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Third Seminar in Global Series

The Impact of Covid-19 Pandemic on Mental Health Services in London, UK

Professor Helen Killaspy, Professor and Honorary Consultant in Rehabilitation Psychiatry at University College London and Camden and Islington NHS Foundation Trust in the UK.

Hosts: Professor Luis Salvador Carulla, Head, Centre for Mental Health Research ANU
Adj. Professor John Mendoza, Director, ConNetica

Acknowledgement of Country & First Nations' People

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Our Agenda

1. A Quick Guide to Zoom
2. Recording & making publicly available
3. Purpose of the Global Seminar Series (Luis)
5. A new managerial epidemiology and expert advise focused on health logistics
6. Situation in Australia & South Australia
7. Intro to Professor Helen Killaspy's Presentation
8. Helen's presentation
9. Q&A
10. Close and Next Seminar Details

The Purpose of the Seminar Series

This is a seminar series organised by the Visual and Decision Analytics Lab (VIDEA) of the Australian National University and ConNetica Consulting.

The aim of this on-line series is to revise the current status of care for COVID19 in different cities and regions of the World.

This informative series is intended to gain knowledge from real world conditions and local initiatives that may provide useful organisational learning for healthcare planning in Australia.

This series has a major focus on but it is not only limited to mental health care.

All Seminars will be recorded and made available publicly and freely.

Access to the Seminar Recordings will be will be via the Centre for Mental Health Research, ANU and ConNetica websites:

(<https://rsph.anu.edu.au/research/centres-departments/centre-mental-health-research> and www.connetica.com.au)

A New Managerial Epidemiology?

The Covid-19 pandemic and a call for a
new managerial epidemiology and
expert advise focused on health logistics

Situation in Australia (as at 13.00 07/04/20)

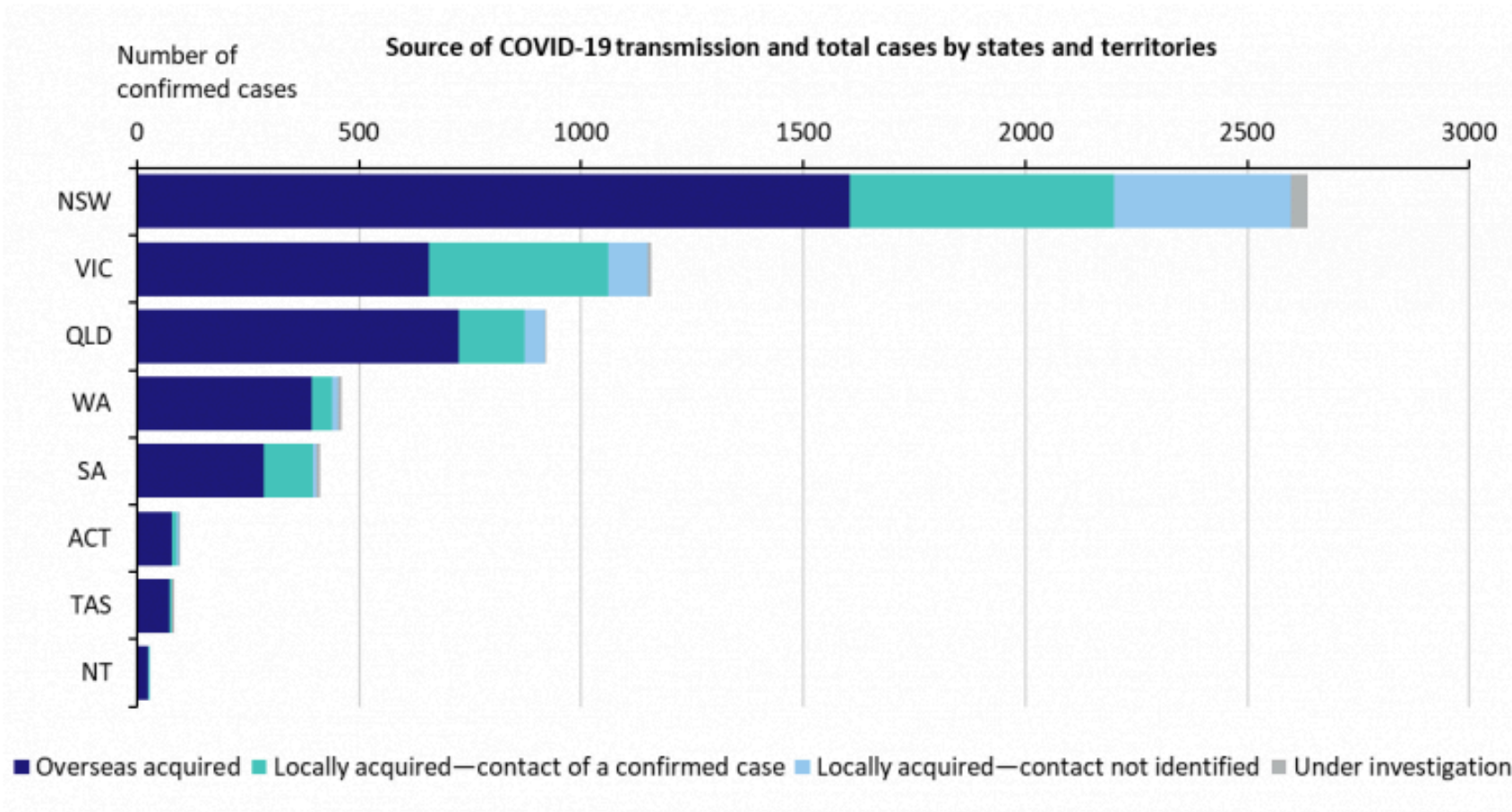
CASES:

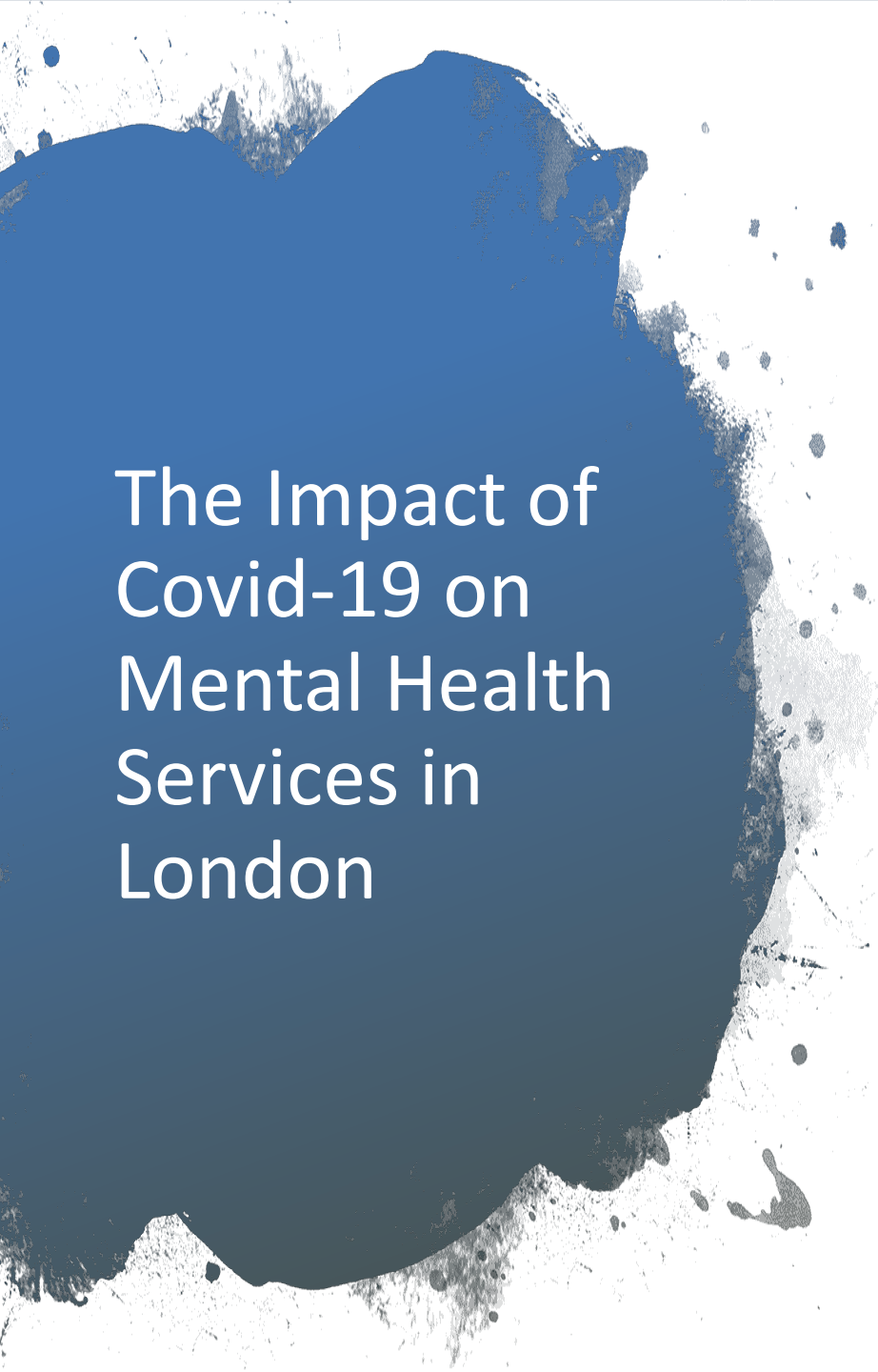
- A total of 5,844 cases of COVID-19, including 45 deaths, confirmed in Australia
- Since yesterday's situation report, an additional 100 cases and 2 deaths have been reported in Australia.
- There have been at least 600 cases and 10 deaths associated with the Ruby Princess cruise ship with the majority of them being NSW cases, and a subset of interstate cases
- There are also cases associated with several other cruise ships.
- Nearly 66% of all cases are related to international travel
- The median age of all COVID-19 cases is 47 years, range 0–100 years, with a relatively equal ratio of male to female cases across most age groups. Of the deaths so far reported, the median age is 80 years (range 54–94).

