



COVID-19 Change Package

Communication: with  
families and carers,  
patients, and staff



NATIONAL  
COLLABORATING  
CENTRE FOR  
MENTAL HEALTH

COLLEGE CENTRE FOR  
QUALITY IMPROVEMENT



NHS England and NHS Improvement



This COVID-19 Change Package has been created by the Mental Health Safety Improvement Team, pictured below. We identified 'Communication: with families and carers, patients and staff' as a key area of practice that has required significant change for those working in mental health services as a result of the COVID-19 pandemic.

This package is designed to provide accessible support for teams who want to make improvements in this area. It consists of:

- a shared theory for achieving your aim, developed from changes being made to practice in response to COVID-19 (driver diagram)
- examples of positive changes that have been made by mental health teams
- a list of resources developed by mental health services and affiliated organisations.

### Acknowledgements and thanks

We would like to acknowledge the enormous challenge the NHS and other care providers are currently facing, and thank each person, team, Trust and provider who has contributed to the development of this change package by being generous enough to share their guidance, change ideas and learning. Wherever known, those people and organisations have been named and credited in the document.



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# Contents

<b>Alternatives to visits/meetings .....</b>	<b>5</b>
Facilitate video calls between patients and relatives .....	5
Protocol for essential visits and if patient is hospitalised .....	6
<b>Keep families and carers informed.....</b>	<b>7</b>
Family/carer champion/designated keyworker .....	7
Telephone/Letters/Postcards/Newsletters/email updates .....	7
<b>Compassion and reassurance .....</b>	<b>10</b>
Guide to compassionate phone communication .....	10
<b>Alternatives to usual activities.....</b>	<b>11</b>
Virtual meetings/groups.....	11
<b>Visual and written information.....</b>	<b>12</b>
COVID-19 information .....	12
Good news stories .....	15
<b>Normalise psychological responses .....</b>	<b>16</b>
Permission not to be okay .....	16
Be available, create safe, supportive spaces .....	16
<b>Visible and supportive leadership .....</b>	<b>18</b>
Frequent and simple written/video communication.....	18
Recognition, thanks and rewards .....	20
<b>Human connection and peer support.....</b>	<b>22</b>
Shared learning opportunities/reflective space .....	22
Daily buddying.....	22
<b>Additional Resources .....</b>	<b>23</b>

Driver diagram – click on a secondary driver/change idea for quick access to the associated information

**Communicate effectively and compassionately with families and carers, patients, and staff during the COVID-19 pandemic**

### Communication with families and carers

#### Alternatives to visits/meetings

Facilitate video calls between patients and relatives

Protocol for essential visits and if patient is hospitalised

Family/carer liaison champion and/or designated keyworker

Telephone/Letters/Postcards/Newsletters/email updates

Guide to compassionate phone communication

### Communication with patients

#### Alternatives to usual activities

Virtual meetings/groups

#### Visual and written information

COVID-19 information

Good news stories

Permission not to be okay

Be available, create safe, supportive spaces

Frequent and simple written/video communication

Recognition, thanks and rewards

Shared learning opportunities/reflective space

Daily buddying

### Communication with staff

#### Normalise psychological responses

#### Visible, supportive leadership

#### Human connection and peer support

Primary driver

Secondary driver

Change idea

## Alternatives to visits/meetings

### Facilitate video calls between patients and relatives

Chelsea Weller, Registered Mental Health Nurse on Greenway Ward and Bollin Ward in Greater Manchester Mental Health NHS Foundation Trust shared alternative ways they are helping patients on their dementia ward to communicate with families using technology. Other ward teams have described similar ideas.

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

Patients were becoming tearful and asking when their families would visit. This occurred prior to COVID-19 on our dementia ward and we always reassured patients. But after visits were stopped as a result of the pandemic, those with more capacity noticed their friends and family were not coming in at all. So, we thought of ways around this.

#### 2. What did you do?

The team used the Samsung tablet that was already on the ward to set up a Skype account with our own username and password. Friends and family could use this account to have a video call over Skype, as well as using the regular phone.

#### 3. How did it go?

It went well for those with capacity and those asking to see family. With the tablet being portable it was easier to make this a time where patients could speak to families in their rooms, privately rather than the office with the phone. However, due to risks of using tablets and capacity this was often observed by staff to ensure safety.

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

- We ensured that we let friends and family know about the changes and encouraged use
- We made staff available at designated times to facilitate calls
- We prioritise calls for patients who ask for family contact, and for those who are not orientated to time/place we wait for a more suitable moment
- We carry out risk assessments regarding tablet use, including patient confidentiality, risk of destruction/damage to tablets, risk of harm to others or self with tablet used as means
- It has been beneficial for many patients to have visual contact with family and friends, rather than just telephone.



## Protocol for essential visits and if patient is hospitalised

A CAMHS ward shared the following protocol for essential visits.

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

Alternatives for most visits have been put in place, but due to the fact that some visits to young people on the ward do still need to take place we have put in place a clear protocol for those essential visits.

### 2. What did you do?

- Only 1 person to visit at a time
- Triaged to be symptom free for 14 days prior to the visit
- Maintain 2 metres distance during visit
- Visit takes place off the ward, in another suitable room
- Time slots are allocated to ensure fair rotation and sufficient cleaning time
- Room cleaned before and after each visit
- Visitors asked to follow IPC in terms of handwashing when entering and leaving the unit.

