



# Meaningful Online Psychiatric Care in an era of COVID-19

Wednesday 11 November 2020 | Online Event

## Conference Booklet

# Programme

Time	Session
10:30-11:30	<b>Session 1:</b> Chaired by Dr Hamid Hassan
10:30-11:00	<b>Keynote 1: Digital Priorities: The College and mental health</b> Dr Adrian James, RCPsych President
11:00-11:30	<b>The cyberpsychiatrist will see you now: using digital technology to optimise patient care</b> Dr Golnar Aref, UCL & Camden & Islington NHS Trust James Cai, UCL Medical Student Dr Sarah Moslehi MD, locum appointed senior house officer at Camden & Islington NHS Foundation Trust  <b>Clinical use of Attend Anywhere</b> Chris Ryan, Video Consulting Programmes Director, Attend Anywhere
11:30-12:00	Morning Break
12:00-13:00	<b>Session 2:</b> Chaired by Dr Jonathan Hurlow
12:00-12:30	<b>Meaningful use of MS Teams for clinical care</b> Dr Subodh Dave, Consultant Psychiatrist and Deputy Director of Undergraduate Medical Education  <b>Medstars Connect - A Clinician's Journey</b> Dr Mahnaz Hashmi, Medstars
12:30-13:00	<b>Clinical use of AccuRx</b> Dr Rebekah Bourne, BSMHFT Lynda Amphlett, BSMHFT Ben Spiro, AccuRx
13:00-14:00	Lunch
14:00-15:30	<b>Session 3:</b> Chaired by Dr Hamid Hassan
14:00-14:30	<b>Keynote 2: Digital services in a (post) Covid world: A patient perspective</b> Simon Rose, Lived Experience Educator, Derbyshire Healthcare NHS Foundation Trust Ellie Bradford & Nell H, Mad Covid
14:30-15:00	<b>Using Avatars to support Therapeutic Practice</b> Sarah Bicknell & Dr Katy Mason, BSMHFT Andrew Jackson, ProReal
15:00-15:30	<b>Moral Injury, Mental Health and Reflective Practice</b> Professor Neil Greenberg, KCL

	<p><b>Schwartz Rounds: supporting healthcare staff online</b> Rhiannon Barker &amp; Aggie Rice, Point of Care Foundation</p>
<b>15:30-16:00</b>	Afternoon Break
<b>16:00-17:30</b>	<b>Session 4:</b> Chaired by Dr Jonathan Hurlow
<b>16:00-16:30</b>	<p><b>NHS Apps: Complementing mental health treatment with digital health</b> Dr Nihara Krause</p> <p><b>Clinical use of NHS Apps Library</b> Wayne Shirt, NHS Digital</p>
<b>16:30-17:00</b>	<p><b>Clinical Use of Zoom</b> Dr Hamid Hassan, BSMHFT</p> <p><b>Privacy, security and clinical use cases</b> Ron Emerson, Zoom</p>
<b>17:00-17:30</b>	<p><b>Debate: Now that technology enables us to work from home, can we be effective professionals with shirts, brains &amp; shorts?</b> Chaired by Prof Simon Wessely</p> <p>For the motion: Golnar Aref Against the motion: Simon Rose</p>
<b>17:30</b>	End

# Speaker Abstracts and Biographies

## **Chair: Dr Jonathan Hurlow**

Jonathan Hurlow is the chair of the Psychiatry Division of the Birmingham Medical Institute and Honorary Secretary for the Birmingham Medico-Legal Society. Jonathan sits on the Professional Practice and Ethics Committee, and is a former member of the Philosophy in Psychiatry Special Interest Group executive committee at the Royal College of Psychiatry. He is a Consultant Forensic Psychiatrist and between 2016-2020 was the Senior Responsible Officer for an NHS Global Digital Exemplar Avatar Relationship Tool Feasibility Pilot in Birmingham. He was a research officer for the 2013 All Party Parliamentary Group for Drug Policy Reform Inquiry into 'Legal Highs'.