TESTING:

- To date, more than 304,000 tests have been conducted across Australia. The cumulative per cent positive is 2.0% with positivity
- Tests per million is 11,900

Situation in States/Territories & Source





The Impact of Covid-19 on Mental Health Services in London

Helen Killaspy

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UK Government response to Covid-19

26.2.2020

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Coronavirus: Hundreds of flu patients to be tested by UK hospitals and GPs

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Coronavirus pandemic



Tests for coronavirus are being increased to include people displaying flu-like symptoms at 100 GP surgeries and eight hospitals across the UK.

The tests will provide an "early warning" if the virus is spreading, Public Health England's Prof Paul Cosford said.

- Initially policy was to 'contain' by isolating people who tested positive and asking anyone who had close contact with them to self-isolate too
- Shifted to 'delay' approach to push back the peak number of cases to the summer to allow the NHS to cope
- 11.3.2020: WHO declared Covid-19 a global pandemic
- Modelling from Imperial College London prompted a change in approach – suggested the policy of a managed spread could lead to more than 250,000 deaths and overwhelm intensive care units

Social distancing

19.3.2020

- Avoid contact with anyone with Covid-19 symptoms
- Avoid non-essential use of public transport
- Work from home, wherever possible
- Avoid large and small gatherings in public spaces
- Avoid gatherings with friends and family
- Use telephone or online services to contact GP

“We strongly advise you to follow the above measures as much as you can and to significantly limit your face-to-face interaction with friends and family if possible, particularly if you:

- are over 70*
- have an underlying health condition*
- are pregnant*

21-22.3.2020 – a sunny weekend

ITV REPORT 22 March 2020 at 9:04am

Public urged to keep away from UK holiday destinations to limit coronavirus spread as Snowdonia records busiest ever day



Hundreds of cars parked along the roads after car parks filled up in Snowdonia. Credit: North Wales Live (Daily Post Wales)



Coronavirus: London parks closing as areas urge tourists to stay away

22 March 2020

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Coronavirus pandemic



Despite the social distancing advice many people have still gone out to parks for exercise

Parks in part of London are being shut after criticism of large numbers of tourists visiting beaches and beauty spots.