Langworth Ward, Lincolnshire Partnership NHS Foundation Trust, shared their plan if patients are transferred to a physical health ward as a result of COVID-19.

They provide the liaison function with the physical health ward to ensure they can provide regular feedback to the patient's carer, particularly when it is difficult for them to contact that physical health ward.

# Keep families and carers informed

## Family/carer champion/designated keyworker

Wellesley Hospital, Somerset, Elysium Healthcare

A medium – low secure unit at Wellesley Hospital in Somerset has a designated lead carer who has set times for regular contact with families/carers to provide updates, check in with them and see how they are and provide an opportunity to raise any issues or concerns. This person still continues with this, especially in this difficult situation, and also ensures relatives can contact her directly between the regular calls.

## Telephone/Letters/Postcards/Newsletters/email updates

With leave and visits restricted for patients and their families due to COVID-19, wards are using alternative methods to communicate with patients' families and carers. Here are some ideas mental health teams have shared.

Jacqueline Tyson, Quality Champion on Langworth Ward (Older Adults), Lincolnshire Partnership NHS Foundation Trust, shares how her Trust are holding virtual carer 'tea and chat' groups every day. Langworth Ward have also arranged a scheduled weekly call, facilitated by a ward nurse, to carers to provide a clinical update and have made 'face time' available should they wish to.



### Advice for carers during the coronavirus outbreak

At this time it is very important that carers have access to information and support. This document contains some basic advice in response to some questions that have been raised, and also some guidance on staying well.

#### Please ensure you:

- Let your GP know that you are a carer (if they do not know already)
- If the person you care for needs medication, contact your GP to ensure prescriptions and medication can still be collected
- Put a contingency plan in place (more information on next page)
- Keep up to date with information provided by the NHS and Government.

#### If your loved one is on a ward:

Currently all patient visiting has been suspended to try and stop the spread of coronavirus. We know that this can be exceptionally difficult, but your loved one is in the best place for their health needs.

If your loved one is on a ward and has access to texts, emails, mobile phones then stay in touch with them that way. Group chats, online games and video calls, where possible, will also help you stay in touch and feel connected if you do not live with the person for whom you care.

If you have concerns about your loved one on a ward then contact the ward directly and speak with someone, or speak to the [Patient Advice and Liaison Service](#). Staff will call you if they have any concerns about your loved one.

#### Key contacts:

- If your loved one has a community psychiatric nurse (CPN), contact them with questions about their health or care
- Contact our Single Point of Access (SPA) service if you have any queries about our other services
- Contact the Trust's carer staff; Laura on [REDACTED] or Donna on [REDACTED] during working hours 9-5 Monday-Friday.
- For confidential mental health and emotional wellbeing support available 24/7, please call our new helpline on [REDACTED]

More information can be found at [www.lpt.nhs.uk/contact-us](http://www.lpt.nhs.uk/contact-us)

#### Key links:

- LPFT is regularly sharing information on their public Facebook page
- There's coronavirus information on [LPFT's website here](#)
- Please also look at the dedicated [LPFT carers page here](#).

#### Take a break at home

- Join our virtual 'cuppa and chat' teleconference. This will run Monday-Friday for one hour from 11am-12noon starting Wednesday 1 April. Call [REDACTED] You will then be asked to dial in a participant number, this is [REDACTED]
- You can join our fortnightly virtual carers group on Zoom. For more information or to register, please email [REDACTED]
- Join our existing WhatsApp group chat – please get in contact with [REDACTED] if you would like to join.



#### Keeping in contact with family and friends

Currently all patient visiting has been suspended to try and stop the spread of coronavirus and to keep you safe. We know that this can be exceptionally difficult, but there are lots of ways you can stay in touch and feel connected. We can support you to contact family, friends and loved ones through various ways, telephone calls, Skype and WhatsApp for example.



We can provide paper and envelopes if you would like to write letters to stay in touch.

We will discuss with you and your relatives about arranging scheduled calls to keep your loved ones updated at a time that is convenient to them.

#### Please ask if you would like support with staying in touch.



Leanne Young, Ward Manager on Laurel Ward, Greater Manchester Mental Health NHS Foundation Trust, shared an idea on helping patients communicate with their carers and relatives.

### 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 their 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.

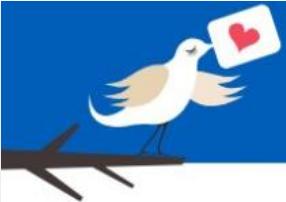
### 4. What was the main learning from your intervention?

On Laurel Ward we learnt that although restrictions are in place it is so important to maintain communication and keep connected and this was a 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.



Lincolnshire Partnership NHS Foundation Trust have launched a new postcard service across all the wards within the Trust, to help patients keep in touch with their carers, friends and families.

[@LPFTNHS](#)



**NHS**  
**Lincolnshire Partnership**  
NHS Foundation Trust

**Postcards for patients**

Send a loved one a message using the details below and our ward staff will personally deliver it on your behalf...



We know that this is a difficult time for everyone, including our patients. It is especially important to keep in touch with family and friends. That's why we have launched our **new postcard service** for patients across LPFT wards.