## **Chair: Dr Hamid Hassan**

Dr Hamid Hassan is a Child and Adolescent Psychiatrist who works in an inpatient Forensic CAMHS Medium Secure Unit for the NHS. He is a member of Birmingham and Solihull Mental Health NHS Foundation Trust. He also holds the position as chair of the National Adolescent Medium Secure Network. He provides a regular in-reach mental health clinic to a Youth Offending Institute based in Staffordshire. Dr Hassan is very passionate about improving healthcare through technology and will always look to push boundaries to improve clinical outcomes, as inspired by the boundary pushing from the young people he usually supports.

## **Keynote 1: Digital Priorities: The College and mental health**

### **Dr Adrian James**

*RCPsych President*

Dr Adrian James will outline the important role technology has, and continues to play in developing and delivering new approaches in psychiatric care, as well as building the mental health workforce.

He will then outline how the COVID-19 pandemic has impacted the delivery of psychiatric care, as well as the pros and cons associated with adapting to the crisis using technology.

Finally, he will outline the approach the Royal College of Psychiatrists has taken in supporting Members and College staff in adapting, and protecting their health and wellbeing, through the period of required remote working.

Dr Adrian J B James FRCPsych was elected President in 2020. He holds this role until 2023 and leads the RCPsych on behalf of its members and associates. Adrian is Consultant Forensic Psychiatrist at Langdon Hospital in Dawlish, Devon. He is a former Medical Director of Devon Partnership NHS Trust and Founding Chair of the School of Psychiatry at the Peninsular Deanery (2006-2008). He was the elected Chair of the South West Division of the Royal College of Psychiatrists (2007-2011) and sat on the College Council in this capacity. In 2010 he was appointed Chair of the Westminster Parliamentary Liaison Committee of the Royal College of Psychiatrists (attending the three main Party Conferences 2011-14 in this capacity). He was Clinical Director for Mental Health, Dementia and Neurology, working for NHS England South West (2013-2015, interim from 2012-13). He has also acted as a Reviewer and Clinical Expert for the Healthcare Commission and its successor organisation the Care Quality Commission (CQC). He has chaired expert review groups on Integrated Care Systems, Cannabis, Prevent and Learning from Deaths. In addition, he set up the Quality Improvement (QI) Committee and Workforce Wellbeing Committee at the College. His priorities as President are: 1. Establishing a pathway to parity for mental health services 2. Equality and diversity 3. Sustainability 4. Workforce Wellbeing. Adrian is a keen cyclist.

## **The cyberpsychiatrist will see you now: using digital technology to optimise patient care**

### **Dr Golnar Aref**

*UCL & Camden & Islington NHS Trust*

### **James Cai**

*UCL Medical Student*

### **Dr Sarah Moslehi MD**

*Locum appointed senior house officer at Camden & Islington NHS Foundation Trust*

The Covid-19 pandemic has pushed forward use of online consultation in mental health. The NHS and mental health trusts overnight were transformed with approval given to use of Attend Anywhere a confidential platform that required no additional software installation for use. There is ongoing resistance to use of

online consultation amongst clinicians. In the presentation we explore the purpose for:

- 1- Reviewing patients
- 2- Joined up care
- 3- Connecting and including family/friends
- 4- Including medical students

We also think about the challenges of use digital technology and how we must champion use of technology amongst our patient populations (particularly people with severe mental illness) to ensure it is not another form of exclusion.

Dr Golnar Aref-Adib MBBS MRCPsych MSc (Distinction) PGDipCAT Golnar is an academic cyberpsychiatrist based at UCL and work clinically as a Consultant in the Islington Crisis Team. She has published papers on the therapeutic use of technology for severe mental illness in *The Lancet Psychiatry* and *BJPsych Advances*. Her research has been presented at RCPsych International Congress, European Network For Mental Health Service Evaluation and in the UK at the House of Lords. She was the winner of the Higher Psychiatry trainee of the year at the RCPsych awards. She enjoys blogging for *The Mental Elf*, has two young children and is a wellness enthusiast.

James Cai is a 5th year medical student at UCL. Throughout his psychiatry placement, he has engaged with patients both in person and through NHS endorsed Attend Anywhere. He has won the Cordwainers Prize for 1st place overall in MBBS Y1, and received the Wolfson Scholarship for his iBSc project. He is a passionate advocate of wellbeing and mindfulness, and is currently involved in a research project providing an online mindfulness course for UCL medical students.

