

Covid-19 IAPT Services Webinar

25th March 2020

NHS England and NHS Improvement



Welcome

- Upon arrival to the webinar, please MUTE on connection.
- Please remain muted throughout the presentation.
- Please use the CHAT function throughout the webinar to ask us questions and provide comments/ input, and we will try to respond to them all.
- Additionally, we will collate them and get answers back to you as soon as we can.
- This webinar will be recorded and we will share the recording, with the slides, after the webinar.

Any queries you have after the webinar, please contact the IAPT team:

england.mentalhealth@nhs.net

Agenda



- Key messages re IAPT service delivery
- Digital solutions to delivering care
- Clinical considerations
- Practical advice for patients
- Education and provision of IAPT training
- National support and guidance resources
- 'Live' Q&A

Key messages re service delivery

- The Coronavirus situation is likely to markedly increase current levels of anxiety and depression. Even when transmission rates decrease there are likely to be many new cases of health anxiety, PTSD, and depression.
- IAPT is England's main treatment service for such problems and is very successful. PHE's Every Mind Matters website signposts to IAPT
- Now is NOT the time to consider standing down IAPT. On the contrary, we need it more than ever and have to grow the workforce to deal with the wave of new cases that we are likely to get as the year progresses.
- BUT services need to adapt their delivery to fit with the physical social distancing that is **essential to control the spread of the virus**.
- **Services should switch, immediately, to online/telephone/digital modes of service delivery, offering a choice to people.**
- Develop contingency plans that work in your local context. **Please share any learning with the IAPT national team and local networks, so we all learn from each other.**
- What follows is intended as guidance, rather than prescriptive instruction.

Key message re performance



- In light of the current situation with Covid-19, national assurance activity for IAPT standards is being suspended for Q1 initially.
- We will continue to monitor access and outcomes via the IAPT dataset and we would hope that all services continue to offer the very best service they can in these difficult times.
- We would expect that some level of performance monitoring still takes places locally, but this will be determined by the needs and priorities within each local system.
- This is an unprecedented situation and we expect there to be an inevitable impact on the IAPT standards, both now and into the future.
- Our immediate priority is to ensure patient safety and continuity of care by focusing on ensuring your staff are supported to work from home making sure services continue to be delivered

Digital solutions to delivering care



- All providers are encouraged to consider how delivering care digitally might help maintain continuity of care and make best use of resources.
- In coming days we will be providing guidance on delivering IAPT services by non-face to face methods.
- Services should work with leaders locally to consider rapidly increasing the availability of alternative channels for appointments, digital therapies and platforms to support care, digital supervision and digital team meetings.
- NHSX has published updated [guidance](#) on their website on information governance relating to the use of messaging and video consultation platforms:
 - Mobile messaging (including WhatsApp and Telegram) can be used to communicate with colleagues and patients/service users as needed, where there is no practical alternative and the benefits outweigh the risk.
 - Video conferencing is encouraged. Tools such as Skype, WhatsApp and Facetime, may be used if necessary and appropriate and there is no existing alternative.
 - Staff who are homeworking and using their own equipment should check that their internet access is secure and security features are in use. Information should be safely transferred to the appropriate health and care record as soon as it is practical to do so.
 - The information Commissioner's office has also published a [statement](#) and [Q&As](#) to complement a [joint statement](#) from the Health regulators. Further questions can be directed to [the NHSX IG Policy team](#).
- Services are also encouraged to consider the skills and training their staff will need to deliver care using digital tools and platforms.

Clinical considerations



- Services may want to develop plans for dealing with a surge in demand, linked to Covid-19 related concerns. For example, having a dedicated information page on their website with simple advice for those who are anxious or self isolating. Perhaps manning a dedicated call line.
- Make sure clear and robust care pathways are in place with links to the wider healthcare system.
- Look after staff – ensure regular, virtual, team meetings and clinical supervision sessions continue. Consider if more flexible working can be put in place for staff with family or personal constraints during core hours. Patients will also benefit from this.
- For IAPT staff, feeling under pressure is a possible experience for you and many of your health worker colleagues. It is quite normal to be feeling this way in the current situation. Stress and the feelings associated with it are by no means a reflection that you cannot do your job or that you are weak. Managing your mental health and psychosocial wellbeing during this time is as important as managing your physical health.
- More guidance (including treatment adaptations for specific conditions such as PTSD, Social Anxiety, OCD, Health Anxiety, and Worry) will be provided through central communications. Ensure that you are linked into this and cascade information to the staff team so that everyone understands how the situation is being managed centrally and locally.