Send your messages to...  
**Email:** [lpft.carers@nhs.net](mailto:lpft.carers@nhs.net)  
 or call: 07966 834977 (8.30am - 4.30pm)  
 Please include the full name and date of birth of the patient, along with the ward name.

[Jack Pumphrey](#), Charge Nurse on Caburn Ward, Mill View Hospital in Brighton and Hove, has used their newsletters as a way of communicating with families and carers as well as the patients.

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

We know it must be very difficult for families and carers, with their loved ones being in hospital and not being able to see them at this time. Prior to the lockdown, we have always handed out physical copies of our ward newsletter to any carers or relatives that visit the wards and have encouraged them to follow us on Twitter for updates. We wanted to keep them involved in the care we are providing for their loved ones and inform them on actions we are taking in the hospital. The information displayed on the ward did not seem to be helpful for carers as they are not allowed on the ward at the moment.

## 3. How did it go?

There has been some difficulty with sharing the news with carers and family, as not everyone is keen to engage over social media and we have not trialled sending out physical copies in the post. But we have tried to ensure that all carers are aware of how they can remain in contact with their loved ones and how we are protecting them on the ward.

## 2. What did you do?

By spreading the newsletter around on social media and to our patients we have tried to encourage them to share this with their families. We have also spoke to family/carers on the phone and let them know that they can see the newsletter on the ward's Twitter, as well as giving over the phone updates and involving them in Skype calls on the ward.

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

The main learning point would be discussing a solid plan of how to spread the news quicker to keep carers and family informed and managing to get physical copies of information out to them.

**THE CABURN CHRONICLE**

**Coronavirus Edition**

**April 2020**

**What is Coronavirus?**

Coronavirus is a new virus (COVID-19) that first appeared in China, because of people travelling for work or holidays it has now spread across the world. More people are being diagnosed with coronavirus in the UK now, the government have put us into lockdown so that we can stop the spread of the virus.

This will be a scary time for us all, but we are here to support you around this. Please talk to us about any worries you have, we hope this edition of the newsletter can help relieve some anxieties around this.



**How you can try and help stop the spread of coronavirus**

Covering your mouth and nose with a tissue when you sneeze/cough and put used tissues straight in the bin

If you have not got a tissue, it is best to sneeze/cough into your sleeve or elbow rather than your hands

Try to avoid touching your face as much as you can

Social distancing, try to keep 2 metres apart from others when possible

Keep your hands clean and wash them regularly following the steps below (please ask staff if you wish for someone to show you how to wash your hands)

**NHS**

**COVID-19 Suite PPE**

**1 Hand gel**  
**2 The back of hands**  
**3 In between fingers**  
**4 The back of my fingers**  
**5 The thumbs**  
**6 The tips of the fingers**

**CONTACTS**

If you have any further questions please contact us:

- Matron: alex.chinn@excellencepartnership.nhs.uk
- Ward Manager: jodie.young@excellencepartnership.nhs.uk
- Clinical Nurse Specialist: heverley.ryan-hewitt@excellencepartnership.nhs.uk
- Charge Nurses: david.summers@excellencepartnership.nhs.uk
- laurain.culliford@excellencepartnership.nhs.uk
- maha.alherish@excellencepartnership.nhs.uk
- jack.pumphrey@excellencepartnership.nhs.uk

**PROTECT YOURSELF & OTHERS**

Wash your hands with soap and water for at least 20 seconds

Use a tissue to cover off the 5s. Dry hands thoroughly

**Central contact with the NHS regarding Covid-19 crisis**

**Arranged Discharge**

**Section 17 leave**

For those of you who are detained under the Mental Health Act, leave will be for a maximum of one hour each day. This leave should be for exercise only around the hospital grounds. Across the country, people should only be going to the shops for essential items. Leave to the shops should be kept to a minimum (no more than once a week) and, if you have cash, staff can go for you on a shop run to minimise potential exposure to the virus.

Please let the nurses know if you are experiencing any of these symptoms:

- A new, dry cough
- A high temperature
- Finding it hard to breathe normally

If you think you may have coronavirus, you will be asked to isolate in your bedroom whilst we wait for a swab to confirm if you have got it.

**Social Distancing**

It is extremely important at this time to maintain distance from others in order to prevent the spread of coronavirus. The government have advised keeping 2 metres apart where possible and minimising social gatherings. Here are some ways we are doing this on the ward:

Meals will be eaten in your bedrooms, staff will come around with a menu before meal times to take your order and bring your meals to you.

OT activities have stopped due to social distancing but isolation packs are being given out to keep you busy and stop boredom! Community meeting will still take place weekly in the garden!

Groups in the garden are still happening when social distancing is possible - outdoor gym and gardening

You should not be going into each other's bedrooms, if you wish to spend time with your peers please do this in communal areas

There are no visitors allowed in the hospital at any time, thus to protect everyone from the virus being brought in from outside the hospital.