23.3.2020: Boris Johnson announces 'lockdown' for initial 3 weeks

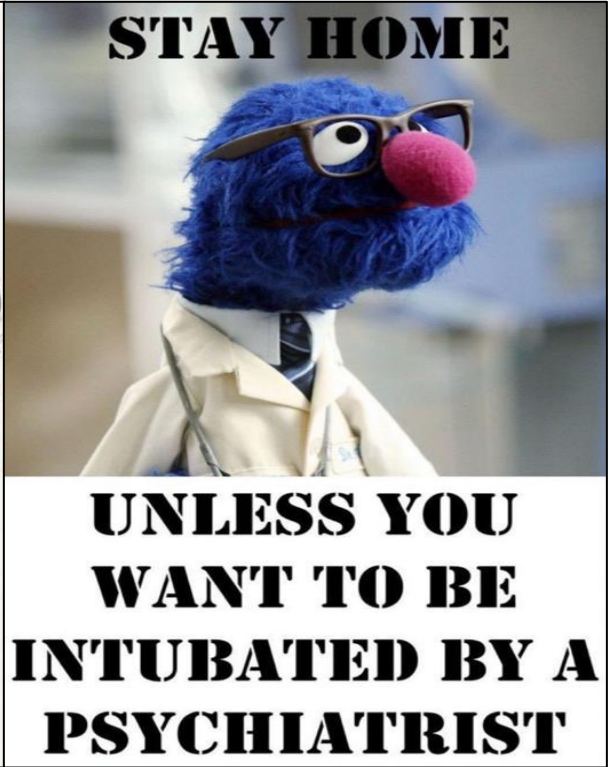
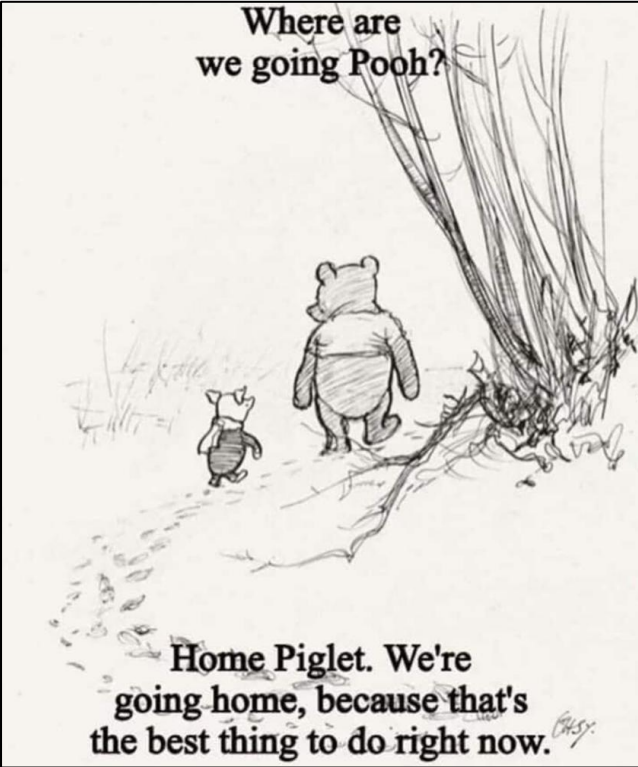


- Closure of pubs, restaurants, leisure centres
- Art galleries, cinemas, 'non-essential' shops (that don't sell food) quickly followed
- Stay home
- Only go out to buy food or collect medicines
- Allowed to exercise once a day outside the home
- Only essential travel
- Work from home wherever possible
- Stay > 2m from people you don't live with
- Police given powers to disperse groups and fine people who don't follow the rules

Self-isolation guidance

- Anyone with a fever or persistent cough - 7 days
- Anyone who lives with someone displaying coronavirus symptoms - 14 days
- The over 70s and people with underlying physical health conditions - 12 weeks 'shielding'
 - lung/respiratory conditions
 - transplant patients
 - Immunocompromised
 - many cancer patients
 - all blood cancer patients
 - pregnant women with significant heart disease
- Updated guidance – added following people to the 12 week shielding group (total 1.5m)
 - heart disease
 - chronic kidney disease
 - liver disease
 - neurological conditions
 - diabetes
 - severely obese
 - pregnant women

The message begins to sink in...