## **Clinical use of Attend Anywhere**

### **Chris Ryan**

*Video Consulting Programmes Director, Attend Anywhere*

Video call access to established health services at scale requires a whole enablement model, not just technology - mirroring the way health care is accessed and managed today is critical.

Chris Ryan has managed many video consultation programmes since founding Attend Anywhere in 1998 with the aim of addressing barriers to the adoption of video conferencing technology in health. Attend Anywhere works with governments and large health care organisations, helping them establish business-as-usual video call access to their services at scale. Based for many years at the Alfred hospital in Melbourne, Chris, and collaborators from across the sector have created a video consultation enablement model and approach that is used in Australia and extensively throughout the UK and Ireland. While his passion is access to public health services, the Attend Anywhere model has now been adopted across other parts of the health sector and well beyond. The model is used to facilitate around 40,000 direct-to-patient consultations daily and rising, with Chris and his team remaining at the vanguard of all the exciting potential that lies ahead.

## **Meaningful use of MS Teams for clinical care**

### **Prof Subodh Dave, FRCPsych MMed (Clinical Education)**

*Consultant Psychiatrist and Deputy Director of Undergraduate Medical Education,*

*Derbyshire Healthcare Foundation Trust,*

*Professor of Psychiatry, University of Bolton*

*Chair, Association of University Teachers of Psychiatry*

*Vice-Chair, BAPIO Institute of Health Research*

*@subodhdave1 @autp2 autp.org*

*Linked in – Subodh Dave*

Trainer of the Year: Royal College of Psychiatrists 2017

The primary aim of all the assessments should be to produce a safe, competent and professional clinician. It is important that assessments are valid and fair as well as being reliable and defensible. Unfair assessments may lead to false positives i.e. trainees poor in clinical practice in the real-world, but good at passing exams and also false negatives i.e. trainees good at clinical practice in the real world, but poor at exam performance thus not able to pass exams.

Formative assessments have the potential to complement summative assessments and the overall judgements related to progression. The use of a more blended approach will be necessitated with the diversity of high-level outcomes that comprise the General Professional Capabilities Framework; but should also, in line with the recommendations made by Roe et al, lead to improvements in differential attainment (Roe et al 2019). Our doctors need to be judged by a regime of assessments that can take into account their specialist expertise as also the broader more general skill set (36) and do so fairly, equitably, consistently and reliably. Failure to do so urgently risks damaging the confidence that the public have invested in the fidelity of our assessment systems.

MS Teams has become the go-to online meeting platform in the NHS in the current COVID pandemic. Integration with MS Outlook offers additional functionality. While, it may not be commonly used as a platform for clinical interactions with patients, it is routinely being used for clinical team meetings, training and education meetings, supervision and other meetings up and down the country. The presentation will share our experience (tips and challenges) in Derbyshire Healthcare Foundation Trust of using MS Teams for both clinical care and teaching.

Key interests: Person-centred Care ,Quality Improvement, Medical Education, Global Mental Health, Equality and Diversity, Differential Attainment

Subodh is keen on enhancing community engagement to enable the delivery of person-centred care. He has co-lead the development of the College report CR215 on Person Centred Care: Implications for training in Psychiatry. As National Adviser, Community Care Pathway, he was involved in developing national guidance on community care.

He is passionate about co-production and patient involvement in Quality Improvement and in teaching and has been the architect for the award-winning programme of volunteer-patient teachers in Derby, UK. He has co-authored the undergraduate textbook "Hundred Cases in Psychiatry" and has written/lectured extensively on the subject of medical education, global mental health and values/ethics. He has contributed to re-designing the psychiatric curriculum nationally and internationally (Zambia and India).

He has developed early support and mentoring programmes for International Medical Graduates (IMGs), addressed the root causes of differential attainment and focused on supporting and valuing trainees.



A keen runner, he has run several marathons to raise money for mental health charities. He recently ran the Berlin marathon in under 3 hours and has recently cycled across the length of UK in 10 days raising funds for DoctorsInDistress and raising awareness about mental illness and suicides in medics.

