

Yorkshire and the Humber Adult Mental Health  
Clinical Network

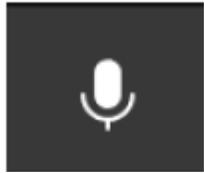
# Early Intervention in Psychosis Network

## EIP and COVID-19 Sharing Webinar

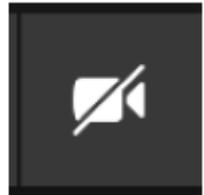
9 April 2020



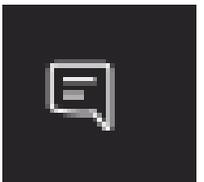
# Housekeeping



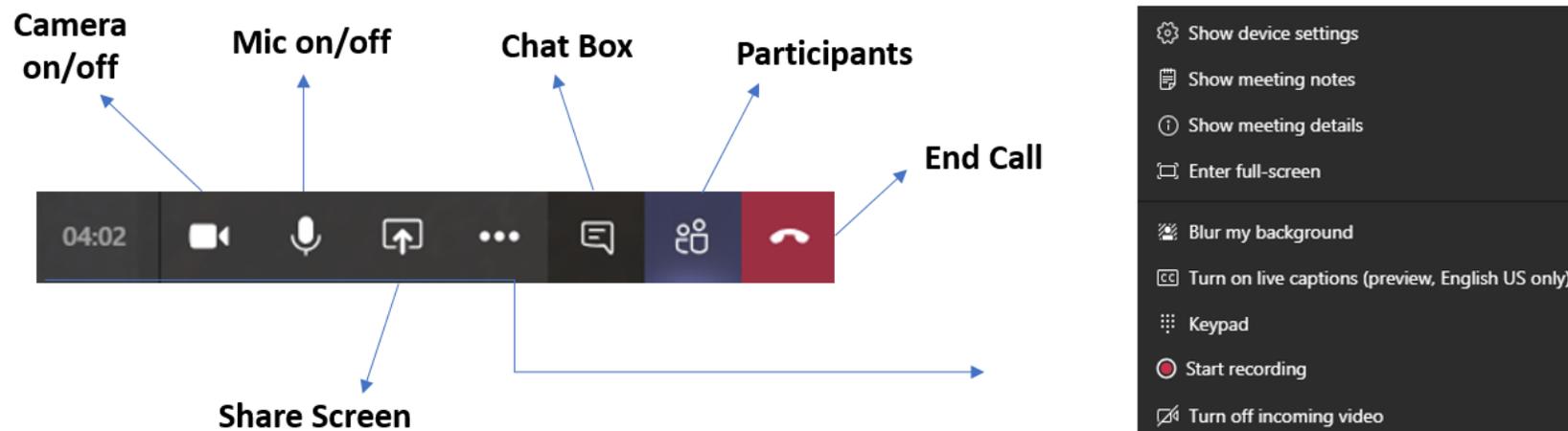
*Please remain on mute throughout the session, unless invited to speak – thank you.*



You are welcome to use the video function, however this occasionally causes bandwidth problems so you may wish to turn it off.



Whilst we will have an open conversation, please *feel free to use the chat box function* to ask questions or make comments.



# How are you today?

Please use the chat box to type in ONE word to describe how you are feeling today.



**Staying Mentally Well During COVID-19 is really important.**

Please see our webpage [here](#) for links to some top tips to help you, your friends and your family to look after your mental health during the COVID-19 outbreak.

# A summary of the current situation



- There is no confirmed timeline; this is a marathon, not a sprint
- Everyone working during this crisis will also be personally impacted; we all have vulnerable loved ones. We are all at risk and we have lost health care colleagues to the virus.
- Resources and staff are limited and we have to prepare for minimal staffing
- NHS staff wellbeing is of huge concern; both in relation to the virus and also from a mental health perspective, including suicide risk
- ‘Lockdown’ means people are abruptly taken from their routines; this increases the risk of mental health needs and alcohol/substance misuse. Support services are limited
- People staying at home increases the risk of inter-personal tension and domestic violence (information from Italy and China has highlighted this)
- People can’t get to regular health appointments and may be adopting unhealthy lifestyles. Even if they don’t catch the virus their health/wellbeing is at risk
- Stress from media coverage: People who are anxious are being bombarded with “*virusnews*” and have less social connectivity to help dissipate this
- People who have been treated in ICU (and their loved ones) will need specialist rehabilitation and support, including for their mental health. We currently do not have the capacity to offer this on the scale needed
- We can expect complications like depression, PTSD, addiction, as well as burnout and moral injury in health workers
- Many people will suffer financial impact. Social circumstances has significant influence on physical and mental wellbeing
- Increased demand for mental health services is anticipated in the aftermath. Deterioration in existing mental and physical illness is also expected

