Information Note on Delivering the Mental Health (Wales) Measure 2010 during Covid-19 pandemic

April 2020
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Purpose of information note

1.1 This information note is being issued to communicate information of an advisory nature in recognition of the current challenges for mental health providers in Local Health Boards and partners across Wales in continuing to deliver mental health services under the Mental Health (Wales) Measure 2010 (“the Measure”) whilst also responding to emerging public health advice in response to Covid-19.

1.2 In the context of a quickly changing situation, this note sets out some of the particular challenges for the Measure and explains what actions the Welsh Government has taken to ensure that we continue to work with relevant stakeholders to understand and seek to resolve these live challenges and in light of any further public health and government advice.

The Measure and Covid-19

1:3 At its heart, the Measure is intended to enable timely access to the right support to prevent or reduce mental health distress; to plan and deliver person-centred and recovery-orientated care and treatment with others; to make sure that those discharged from services know how to access support in the future and that independent advocacy is available where required.

1:4 Delivering services across all four parts of the Measure may be exceptionally challenging when:

a) urgent public health advice directs social distancing measures for the protection of both people needing access to mental health services and those working in and delivering those services;

b) the mental health workforce itself may be directly affected by Covid-19 leading to a reduction in the workforce through sickness absence or self-isolation; and,
c) concerns in the face of a public health emergency may lead to further stressors on people’s mental health and increased demand on services.

1:5 Organisational management of Covid-19 may require the re-deployment of staff to cope with service pressures across the health and social care system. In mental health services, this re-deployment and reconfiguration of who, how and where services are delivered may not necessarily align with what is currently stated in Local Health Board Part 1 Schemes or recognised as secondary mental health services.

1:6 In these cases, an operating principle for identifying who is a “relevant patient” during the pandemic period will be to consider if the services being provided to an individual would ordinarily be delivered by Secondary Mental Health Services under the meaning of the Measure.

1:7 In order to deliver services and comply with public health advice such as social distancing and self-isolation, there are very likely to be situations that make it difficult for organisations and practitioners to follow the National Service Model for Local Primary Mental Health Support Services, the Code of Practice to Part 2 and Part 3 of the Measure and Delivering the IMHA Service in Wales and any other associated code or guidance to their fullest.

1:8 It is suggested that practitioners should record any reasons or factors connected to Covid-19 that are impacting on how they are delivering services under the Measure and that service leaders should keep this impact under review.

1:9 Public health advice will also require people accessing or in contact with services to adjust to different ways of services being delivered and individuals will need clear, supportive information and advice on why and how to do so.

1:10 The system is adjusting to carrying out assessments and interventions, by necessity, mainly via telephone or an online medium. This will potentially raise new practice and system challenges to resolve, particularly in reaching and having contact with individuals who are unable to engage in this way.

1:11 The emergence of Covid-19 does not “switch-off” the Measure. At the same time as presenting exceptional challenges, it highlights the
protections this legal framework can offer during a public health emergency. It is important that the guiding principles of the Measure, as set out in the Code of Practice be considered and applied as far as possible during the covid-19 pandemic.

1:12 The Care and Treatment plan for example, is a vital tool to communicate and safeguard continuity of care and treatment, particularly given the higher risk of the sudden absence of a Care-Co-ordinator from work. Individual crisis support plans can be reviewed and adjusted in light of public health advice to ensure that they can still deliver the same support at the right time if needed. This should include up to date contact details, particularly in the temporary absence of the Care-Co-ordinator and changes to usual service delivery.

1:13 The priority in the face of these unprecedented challenges is that people have access to mental health support in the best way possible whilst ensuring that public health advice is adhered to in order to protect the health of citizens and the workforce.

Resolving the challenges

Welsh Government

1:14 In recognition of these challenges, and the impact that they may have on how mental health services can be delivered, the Welsh Government has:

   a: suspended national data collection under the NHS Delivery on the Mental Health (Wales) Measure 2010. This will reduce the burden of national reporting, although data should continue to be collected locally.

   b: established a National Mental Health Collaborating Centre (NMHCC) to pull together the latest guidance relating to the provision of mental health services and to provide a central point of contact. Queries or concerns regarding the operation of mental health services during the Covid-19 outbreak can be directed to the NMHCC. It will also provide a platform to share good practice.

The website can be accessed at http://www.wales.nhs.uk/easc/nmhcc and queries or request for additional guidance can be emailed to GIG.NCCU@wales.nhs.uk