**Maintaining Your Wellbeing**

Lots of people may experience additional distress during this time. Here are some ways to look after yourself during this time:

- Keeping a **healthy and balanced diet** is important to keeping your body healthy to fight off any illness, make sure you are drinking lots of water!
- Set yourself **realistic goals** for each day of what you want to achieve, these can be simple tasks but can lead to a sense of fulfillment.
- Try to **maintain a routine** to ensure you don't sleep all day and stay awake all night, include exercising (we have the indoor and outdoor gym) to stay active.
- Spend time outside in the garden or in the grounds to get some **fresh air**.
- Keep in contact with friends and family; stay **connected** with them through phone calls and video calls.
- The media can increase our anxieties, try to **avoid watching or reading about the news** all day

**SOCIAL DISTANCING**



**CONTACTS**

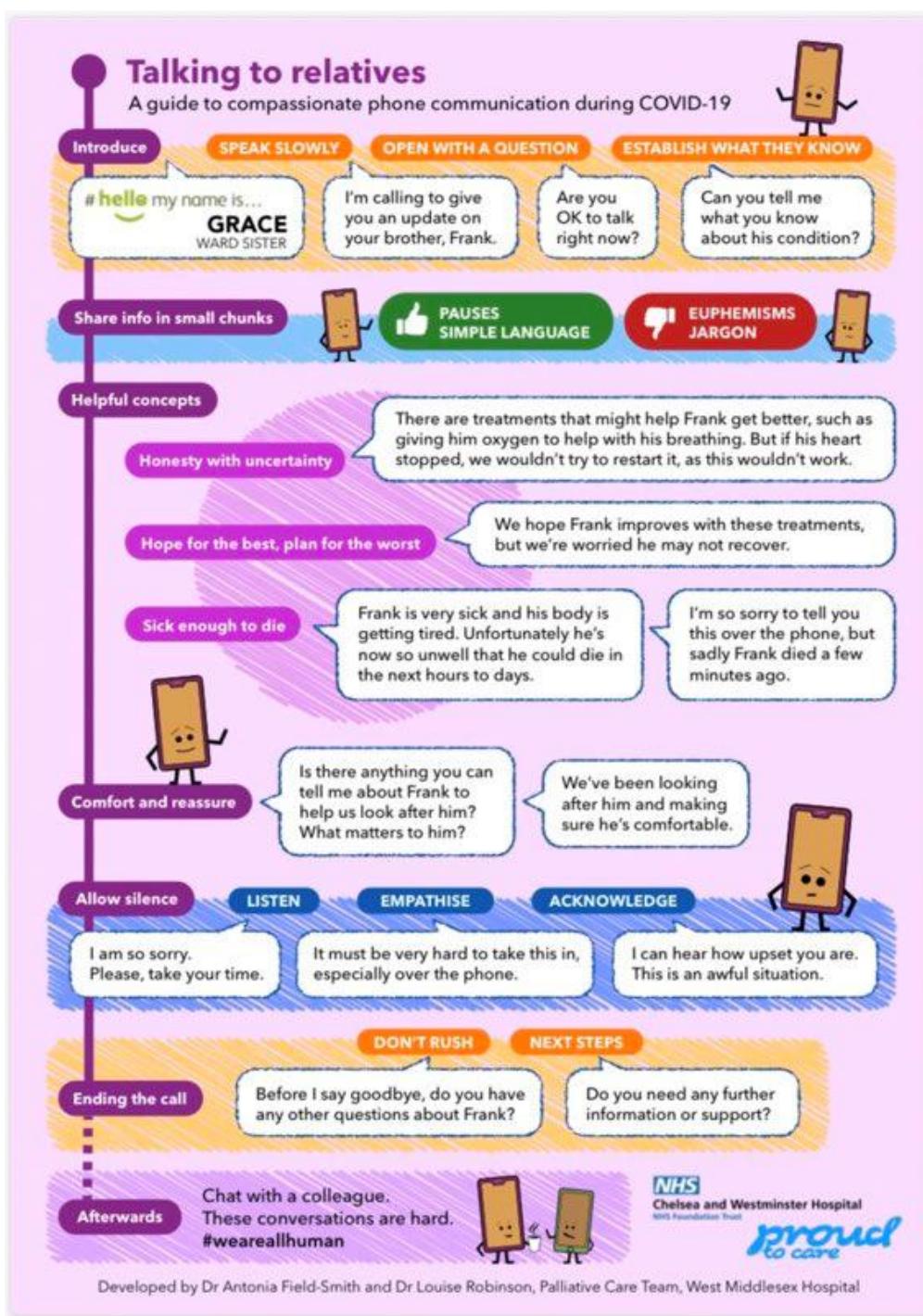
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- laurain.culliford@excellencepartnership.nhs.uk
- maha.alherish@excellencepartnership.nhs.uk
- jack.pumphrey@excellencepartnership.nhs.uk

# Compassion and reassurance

## Guide to compassionate phone communication

This single page infographic guide to compassionate phone communication and sharing uncertainty during COVID-19 was developed by Dr Antonia Field-Smith and Dr Louise Robinson, Palliative Care Team, West Middlesex Hospital, Chelsea and Westminster Hospital NHS Foundation Trust. It was shared by [Dr Antonia Field-Smith](#) on Twitter, where she encouraged it to be used and shared widely.



# Alternatives to usual activities

## Virtual meetings/groups

Emma Webster, Registered Mental Health Nurse in the Early Intervention in Psychosis Team, Merseycare NHS Foundation Trust shared their use of Attend Anywhere.