## **Medstars Connect - A Clinician's Journey**

**Dr Mahnaz Hashmi**

*Medstars*

Since the onset of the Covid 19 pandemic, barriers to the use of existing technological tools previously considered unsuitable for use in the NHS have been lowered. Clinicians who may have previously considered video consultations a poor substitute for face to face encounters have had to overcome their reluctance of necessity, due to restrictions on in-person appointments. Whilst the adoption of technology to improve efficiencies is likely to be a positive long-term outcome of Covid 19 within healthcare, many existing tools feel as though they have been hastily retrofitted to the clinical encounter and are not always intuitive within existing clinical pathways. I describe my and my colleagues' experiences of using some of these tools, and how we used this learning during the lockdown period to develop Medstars Connect - a remote consultation mobile app that 'works like a clinician thinks' whilst being user-friendly for patients.

Dr Mahnaz Hashmi is a Consultant Liaison Psychiatrist in Birmingham, with interests in medically unexplained symptoms, medical education, anthropology and the arts, and technology in healthcare. She has developed innovative service models in liaison psychiatry, is an elected member of the RCPsych Liaison Faculty, Deputy Head of Psychiatry Academy at the new Aston Medical School in Birmingham, co-Chair of the NHSE regional Liaison Psychiatry Expert Advisory Group and co-founder of Medstars, a Birmingham-based health tech company that has been supported by the West Midlands AHSN and NHS Innovation programme. She is currently contributing to a book chapter on Virtual Clinics in undergraduate medical education for the UK Association of University Teachers of Psychiatry.

## **Clinical use of AccuRx**

**Dr Rebekah Bourne Lynda Amphlett**

*BSMHFT*

**Ben Spiro**

*AccuRx*

This presentation will provide an overview of how a community forensic team based in Birmingham is using AccuRx for clinical work throughout the COVID-19 pandemic. We will give you some context to our service and the challenges we faced at the start of the pandemic along with some examples of how we have faced those challenges and some clinical examples of how we have used this technology.

Dr Rebekah Bourne is a Consultant Forensic Psychiatrist and Clinical Lead for a Community Forensic Team within Birmingham and Solihull NHS Mental Health Foundation Trust. She has been a consultant since 2012, initially working in Reaside Clinic MSU and moving to work full-time in the community in 2017. Rebekah has specialist interests in MDT working and the management of sexual offenders in the community.

Lynda Amphlett is an employee of Birmingham and Solihull Mental Health Foundation Trust and works within the Forensic Intensity, Recovery and Support Team, having been part of this team since August 2013. Part of the requirement of this team, is that Lynda practices as a social worker and that she is approved as an Approved Mental Health Professional (AMHP). Previously, since September 2002, Lynda has worked for Birmingham City Council, in the capacity of Social worker, and an ASW then AMHP, after gaining an MAdipSW In August 2002 and approval to work as an ASW in July 2005.

Ben Spiro is the Growth Lead at AccuRx. AccuRx is free software for NHS providers in the UK, allowing staff to text and video call patients about anything they need. AccuRx is used by over 100,000 NHS staff every week.

NHS staff can try it out for themselves by going to <http://fleming accurx.com/>

## **Keynote 2: Digital services in a (post) Covid world: A patient perspective**

**Simon Rose**

*Lived Experience Educator, Derbyshire Healthcare NHS Foundation Trust*

**Ellie Bradford & Nell H**

Mad Covid

In nine months, coronavirus has done more to advance the case for digital technology to be used in mental health care than anyone managed in the preceding decades. In the second keynote of today, we discuss the pros and cons of increasing digitisation from the perspectives of a number of people who receive care from psychiatric services. We suggest a number of actions that have the potential to improve patient experience of the transition from face to face to digital healthcare.

