members (241 of 554) confirmed that medical appointments had been cancelled because of a technological factor.
- Meanwhile 37.7% of respondents from the UK noted that a ‘MDT/team meeting couldn’t be conducted’ (209 of 554) and 33.6% confirmed that ‘patient information couldn’t be shared or accessed’ at some stage (186 of 554).
The College’s approach

The College has called for:

- A new Mental Health Innovation Fund underpinned by £50m over four years
- Expand the Digital Aspirant programme to a further 10 mental health trusts by 2024/25, underpinned by £65m of additional capital funding
- Providers to set out clear plans for mental health technology and innovation. As part of this work
- Ensure EPR systems provide a modern solution that supports high quality, safe and cost-effective mental health care that meets the needs of the end-user. It should support efficient input of clinical data, pathway management, evidence-based care and outcome measurement, and have an open application programming interface (API) to enable clinicians to develop and connect innovative software solutions to improve patient care and outcomes
The College’s approach

Established an informatics Committee

Workstreams 2018-20

- Reducing burden of data gathering
- Interoperability of data/information - SNOMED CT roll out in MH services
- Digital literacy of College members: collaborations with General Adult Psych Faculty & other College Faculties to host conferences
- College statement on Digital Resources Standard for consultants and SAS doctors
- Collaboration with RCPsych-RCGP Group on Primary Care MH to develop information model to support continued care
- Curriculum review with focus on training, teaching and evaluating competencies required in creating, collating and curating information in electronic health records

Collaboration with external bodies:

- PRSB
- NHS Digital & NHS X
- Medicines and Healthcare products Regulatory Agency [MHRA]
The College’s approach

Established a Digital Special Interest Group

- New Sig Founded October 2020
- Close alignment with Informatics Committee align on important matters regarding implementation of technology in healthcare. Dig Sig has a Liaison rep. IC worked closely with us to develop the SIG proposal
- Dig Sig is also keen to disseminate research and content on impacts of technology on mental health
- In year one we would like to expand the membership
- Regular engagement with membership:
  - Newsletter +/- social media
  - Survey of members to ascertain what they want from the SIG
  - Yearly conference and more frequent seminars
  - Founding of a Digital Psychiatry Journal Club
  - Engagement with BJPsych Bulletin and BJPsych International to write articles in relation to technology and mental health
  - Emphasis on recruitment and education with reps for these domains
The College’s approach

Support for staff

- The College has supported remote working for staff at all levels – purchasing new equipment to enable continued working despite the pandemic.

- The College has worked to support the health and wellbeing of staff by increasing opportunities for staff to interact remotely – via more weekly team meetings, running ‘lunch and learn’ sessions, and keeping fit from home sessions.

- The College has utilised a range of applications and tools to improve communication within teams, and between the College and College Members – utilising Microsoft Teams to host meetings and events.
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