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

As the need for physical distancing continued, telephone calls in place of face-to-face contact were not sufficient to meet service user needs. However, video call software was not in line with Trust policies on maintaining security and confidentiality. We needed to find a solution that would protect staff and service users from the risk of transmission, but also provide a suitable alternative to face-to-face contact.

### 2. What did you do?

Attend Anywhere Virtual Consultation software was rolled out to all Merseycare mental health teams over a two-week period.

All teams were provided with training on how to use the new, secure software to arrange and hold virtual consultations with service users.

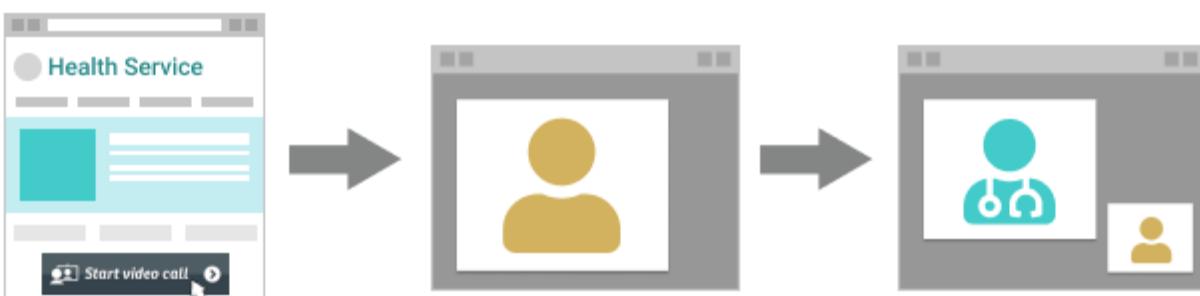
### 3. How did it go?

It has been very positive. We are using it to provide consultations, CPA reviews, family therapy, family intervention and cognitive behavioural therapy.

We have tailored the virtual waiting room to our specific requirements and are now discussing having a duty practitioner to enable a 'drop in' service in addition to planned appointments.

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

Service users have generally engaged well and have liked the option to continue face-to-face contact. We would strongly recommend using Attend Anywhere to provide a more agile virtual service.



### Patient arrives...

Patient visits your website, clicks the **Attend Anywhere Button**, and enters the online Waiting Area

### Waits in a private room...

While waiting, **patient** sees messages sent by the service, and current position in the queue

### Clinician joins them

**Patient** and **clinician** meet in the **patient's** video room

# Visual and written information

## COVID-19 information

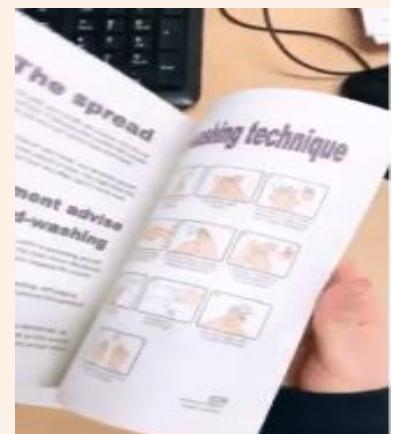
[Beth Blackburn](#), Mental Health Nurse on Keats Ward, Greater Manchester Mental Health NHS Foundation Trust, shared an idea on how to communicate COVID-19 information to patients through information booklets.

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

We have a daily meeting on the ward at 10am where a nurse will deliver the latest news on COVID-19 and also reiterate the latest guidelines and importance of handwashing, social distancing, etc. The ward is a female acute ward and we were having difficulty getting our patients to understand the seriousness of the virus and the importance of what we are being asked to do by the government.

### 2. What did you do?

I made booklets as a visual aid for our patients to read in their own time and keep so they could refer back to them.



### 3. How did it go?

It went well – we had a discussion with our patients about their anxieties and any questions they had. They found this helpful and appreciated a visual format rather than having someone talk to them. Having this booklet also allows people with anxiety to ask questions outside of the morning meeting.

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

We learnt that information needs to be delivered in different formats – everyone learns differently and sometimes people are better able to understand written/visual information.

Langdon Hospital's Engagement and Involvement Team, and Occupational Team at [Devon Partnership NHS Trust](#) shared how they have revived their Patient Voice newsletter and produced resource packs for families/carers.

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

Maintaining a flow of positive news stories to balance the negative news and more restrictive conditions patients are experiencing in secure services as a result of COVID-19 changes. We also wanted to keep families and carers informed and provide reassurance.

## 2. What did you do?

We created positive news Powerpoints and have also reignited our Patient Voice paper sharing good news and supporting communication across our system. We also produced a resource pack for families and carers.

### **3. How did it go?**

So far this has gone well and we have had great feedback from patients.

The resource packs were designed to provide entertainment, interest and comfort to those self-isolating at home.

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

It has been very positive to share good news stories in the current situation and support communication across our system.

Any inpatient service would benefit from a similar approach.



**Claire Husband**, Ward Manager at Oak Rise, Tees, Esk and Wear Valleys NHS Foundation Trust shared their idea for 'PePe' the PPE nurse created by service users and staff at the learning disabilities unit in York.

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

Our patients with a learning disability understandably had worries and concerns about the personal protective equipment (PPE) worn by the team, as they are not used to seeing staff dressed like this.