Simon Rose is a Lived Experience Educator working with Derbyshire Healthcare NHS FT. Simon combines 25 years of receiving secondary care mental health services, both in patient and community based, with a PG Certificate in Medical Education. He was the first lived experience educator to obtain this qualification from the University of Sheffield. Simon loves bad football (Derby County), good music (the Levellers) and exceptional beer (Burton Bridge Porter). However, as someone who lives with recurrent depressive disorder, he has been known to avoid talking about Derby County and beer with the consultant psychiatrist who still provides him with care! Simon is a Fellow of the Higher Education Academy, an Honorary Teacher in the Academic Unit of Medical Education at the University of Sheffield and has contributed to a Royal College of Psychiatrists project looking at how to involve people with lived experience of mental illness in psychiatric teaching (due to publish summer 2020). He is the patient representative on Council at the Royal College of Psychiatrists and is a Patient Safety Partner with NHS England. Simon is happy to engage with (almost) anyone on twitter: @Simonro40611952

Ellie has 15 years' experience using mental health services. She openly lives a double life as a Mad artist by the name of Luna Tic. She currently helps to run service user/survivor group Mad Covid

Nell is a service user and mental health activist. She uses her lived experience to make art that provides a critical view on contemporary issues in mental health.

She has been involved in creating zines for user-led groups Dear GP, Recovery in the Bin and Mad Covid. She currently helps to run Mad Covid.

Visit [Mad Covid](#).

## **Using Avatars to support Therapeutic Practice**

**Sarah Bicknell & Dr Katy Mason**

*BSMHFT*

**Andrew Jackson**

*ProReal*

### **Aims**

We aim to present the findings of our evaluation of using avatar software in a medium secure inpatient unit. We will provide an experiential demonstration of the software, share our experiences of implementing therapy and reflective practice using the software, and discuss the potential opportunities and barriers of using avatars to facilitate meaningful online care.

### **Background**

The ProReal software is an avatar based, virtual-world programme aimed at innovating clinical practice, using digital technology as adjunct to standard care. It consists of a series of virtual landscapes, with avatars representing both the patient and those around them. There are a number of ways to explore the internal and external worlds of the avatar which have a range of complexities.

### **Implementation and Evaluation**

Staff facilitators were trained in use of the software, and then used this as an adjunct in up to 50% of clinical interventions, Mentalisation Based Therapies, reflective practice sessions and established educational packages for staff and patients. To evaluate the use of the software, semi-structured interviews were completed with 15 staff and patients with experience of the tool.

### **Outcomes**

Interviews were analysed using thematic analysis. Eight major themes identified were: Concrete visual presence and imagery, mentalisation processes, enhanced focus depth and problem solving, relationship dynamics and alliances, choice and different ways of using, adding value, collaborative and logistical processes and barriers and access. We will discuss and reflect on these themes in the session.

## **Conclusions**

In our service we found that the avatar software was feasible to implement, acceptable to patients and staff, and may offer an opportunity to aid mentalisation and reflection. There are a number of barriers that need to be overcome for successful adoption into therapeutic practice, some of which may reflect underlying unconscious processes. Despite the obstacles, this software offers a novel way of connecting with a hard to reach patient groups such as those within our personality focussed recovery service. It also offers new ways of developing long term therapeutic relationships and emotional connections which are often challenging for staff and patients.

Katy Mason is a Speciality Registrar in Forensic Psychiatry and Medical Psychotherapy. Katy is particularly interested in working in a psychoanalytically informed way in Forensic settings and across organisations. She has worked with violent and perverse patients at all levels of security and within prison settings. She is currently working in split post between a Women's Forensic Service as a Forensic Psychiatrist and a Tertiary Psychotherapy Service delivering Group Analytic Psychotherapy.

Sarah Bicknell is a Clinical Research Practitioner working in Birmingham and Solihull Mental Health Foundation Trust's Research and Innovation department.

As a Partner at PwC and an Executive in IBM, Andrew has 25 years' experience supporting organisations and people through change. With an interest in 'technology for good', Andrew now leads ProReal Ltd - a team whose avatar-based 3D visualisation technology is used in a range of health and social care situations. ProReal has a long-established research programme working with people in prisons, schools, and mental healthcare settings. As part of the NHS Global Digital Exemplar programme, the technology is current being used by clinicians to support delivery of online psychotherapy in response to COVID-19.