# A summary of the current situation



- Peak demand for the NHS is now predicted towards the end of next week
- ‘Lockdown’ looks set to continue, perhaps to the end of April, to slow the rate of spread of the coronavirus
- By ‘*flattening the curve*’ we have reduced the risk of demand exceeding capacity for ventilated beds in the acute sector.
- But this means that the pressure on the wider health system, including mental health, is set to last for longer.
- People with SMI will be especially vulnerable to Covid related ill health
- We need to prepare for:
  - Reduced capacity at the peak of the outbreak and beyond
  - Working differently to ensure social distancing when delivering care
  - Prioritising new assessments and interventions to reduce risk and relapse
  - Preventing increased pressure on crisis pathways and the acute sector
  - Offering support to other priority mental health services
  - Increased demand for mental health services in the aftermath.
  - Rapidly recovering to normal service

# Adult Mental Health Work Programme

## EIP Guidelines for Q1 2020/21

Policy Area	2020/21 Original deliverable as stated in the MH Implementation Plan	Immediate Q1 focus and adapting in context of COVID-19	What are CCGs/Providers doing?
<b>Community MH (incl. EIP, IPS &amp; physical health)</b>	A total of 280,000 people with SMI will receive a physical health check	<ul style="list-style-type: none"> <li>Confirm local arrangements for delivery of PH SMI checks in current context – national steer to follow.</li> <li>Where data automatically flows from primary and secondary care to CCGs and is not burdensome to collect please submit; manual data collection that impacts on COVID-19 planning and response can be de-prioritised or a nil-response submitted (data completeness issues will be flagged in future publications).</li> </ul>	
	A total of 20,000 people will have access to Individual Placement and Support services	<ul style="list-style-type: none"> <li>Expected service shift towards supporting clients with job retention and job loss.</li> <li>Continue to utilise 2020/21 transformation (Wave 1/2) and CCG baseline funding.</li> <li>Continue to flow MHSDS data on IPS referrals and access where possible and not burdensome.</li> </ul>	
	<b>The 60% Early Intervention in Psychosis (EIP) access standard will be maintained and 60% of services will achieve Level 3 NICE concordance</b>	<ul style="list-style-type: none"> <li><b>Ensure EIP services maximise use of digital channels to support continuity of care where possible.</b></li> <li><b>Continue to flow MHSDS data on two-week wait element of the standard where possible.</b></li> </ul>	

# National and regional messages

- Work on Mental Health, Learning Disabilities and Autism (MHLDA) is being led nationally by Claire Murdoch and the National Mental Health Programme and is called the: **Mental Health, Learning Disabilities and Autism COVID-19 Response Cell**
- There is an NHS Futures Platform that has been set up to house all guidance/information with regards to MHLDA. The policy areas featured on the site are:
  - Adult Mental Health
  - IAPT
  - CYP Mental Health
  - Dementia
  - Perinatal MH
  - PMO/Delivery
  - Learning Disabilities/Autism
  - Provider Collaboratives
  - Digital
  - Medication
  - Workforce
  - Crisis / Urgent and Emergency Mental Health Services
  - Specialised Commissioning
  - Communications
- To join the platform email: [england.mhldaincidentresponse@nhs.net](mailto:england.mhldaincidentresponse@nhs.net)

# National and regional messages

## Feedback from EIP National Programme:

- MHSDS data collection (14-day RTT) to continue but there won't be any performance management during Covid-19 (To be reviewed monthly or quarterly?)
- Decision re NCAP audit will be made by HQIP. Proposal from Paul French to continue with plan to collect NCAP audit in October, but results would be published with Covid-19 narrative and may not be scored – feedback from teams requested
- EIPN annual conference (30th June) may be on-line now. Hold the date.
- NHS 'Attend Anywhere' platform looks really useful for us. Information to be disseminated.
- After a period of reduced referrals a spike could be starting to be seen in the North (looks Covid related)
- NEYH – spike in staff referrals to MH has been seen recently
- Some concerns expressed about EIP pooling example in NHSE Capacity & Demand guidance
- Jay to produce a national briefing covering 14-day performance targets, NCAP quality audit and the need to prioritise/maintain EIP teams in Trust continuity plans. Will need high level approval.
- IRIS will provide a portal for EIP specific policies and good practice. IRIS can't provide a chat function so this may be provided by the NHS Future Collaboration digital platform



## EIP and the Coronavirus

5 Apr 2020 Moggie McGowan

To help EI teams adjust to the impact of the pandemic we have been gathering together policies, protocols and good practice that have been developed to support the maintenance of safe and effective services during the crisis. Please see the new [COVID-19](#) section for national guidance and local example documents shared by EIP colleagues. We hope this will help you adapt quickly to these new challenges and help you to provide the best care possible during this extraordinary period.

Leave a comment [RESOURCES](#)

## Blog: EIP and Covid-19 – A Social Distancing Solution

5 Apr 2020 Moggie McGowan

These unprecedented times will put an inordinate strain on our services, which has led to the publication of helpful advice from NHS England on prioritising our mental health services. Of course it is vital to re-evaluate what is important and ensure that unnecessary activities are minimised in order to direct scarce staff resources to the point of greatest need.