## 2. What did you do?

We wanted patients to understand about each item and reassure them why it was necessary. Each piece of PePe's uniform is clearly labelled and accompanied with an easy to understand description of what it does. The labels include: "it's still me under all this" and "the special clothing protects you and me from viruses and germs".

### 3. How did it go?

Implementing this idea has gone well, and the staff use 'PePe the nurse' to talk about personal protective equipment with the patients. We are going to do another copy of this idea too, for one of our other buildings – a male version to replicate PePe.

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

We found that learning happened when the patients were creating 'PePe the nurse'. Patients were able to learn and ask questions as they went along, while having some fun too!



[Beth Blackburn](#), Staff Nurse on Keats Ward, Greater Manchester Mental Health NHS Foundation Trust shares an idea on a 'covid-19 dice'.

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

We found that we were repeating the same coronavirus information, which became uninteresting for our female patients. Therefore, I wanted to create a fun and active way for the government guidance to continue to be discussed.

### 2. What did you do?

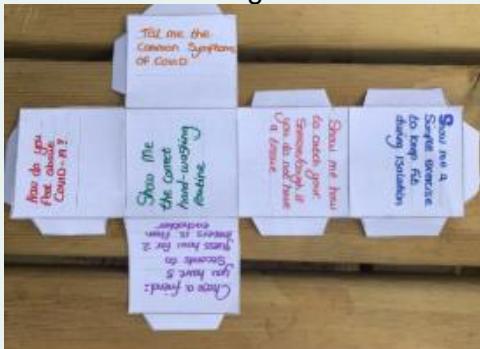
I created a 'covid-19 dice' which was made up of 'show me' and 'tell me' statements. The game took place in the garden. I also created a time frame of 5 seconds for the female patients to complete the 'show me' statements, which increased the excitement and fun.

### 3. How did it go?

The game went really well, and the patients were fully engaged throughout the game particularly, as there was a variety of different tasks in the games.

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

Making light of serious situations can sometimes help decrease anxieties. I found that this was a good idea, in order to get the ladies working together. We also found that the social distancing wasn't being adhered to during the first game so, we made a bigger circle of social distancing and the dice was rolled into the middle.



[Fiona Melding](#), Ward Manager on Beech Ward (adult male acute ward) in Greater Manchester Mental Health NHS Foundation Trust shared how the ward communicated COVID-19 information visually.

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

Patients were experiencing heightened anxiety due to not understanding what COVID-19 was, or the reason why they might be asked to self-isolate. Staff were also worried about how to talk to patients about the pandemic, as well as coming into work on the ward whilst others were working from home.

### 2. What did you do?

Created a COVID-19 notice board to answer questions raised by staff and patients. The board included information on PPE – a picture of a nurse wearing PPE explaining why this is advised, information on swabbing, etc. – to help make patients and staff aware of the process.

### 3. How did it go?

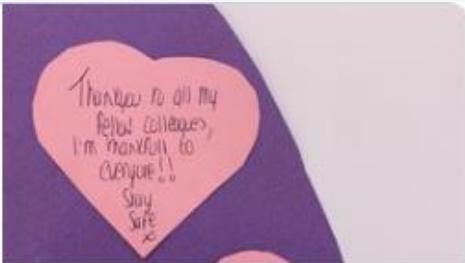
Received positive feedback from patients and staff. The information provided was consistent and relevant to all staff. Every week on the ward we also hold a reflective practice group facilitated by me and one of our psychologists.

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

These interventions have been positive and helped staff feel better about things. Staff report feeling more relaxed, happy, positive and thus able to go back out to do their job.



## Good news stories



South West Yorkshire Partnership NHS Foundation Trust shared how staff and service users in their Forensic Services at Newton Lodge have decorated their entrance with positive messages about the NHS. They have created blank hearts and made these available at Newton Lodge for people to add their messages.  
[@frauhowes](https://twitter.com/frauhowes)

## Normalise psychological responses

### Permission not to be okay

PRoMIS was established in 2020 with the aim of promoting the psychosocial recovery of people affected by major incidents. It is directed at adults, young people and children normally resident in Scotland who are affected by major incidents within Scotland, other parts of the UK or abroad.

PRoMIS is a Scottish Government initiative, led by Scotland's two specialist trauma services: the Glasgow Psychological Trauma Service and the Rivers Centre in Edinburgh. The approach taken is based on the principles of Psychological First Aid (PFA), which is recognised internationally as best practice in promoting resilience following trauma exposure.

#### **Guidance produced by PRoMIS includes the following advice:**

- Provide education about normal responses to exposure to extreme stress, including recognition of the range of reactions and validation of the normality of the reaction.
- Psycho-educational information about normal responses to a pandemic should be developed and promoted as part of the national communications plan, and made available in leaflets and on appropriate websites.
- All telephone information lines should be staffed by trained personnel who are able to provide psycho-education on normal responses to extreme stress and who can reassure people and encourage positive coping. They should be able to direct people to appropriate psychosocial support.

### Be available, create safe, supportive spaces

Staff wellbeing has become increasingly important during COVID-19, teams have created safe, supportive spaces for staff. Here are some ideas mental health teams have shared:

Jackie Mann, Organisational Development Specialist Practitioner, Leicestershire Partnership NHS Trust, shared this 'Wobble Room' created for community nurses by NSPCC Beaumont Leys. Encouraging community nurses to use this if they need a break or a moment of quietness.