# **Moral Injury, Mental Health and Reflective Practice**

**Professor Neil Greenberg**

*KCL*

Reflective practice is a key tool in the prevention of moral injury which has been described by some as the signature mental health difficulty of the pandemic especially for many key workers including healthcare staff. We know that therapy delivered online can work; as yet we do not have the same assurance for online reflective practice such as that delivered by the Point of Care Foundation. It could work; but if so for who and when should it be used?

Professor Neil Greenberg is a consultant academic, occupational and forensic psychiatrist based at King's College London. Neil served in the United Kingdom Armed Forces for more than 23 years and has deployed, as a psychiatrist and researcher, to a number of hostile environments including Afghanistan and Iraq. At King's Neil leads on a number of military mental health projects and is a principal investigator within a nationally funded Health Protection Research unit. He also chairs the Royal College of Psychiatrists (RCP) Special Interest Group in Occupational Psychiatry. Neil has published more than 250 scientific papers and book chapters and has been the Secretary of the European Society for Traumatic Stress Studies, the President of the UK Psychological Trauma Society and Specialist Advisor to the House of Commons Defence Select Committee. During the COVID19 pandemic, Neil has worked closely with NHSEI, PHE and has published widely on psychological support for healthcare, and other key workers

## **Schwartz Rounds: supporting healthcare staff online**

**Rhiannon Barker & Aggie Rice**

*Point of Care Foundation*

The COVID-19 crisis has provided the opportunity to adapt an intervention known as Schwartz Rounds to be delivered online to continue to provide support for healthcare staff. A large-scale evaluation of Rounds in the UK showed that they offer unique support compared to other interventions. Rounds offer a safe, reflective space for staff to share stories with their peers about their work and its impact on them. Attendance is associated with a statistically significant improvement in staff psychological wellbeing. Reported outcomes included

increased empathy and compassion for patients and colleagues and positive changes in practice.

Rhiannon was Head of Business Development at The Point of Care Foundation until 2017. During her time at POCF she supported the roll out Schwartz Rounds (reflective staff support) across health care organisations in the UK and helped develop new programmes of work.

Rhiannon spent her early career in overseas development conducting evaluations of food aid distributions and then managing an Oral History Project across Sahelian Africa. Following that she worked as a Research Manager at the Health Education Authority and then became a freelance consultant specialising in the evaluation of health interventions. She completed a five-year term as a non-executive director with East Sussex Downs Primary Care Trust.

She is currently doing freelance work in policy, research and training following conducting a PhD at the Centre for Health Service Studies, University of Kent, exploring English End of Life Care Policy.

Aggie works for The Point of Care Foundation on the Schwartz Rounds and Team Time programme. She has a special interest in organisational culture and narratives within the NHS, soon to complete a travel fellowship exploring different international interventions for staff support within healthcare organisational cultures.

## **NHS Apps: Complementing Mental Health Treatment with Digital Health**

**Dr Nihara Krause**

How do you find what works? With over 355,000 mental health apps, finding relevant and suitable digital tools to complement treatment is difficult. This talk provides a brief background to what's available and some key factors to look out for in a digital tool, especially in the context of adolescent mental health.

Dr Nihara Krause is an award-winning Consultant Clinical Psychologist, lecturer and international speaker and founder and CEO of stem4, teenage mental health charity. In addition to a wellbeing programme and a digital mental health literacy

programme for secondary schools and colleges, she has created 4 evidence based mental health apps for children and young people: Calm Harm, Clear Fear, Combined Minds and Move Mood. Three of the apps also have accompanying resources to help over the COVID-19 pandemic.

## **Clinical use of NHS Apps Library**

**Wayne Shirt**

*NHS Digital*

## **Clinical Use of Zoom**

**Dr Hamid Hassan**

*BSMHFT*

At pivotal points during the COVID-19 pandemic, we have had to rely on video conference link for our hospital patients for them to have any sort of visual contact with their loved ones. This has also included contact with community professionals involved in their care. This intervention was necessary to reduce the risk of cross-contamination of the stated pathogen. One of the videotelephony platforms that we have utilised to facilitate such contact, which has improved patient experiences as well as their care pathway, will be discussed today. This platform has also been very valuable for clinicians in non-clinical scenarios.