For some time, EIP services were considered luxury services with high staffing levels, low caseloads and highly skilled practitioners. At times like this it may be tempting to think that EIP teams would be an easy place to look for staff to supplement other activities.

professionals in Pakistan need to pay close attention

<https://t.co/HfumBjAWKJ>

Twitter

David Shiers Retweeted

**Paul French** 6 Apr

Blog: EIP and Covid-19 - A Social Distancing Solution - iris

@Davidiris1 @moggie\_iris

@Lucia\_Valmaggia

@IEPANetwork @jay\_nairn

<https://t.co/CivX4qG4RK>

Twitter

David Shiers Retweeted

**peter pratt** 5 Apr

So important not to overlook other health issues eg lack exercise + change in diet may risk of constipation or intestinal obstruction etc need to ++ support isolated patients with no regular contact

<https://t.co/gx7qxTEUnt>

<https://t.co/QLY63Upe2b>

Twitter

David Shiers Retweeted

**Tom Sandford** 4 Apr

Well, not the weekend that you

# Some discussion points...



- How is your team managing during COVID-19? Impact on staffing levels, referral rates, new assessments, relapses, MHA assessments, access to in-patient beds, requests for early dx, impact on carers/families, care and treatment delivery?
- What messages are you receiving about key priorities for MH and EIP? Is there anything you are being asked to pause or accelerate? Where are these messages coming from?
- What immediate changes to services/contingency plans are being put into place to address the current status and anticipated future changes?
- What specialist skills do EIP Teams have that could be shared with others e.g. positive risk management, mobilising carers, physical health monitoring etc.?
- Have you got any interesting new ways of working or examples of accelerated learning that you can share?
- How are you managing to work as a multidisciplinary team with social distancing?
- Have you had or do you anticipate any problems with Lithium or Clozapine monitoring/dispensing?
- Is PPE available for your team and what is your current/anticipated usage?
- What testing is available for your team?
- How can the Clinical Network Team and IRIS help you?
- Messages/feedback to national EIP programme and MH leadership

# Staff Support

- There is considerable strain on staff at this time
- Continuing to make time for staff support, supervision and team meetings is vital
- Most Trust's and occupational health departments are offering staff support
- [#OurNHSPeople](#) have launched a [mental health hotline](#) that will provide psychological support to NHS staff. This is available 24/7 for staff that may want to speak to someone independent of their Trust.
- The national [#OurNHSPeople](#) are also sharing a range of other wellbeing support, including online peer to peer, team and personal resilience support.

## Delivering Remote Therapy

- A free online training event by Gavin Lawton, CBT Director at Hull University
- 21st April 2020, 10.00am - 11.00am
- <https://shop.hull.ac.uk/conferences-and-events/faculty-of-health-sciences/department-of-psychological-health-wellbeing-social-work/delivering-remote-therapy-by-gavin-lawton-21st-april-2020-1000am-1100am>

## Outcome Measurement in EIP Teams

- NCAP Quality Improvement webinar
- <https://ncap-2020.eventbrite.co.uk>
- If you had previously booked and are now unable to attend, please deregister

## IRIS website

- [www.iris-initiative.org.uk](http://www.iris-initiative.org.uk)

## Outcome measurement in EIP teams/ services. Quality Improvement (QI) Webinars

In light of recent events with COVID-19 and to support our colleagues in the NHS, NCAP will be running QI webinars instead of workshops focusing on outcome measurement in EIP teams. The webinars will be recorded and available online to make them accessible to those who would otherwise be unable to attend due to the unprecedented situation.

We are inviting NCAP audit leads, QI and governance personnel, EIP team clinicians and other interested staff to attend these regional QI webinars.

The webinars will focus on 'outcome measurement' from the EIP audit, what we are measuring and why, and how data can be used to review and improve EIP team quality and individual care.

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Webinars will be led by NCAP EIP Clinical Advisors,  
Dr Paul French and Professor Jo Smith and QI expert, Maureen McGeorge

The regional webinars will be approximately 90 minutes in duration, including a Q&A session, and will be taking place on the following dates:

- London – Monday 4th May 2020
- Manchester – Friday 15th May 2020
- York – Monday 18th May 2020
- Cardiff – Monday 15th June 2020
- Birmingham – Friday 19th June 2020

◆ Places on the webinars are FREE

To book a place and receive a link to the webinar, please fill in the online form at:

<https://ncap-2020.eventbrite.co.uk>

Please note: **If you had previously booked and are now unable to attend, please deregister at: <https://ncap-2020.eventbrite.co.uk>**

If you are unable to attend the session, it will be recorded and will be available to view online from July 2020.

Email: [NCAP@rcpsych.ac.uk](mailto:NCAP@rcpsych.ac.uk) Web: [www.rcpsych.ac.uk/NCAP](http://www.rcpsych.ac.uk/NCAP)



# Please provide feedback

- Has this virtual network meeting been useful?
- How could it be improved?
- How often should we meet like this as a regional group
- Would you like a 1:1 catch up?
- Do you think this year's NCAP audit should be:
  - a) Completed as planned
  - b) Delayed
  - c) Amended (e.g. information could be drawn from MHSDS or we could have a much smaller sample or we could focus more on SU survey this year)
  - c) Postponed to next year
- What are your key messages/concerns to feedback to regional and national leads?

**Please send your feedback to [denise.friend@nhs.net](mailto:denise.friend@nhs.net)**