### [Barnsley Hospital NHS Foundation Trust](#)

shared their designated Wobble room where staff can go to 24 hours a day if they feel a little overwhelmed or upset.



Several Trusts and wards have made use of a 'Going Home Checklist' during handovers at the end of a shift.

### Going home checklist

- Take a moment to think about today.
- Acknowledge one thing that was difficult during your working day - let it go.
- Consider three things that went well.
- Check on your colleagues before you leave - are they OK?
- Are you OK? Your senior team are here to support you.
- Now switch your attention to home - rest and recharge.

Design by:  
Doncaster and Bassetlaw Teaching Hospitals

### Going home checklist

- Take a moment to think about today
- Check on your colleagues before you leave - are they OK?
- Acknowledge one thing that was difficult at work today - let it go
- Are you OK? Your senior team are here to support you
- Consider three things that went well
- Now switch your attention to home - rest and recharge

Improving Lives

Doncaster and Bassetlaw Hospitals NHS Trust

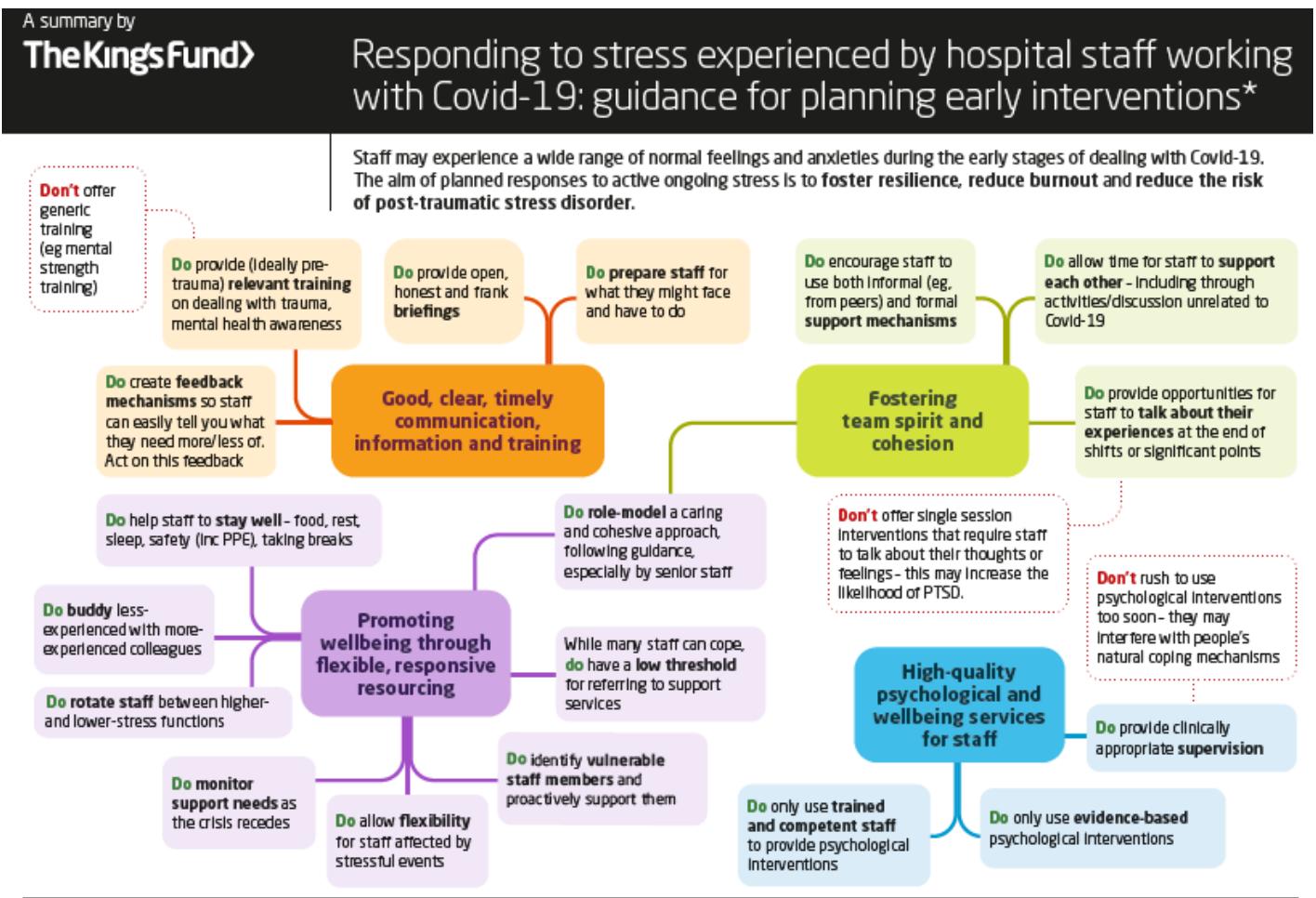
Greater Manchester Mental Health NHS Foundation Trust

17

# Visible and supportive leadership

## Frequent and simple written/video communication

The King's Fund created this infographic to summarise the rapid guidance developed by the COVID Trauma Response Working Group



Lauren Henden, Mental Health Nurse on Keats Ward, Greater Manchester Mental Health NHS Foundation Trust shared an idea on their use of the SBAR tool.