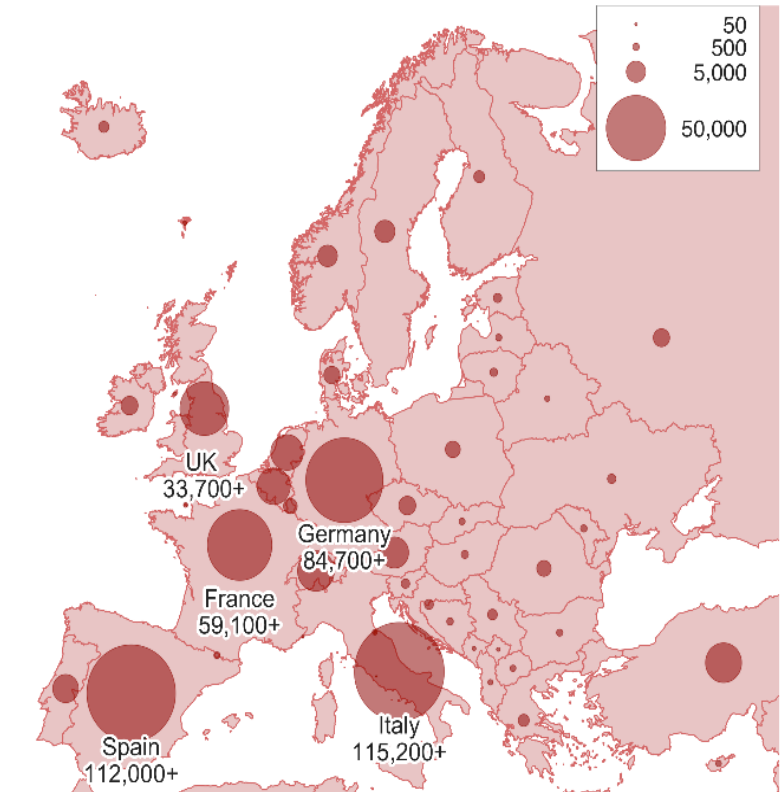
3.4.2020: Covid-19 cases globally and in Europe

Coronavirus global cases, 3 April 2020

This information is regularly updated but may not reflect the latest totals for each country.

	Cases	Deaths
USA	245,158	6,042
Spain	117,710	10,935
Italy	115,242	13,915
Germany	85,063	1,111
China	82,509	3,326
France	59,105	5,387
Iran	53,183	3,294
UK	33,718	2,921
Switzerland	19,303	573
Turkey	18,135	356
Belgium	16,770	1,143
Netherlands	15,725	1,487
Austria	11,383	168
Canada	11,284	139
South Korea	10,062	174
Portugal	9,886	246
Brazil	8,076	327
Israel	7,030	37
Sweden	6,078	333
Australia	5,330	28
Norway	5,296	54
Russia	4,149	34
Czech Republic	3,869	46
Ireland	3,849	98
Denmark	3,672	139
Chile	3,404	18