Practical Advice for patients (1)



- Coronavirus is dangerous. You need to follow government advice and take all necessary steps to minimize transmission and protect the vulnerable.
- BUT don't spend all your time checking your phone, watching, reading or listening to news for updates. That just generates anxiety and worry. Try to limit yourself to seeking updates at planned times, once or twice a day.
- Use Trusted websites, such as “Coronavirus (COVID-19): UK government response”, “WHO” and “NHS UK” . There is some fake news on social media. Get facts, not rumours.
- Keep active and make plans for your day, so you aren't just dwelling on COVID-19. You may be working from home or otherwise living differently. But keep regular routines and schedules as much as possible. Give yourself breaks and rewards. Consider creating new routines for your different circumstances. If you find you have more time than usual, use it for things you find meaningful. Maybe read that book or watch a film you wanted to get into. Assemble photos, call friends, catch up with some chores, etc.
- Become MORE socially connected. We have to physically distance ourselves from others, but we are social beings. Compensate by reaching out to friends and colleagues using social media, phone calls, facetime, skype, zoom etc. This will combat the loneliness we can feel when physically isolated. Create regular ways of linking with your work colleagues even if you are all working from home. Consider creating a WhatsApp, Slack or other social media group.
- Be kind to others. Kindness is a double blessing. It makes the person who receives a kind act feel better and it makes you feel better for doing it.

Practical Advice for patients (2)



- Don't inflate the risk – feeling anxious at times like this are perfectly normal. Anxiety can lead to physical symptoms, such as shortness of breath, that can make us worry that we have the virus, but this may not be the case.
- Use your past coping skills, or tools you have previously learned. No matter what the focus of one's anxiety, using what's worked in the past to help manage those feelings is usually a good place to start.
- Look after yourself. Get plenty of sleep, eat regularly, moderate alcohol intake, exercise (but avoid gyms and crowded places). Walks in parks, go into your garden (if you have one), cycle etc. All this helps your immune system and mood.

Many websites have useful advice and mental health tips. These include

Anxiety UK <https://www.anxietyuk.org.uk/blog/health-and-other-forms-of-anxiety-and-coronavirus/>

OCD-UK <https://www.ocduk.org/ocd-and-coronavirus-top-tips/>

Every Mind Matters <https://www.nhs.uk/oneyou/every-mind-matters/>

World Health Organization https://www.who.int/docs/default-source/coronaviruse/mental-health-considerations.pdf?sfvrsn=6d3578af_8

BABCP Covid-19 Anxiety Blog <http://letstalkaboutcbt.libsyn.com/coping-with-anxiety-about-coronavirus>

Delivery of IAPT training (1)



Current HIT and PWP Trainees

- We will need the capacity that our current trainees will bring to services later in the year. A cohort of 20 PWPs will see 10,000 patients
- We are working across HEE, with university course directors, and course accrediting bodies to support trainees to complete their training as planned.
- Most HIT and PWP courses are now at an advanced stage in switching training to digital delivery including streaming lectures including assessment of competence via interactive platforms. If any courses are struggling we can connect them with others.
- Trainees should be enabled to deliver therapy digitally, just like qualified staff
- Trainees will need extra support from courses and services at this time. We have asked courses to include training on delivering therapy and interventions digitally and by telephone as part of the current training.
- The course accrediting bodies (BABCP and BPS) have issued guidance that they will apply flexibility and work with courses as they change. Trainees will still need to achieve competence, but methods of delivery will change.