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

We were trying to improve communication between the nursing and medical team. We recognised that this is an anxiety provoking time and because of this, at times, putting our concerns and recommendations forward can sometimes be difficult and not always concise and clear.

### 2. What did you do?

We used a template SBAR tool and put in information that would be used for a suspected COVID-19 case that was specific to our ward. However, it can be adapted for other wards. This was to structure the information that was being shared at the relevant time.

### 3. How did it go?

So far, we have had positive feedback from the nurses that this has helped their confidence with escalating their concerns. This has also been shared with other wards in the unit who have also given positive feedback about their use of the tool.

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

We had the help of the physical health lead for the unit to check over the completed tool and ensure all the information needed was there and in the correct part of the tool. Staff wellbeing and development is highly valued on Keats Ward and we have learnt from feedback that structured tools can help aid communication and confidence within practice.



## Recognition, thanks and rewards

Mental health teams and Trusts across the country have been sharing many different expressions of positivity and appreciation during the challenges they are facing. Here are some ideas teams and Trusts have shared:



[Peter Phiri](#), Ward Manager on Stanley Ward in South West Yorkshire Partnership NHS Foundation Trust, shared this 'solidarity wall' created by the staff on the ward.



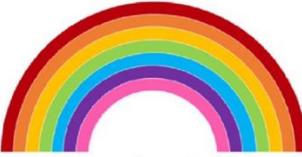
[Suzanne Taylor](#), Occupational Therapist at Greater Manchester Mental Health NHS Foundation Trust, shared these thank you cards made by the young people on Gardener Unit. The cards were distributed to local key workers including those in supermarkets, post offices and emergency services.



[Liz Brinklow](#), Occupational Therapist at Seward Lodge, shared how Hertfordshire Partnership University NHS Foundation Trust are showing their appreciation for staff, providing them with thank you hampers to keep them going.

[Sonia Nosheen](#) from Bolton NHS Foundation Trust shared her idea for a rainbow wall. The purpose of a rainbow wall is to spread positivity, celebrate the great work of your team and kindness of colleagues, create an ideas bank of positive changes you've made that you want to keep on your ward or in your team, and to inspire and lift each other. This would also be a great activity to do with patients.

# 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



*(Speech bubbles from left to right)*

- It's really good we've...
- I just want to thank my team for...
- We are going to stick with these new ways of Working...
- I'm really Proud of...

@sonia\_sparkles Sonia sparkles.com

## Human connection and peer support

### Shared learning opportunities/reflective space



[Dr Richard Harris](#) at Sussex Partnership NHS Foundation Trust shared how two higher trainees provided a bespoke Covid-19 physical health simulation session to refresh senior colleague's knowledge of physical health assessments for the wards over the coming months.

### Daily buddying

With increased workloads and rapidly changing staffing levels, it is recommended in the [Kings Fund infographic](#) above, and other guidance about responding to stress experienced by hospital staff, that a buddy system can be a useful mechanism for supporting staff. This can take various forms, for example:

- peer support
- buddying less experienced staff with more experienced colleagues
- buddying staff from different departments or roles.

## Additional Resources

Many of the resources below and more can be found on our [COVID-19 Mental Health Improvement Network](#) on Knowledge Hub. To access this, email your request to join: [covid19network@rcpsych.ac.uk](mailto:covid19network@rcpsych.ac.uk)

- Beat – Eating Disorders and Coronavirus: [increased online support for patients and families](#)
- Charlie Waller Memorial Trust – [Talking to your children about coronavirus – Tips for parents](#)
- COVID Trauma Response Working Group – [Coping with Stress: Advice for hospital staff](#)
- Greater Manchester Mental Health NHS Foundation Trust – [COVID-19 Information Booklet](#)
- Greater Manchester Mental Health NHS Foundation Trust – [SBAR Tool for COVID-19](#)
- Institute for Healthcare Improvement (IHI) blog: [Let's Stick Together While Staying Apart](#)
- IHI blog: [The Keys to Effective Telemedicine for Older Adults](#)
- IHI blog: [Using QI Methods to Adapt to Virtual Care Delivery](#)
- IHI blog: [What to Do and Say to Support Psychological Safety During the COVID-19 Pandemic](#)
- Institute for Patient- and Family-Centred Care – [Webinar on 'Patient- and Family-Centred Strategies in the Time of COVID-19'](#)
- NHS Education for Scotland – [Psychological First Aid Infographic](#)
- [The Conversation Project](#) – dedicated to helping people talk about their wishes for end-of-life care
- The Covid-19 Health Literacy Project – [COVID-19 Fact Sheets in 35 languages](#)
- The Health Foundation – [Webinar on video consultations](#)
- The King's Fund – [Covid-19: why compassionate leadership matters in a crisis](#)
- The King's Fund – [Rapid Guidance Stress Response Infographic](#)
- The Workshop – [How to talk about COVID-19](#)
- University of Oxford – [A guide on video consultations in response to Covid-19](#)
- VitalTalk – [COVID-ready communication skills: A playbook of VitalTalk Tips](#)