Cases of coronavirus in Europe



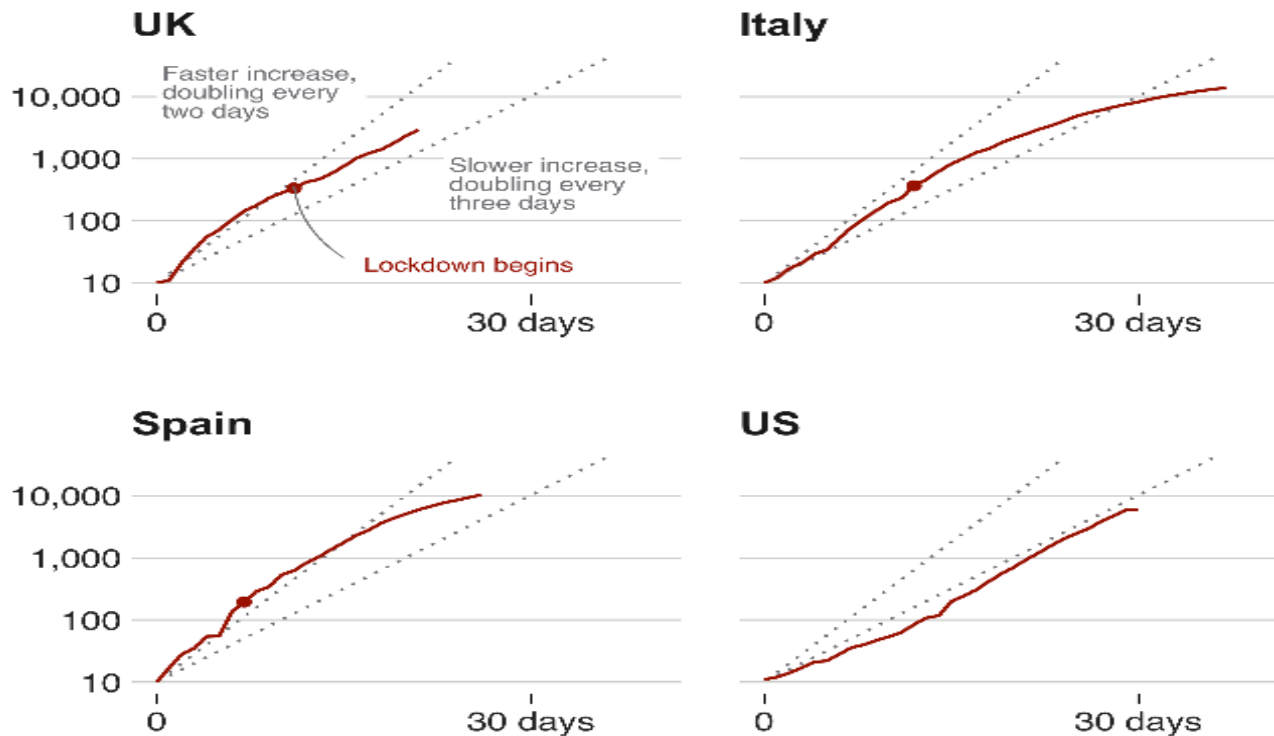
Source: Johns Hopkins University. Updated: 3 Apr 07:30 BST



Impact of lockdown – 3.4.2020

Deaths over time in selected countries

Cumulative deaths, days since 10th death in each country

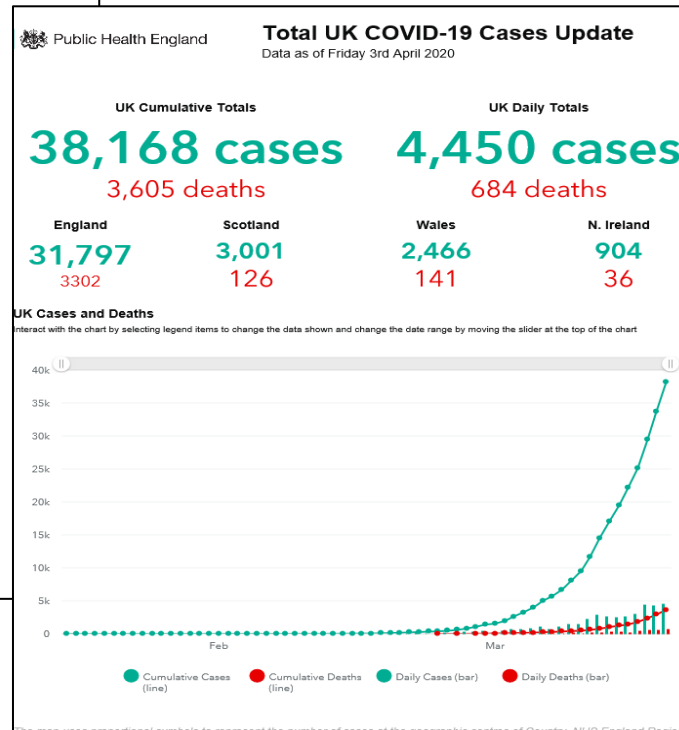
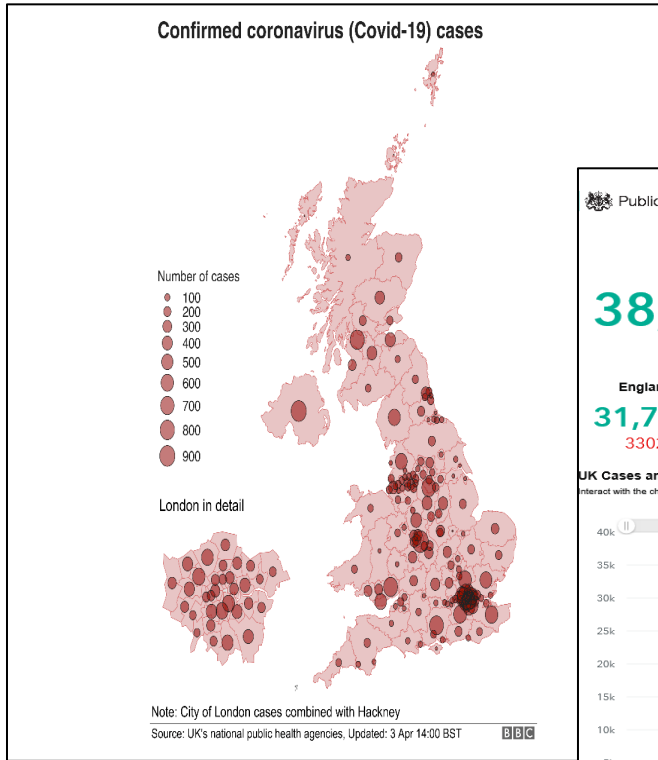


