

Training in Forensic Psychiatry during the uncertainty of the COVID-19 pandemic

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In February 2020, I was looking forward to starting my placement in a high secure hospital. Little did I know the turn this placement would take; becoming a very different training experience to the one I anticipated. By that point COVID-19 was spreading rapidly across national borders and it was a matter of time before it reached the UK. In those early days, I was under the misapprehension that the high secure environment would shield me from exposure to the virus; however, it didn't take long for reality to hit me.

The main difficulty at the beginning was the overwhelming uncertainty about what the future entailed. Around the same time, I started leading a research project exploring the role of hindsight bias in retrospectively assessing risk; trying to recall past uncertainty about the future when one has knowledge of the outcome can be difficult. This is exactly how it feels now, when I reflect on how COVID-19 infiltrated our lives; we were trying to predict the future from a position of relative ignorance. The calm before the storm, with no answers to countless questions and everyone preparing for the worst case scenario, was a frightening time.

In mid-March I spent seven days self-isolating, after a few of my colleagues had already done so. On my return, the impact of COVID-19 was no longer theoretical and emails detailing upcoming changes started filling our inboxes. Within a week, the ten consultants and eight juniors who used to populate our offices were reduced to two consultants and two juniors, widely spread across an empty building. The site felt like a small ghost town, where only essential movement took place and people waved at each other from a distance, apprehensive to approach.

I had to accustom myself to working from home, which I've always considered a luxury to be envied. It turned out that the lack of structure,

the logistical difficulties associated with establishing a working environment within my home and the absence of face to face contact (with colleagues and patients) were much bigger challenges than getting up at 7am and going to work every day. My job was no longer what I had opted for and I was gaining very little satisfaction from it.

Surprisingly, my first week back on site involved a significantly reduced workload. A new seclusion/segregation policy meant reviews in person were minimised and routine tasks were adjusted; CPA reviews were temporarily postponed and ward rounds were held virtually. The atmosphere on the wards had changed and it was an eye-opening experience to be a bystander witnessing this.

I had never previously seen colleagues working so collaboratively and being as compassionate and supportive to each other, as they were during these challenging times. Despite being part of a team for years, I felt this was a truly unique kind of teamwork. Even the patients were presenting differently, appearing to keep a low profile on the ward. I wondered what it was like for them to have their already restricted lives, further limited by some of the measures imposed on site due to COVID-19. Face to face contact with their Responsible Clinicians was significantly reduced due to them not being on site as often. That brought additional disruption to the patients' lives, with some worrying about the impact this would have on their progress.

That's when I started wondering if there was anything to learn from being faced with this huge and potentially catastrophic threat, beyond anyone's control. As the new generation of Forensic Consultant Psychiatrists, we are going to be the pioneers of practicing in the post-COVID-19 era; therefore, it is important for us to consider any lessons learnt. I came to realise that despite having missed out on planned prison sessions and assessments, I've managed to develop certain team working and leadership skills which would have been difficult to acquire otherwise. I had the chance to contribute to the transformation of our services to meet the unprecedented demands of this crisis. Thus, I experienced first-hand how crucial being adaptable and flexible is in delivering and maintaining quality of care at all times, no matter the circumstances.

The COVID-19 outbreak turned out to be a valuable opportunity to gain essential skills which have undoubtedly made me a better clinician. Despite the hindsight knowledge we now own about the impact of COVID-19 upon our services though, I am aware that we are still looking into an

uncertain future, being difficult to predict what the next phase of post-COVID-19 will bring.

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