BABCP - <https://www.babcp.com/Therapists/Remote-Therapy-Provision.aspx>

BPS - https://www.bps.org.uk/sites/www.bps.org.uk/files/Policy/Policy_-_Files/Effective_therapy_via_video_-_top_tips.pdf

Delivery of IAPT training (2)



Current HIT and PWP Trainees

- Current disruption may mean some trainees are delayed in completing. HEE will work to support HEIs where this leads to capacity pressures. Services should continue to employ these trainees to completion and beyond, after the 12 month period of salary support finishes.
- HEE will support people to complete programmes should they have to interrupt and or extend
- Some have been concerned about trainees learning to deliver PTSD treatment through digital platforms. Clinical experts in trauma-focused PTSD from the Oxford Centre for Anxiety Disorders and Trauma have confirmed that the treatment can be delivered successfully by remote means. The challenges of teaching trainees to do this are outweighed by the need to ensure we have sufficient therapists to treat PTSD during the next year. We will therefore go ahead as planned and require a PTSD training case in the current cohort, in order to enable this. An expert group will produce a training video and resource pack to support courses with this implementation.
- HEIs (Higher Education Institutions) are establishing a collaboration platform to share best practice on course delivery in this period of change.

Delivery of IAPT training (3)



Recruitment to next HIT and PWP cohorts

- We are supporting HEIs to continue to recruit to their next cohorts, using digital platforms. We need to maintain the flow of new workforce to ensure that IAPT capacity is compromised as little as possible.

LTC Top-up and Modality Training

- Understandably, some imminent courses have been delayed due to current disruption and pressure on services.
- We are asking HEIs to enable future delivery of these courses through digital platforms, and to teach digital delivery of the therapy.
- HEE will conduct demand mapping for modality training for the current year and courses will be commissioned as required to ensure choice of therapy continues.

National support and guidance resources



- Please use the materials provided in the **Campaign Resource Centre** to display information in your premises, especially in your reception and waiting areas. Public Health England (PHE) is leading on clinical advice on COVID-19, and regularly publishes new advice for clinicians on management of potential cases, patient information and advice. You can find links to this on our coronavirus website: england.nhs.uk/coronavirus/
- Please make sure **patients, families and carers receive up-to-date information on COVID-19** and know what to do in case of suspected infection.
- In discussion with patients make sure they have:
 - up-to-date details of emergency contacts and key service contacts
 - access to information on coronavirus and advice on how to avoid catching or spreading the virus
 - information on what to do in case of suspected infection: use the [NHS 111 online coronavirus service](#). Only call 111 if you cannot get help online.
- A new NHS Futures Collaboration platform has been set up to house all communications and guidance during the Covid-19 pandemic. Included here is specific guidance from the IAPT programme and the webinar slides will be available too. This can be accessed here : <https://future.nhs.uk/MHLDAcovid19/grouphome>

Other resources available



- “NotAPWPGuru” Telephone working skills (amongst other helpful resources) - <https://t.co/827YbuWxw4>
- Mental Health Foundation - <https://www.mentalhealth.org.uk/publications/>
- RCPsych - [https://www.rcpsych.ac.uk/about-us/responding-to-covid-19/guidance-for-psychiatrists-and-other-professionals-working-in-mental-health-settings-\(covid-19\)](https://www.rcpsych.ac.uk/about-us/responding-to-covid-19/guidance-for-psychiatrists-and-other-professionals-working-in-mental-health-settings-(covid-19))
- Resources for children or parents - <https://youngminds.org.uk/blog/what-to-do-if-you-re-anxious-about-coronavirus/> and https://emergingminds.org.uk/wp-content/uploads/2020/03/COVID19_advice-for-parents-and-carers_20.3_.pdf
- Information about coronavirus in other languages (to give to patients) - <https://www.doctorsoftheworld.org.uk/coronavirus-information/>

Q&A

- Please use the CHAT function to ask us questions and provide comments/ input, and we will try to respond to them all.
- Alternatively, feel free to email us your questions/ comments at: england.mhldsincidentresponse@nhs.net

Thank you

We'd like to hear your views on:

- **What are services doing around setting up digital methods of delivery and are you finding barriers locally?**

Please email us your thoughts on: england.mentalhealth@nhs.net