Log scale. Note: No nationwide lockdown in US

Source: Johns Hopkins University, updated: 3 Apr 10:30 BST

BBC

3.4.2020: Covid-19 cases UK and London



- Cases and deaths are only reported for hospital patients
- 32,000 cases are in England
- Over 40% cases are in London (899 deaths)

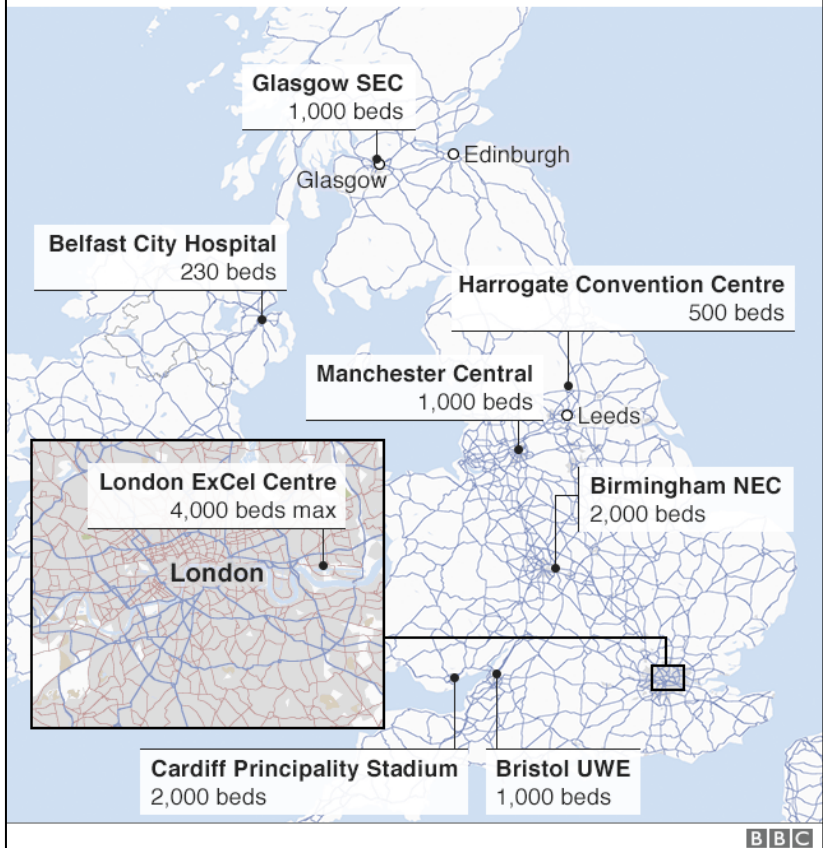
3.4.2020: NHS Nightingale opens – 4,000 beds with ventilators at Excel convention centre, East London