Dr Hamid Hassan is a Child and Adolescent Psychiatrist who works in an inpatient Forensic CAMHS Medium Secure Unit for the NHS. He is a member of Birmingham and Solihull Mental Health NHS Foundation Trust. He also holds the position as chair of the National Adolescent Medium Secure Network. He provides a regular in-reach mental health clinic to a Youth Offending Institute based in Staffordshire. Dr Hassan is very passionate about improving healthcare through technology and will always look to push boundaries to improve clinical outcomes, as inspired by the boundary pushing from the young people he usually supports.



## **Privacy, security and clinical use cases**

### **Ron Emerson**

*Zoom*

Please join Ron Emerson RN BSN Zoom's Global Healthcare Lead to discover how Zoom provides security, privacy and workflow for virtual psychiatric and coordinated care. This session will also cover key models around virtual clinical services.

Ron Emerson RN BSN is the Global Healthcare Lead at Zoom. He is a former member of the board of Directors for the American Telemedicine Association and Chair of the Industry Council. He has more than 20-years' experience in the healthcare industry having worked on a number of Telemedicine programs in 46 countries. He is recognized as a thought leader in Telehealth, having developed a variety of innovative telehealth applications, and consulted on telehealth deployments worldwide. He also held the position of Executive Director for a large telemedicine operation in the United States, where he was responsible for the efficient provision of services to 350 sites. Mr. Emerson was the previous recipient of the American Telemedicine Association Industry Council Award for his leadership in the advancement of Telehealth.

## **Debate: Now that technology enables us to work from home, can we be effective professionals with shirts, brains & shorts?**

Chaired by

### **Prof Simon Wessely**

The pandemic has forced citizens across the world to revolutionise how we communicate and work whilst supporting physical distancing measures to minimise the spread of COVID19 infection.

The internet, cameras, microphones, headphones and speakers have enabled millions to remain in contact despite being physically far apart. Some found themselves able to strike a better work life balance, baking sourdough and banana bread between online clinical and professionals interactions.

There are of course many challenges associated with this as well as any benefits. These are perhaps all the more acute when considering interactions between psychiatrists with patients, friends, family members and carers. Working from

home also challenges traditional boundaries between work and home as top US legal analyst Jeffrey Toobin discovered in October during an election simulation involving the New Yorker and WNYC radio. He was left suspended, apologising and stating "I made an embarrassingly stupid mistake, believing I was off-camera."

Are we facing an opportunity to break down barriers and power differentials found in clinical relationships with patients, friends, family and carers? If we throw off our grey suits or leather patched cardigans we will we be more approachable? Are we on the brink of striking better work life balance by being our relaxed homely selves? Or are we on the brink of having to apologise and say "I made an embarrassingly stupid mistake, believing I was off-camera"?

Professor Sir Simon Wessely is Professor of Psychological Medicine and Regius Professor of Psychiatry at King's College London and a Consultant Liaison Psychiatrist at King's College and the Maudsley Hospitals. Simon Wessely studied medicine and history of art at Trinity Hall, Cambridge, and finished his medical training at University College Oxford, graduating in 1981. He obtained his medical membership in Newcastle, before moving to London to train in psychiatry at the Maudsley. He has a Master's and Doctorate in epidemiology. He is a Foundation Senior Investigator of the National Institute for Health Research, past President of the Royal College of Psychiatrists and the Royal Society of Medicine and is also chairing the Independent Review into the Mental Health Act. In 2020 he was appointed to the Council of the ESRC. He has over 800 original publications, with an emphasis on the boundaries of medicine and psychiatry, unexplained symptoms and syndromes, population reactions to adversity, military health, epidemiology and others. He founded the King's Centre for Military Health Research, which is now the main source of information on the health and well-being of the UK Armed Forces past and present and has been Civilian Consultant Advisor in Psychiatry to the British Army since 2001, He has co-authored books on chronic fatigue syndrome, randomised controlled trials and a history of military psychiatry, although sadly none of them are best sellers. He is active in public engagement activities, speaking regularly on radio, TV and at literary and science festivals. He is a trustee of Combat Stress and his contributions to veterans' charities include cycling (slowly) eight times to Paris to raise funds for the Royal British Legion.

For the motion

**Dr Colnar Aref**

Against the Motion

**Simon Rose**