A further 8,000 in ‘field hospitals’ across the UK planned



NHS major field hospital sites

Planned sites to expand capacity beyond London's new NHS Nightingale hospital



National guidance for mental health services

- Working from home wherever possible
- Teleconferencing and videoconferencing instead of face-to-face consultations and meetings
- Social distancing and self-isolation
- Use of Personal Protective Equipment (PPE)
- Staff wellbeing
- Tribunals and managers' hearings for detained patients by telephone
- Proposed changes to the Mental Health Act (not legal as yet)

Local experience

Camden and Islington NHS Foundation Trust

- Population: Camden 262,226, Islington 239,142
- 235 **inpatient** beds across two sites (adults, older people)

97% of services are community based

- 2 crisis resolution teams, 3 crisis houses
- 1 Early Intervention Service, 4 CMHTs, 2 Assertive Outreach Teams, 2 Community Rehabilitation Teams
- 3 community rehabilitation units (41 'beds')
- 1 homeless outreach team
- 1 complex depression and trauma team, 1 personality disorder team
- 2 substance misuse services (in partnership with voluntary sector)
- 2 older peoples' community teams
- 2 community teams for people with intellectual disability (in partnership with Local Authorities)
- General hospital liaison service (covers 3 local general hospitals)
- Primary care assessment and liaison service
- Primary care based counselling service
- Specialist psychotherapy service
- Specialist psychosexual service

Covid-19 cases Camden and Islington - 3.4.2020

Cases:

Camden 244, Islington 210

Camden and Islington NHS Foundation Trust service users:

Cases: 27 (6%)

- inpatients - 13 suspected, 7 confirmed, 3 recovered
- community - 82 suspected, 20 confirmed, 9 recovered

Organisation level

'Gold command'

- Ensuring everyone understands self-isolation guidance (patients and staff)
- Processes for reporting Covid-19 cases and suspected cases
- Enabling working from home – smart phones/laptops with access to electronic case records
- Teleconferencing and videoconferencing – Webex, Zoom, Microsoft Teams, WhatsApp
- Community teams - rotas to minimise number of staff at team bases, cover essential tasks
- New psychiatric assessment centre to divert patients away from A&E – set up within days
- Designated ward in the mental health unit for Covid-19 cases (suspected and confirmed)
- Redeployment of some staff to other parts of the mental health service
- New rotas and cross-cover arrangements to cover medical staffing gaps (for staff self-isolating)
- Minimising usual team and managerial meetings – teleconferences/videoconferences
- Local guidance on PPE and distribution of PPE
- Regular communications – daily email update, regular teleconferences
- Wellbeing – pizzas!

Particular challenges for the severe and complex group

- Some have difficulty understanding the information/guidance
 - Self-care and housework/cleaning often problematic
 - Guidance on social distancing and self-isolation is quite authoritarian
 - Police involvement (on TV news)
 - Many people wearing masks in community
 - All shops now enforcing 2m social distancing
 - Staff wearing PPE (but none for patients)
 - Ensuring food and other shopping is done by staff if the person is self-isolating
 - Supervising medication from 2m distance
 - Limiting the number of people in communal areas
-
- Alienating
 - Power dynamics
 - Undermine rehabilitative aims (promoting self-management)
 - Potential for human rights violations

Response to challenges for severe and complex group

- Forums (teleconferences, videoconferences) to share experiences with colleagues and feed into guidance at national and local level
- Local forums to discuss and agree interpretation of guidance when more than one provider is involved (e.g. in supported accommodation – managing communal areas, definition of a household, agreeing increased hours for cleaners)
 - Guidance has to be interpreted at the individual service level
 - Guidance has to be implemented through a collaborative and individualised approach, in discussion and negotiation with each service user and communicated to all involved in their care and support
 - What to do if a service user is unable to follow guidance

Practical examples - Islington community rehabilitation team

- Ensuring staff are clear about guidance on hand-washing, social distancing, self-isolation, PPE
- Helping service managers and staff in supported accommodation understand and interpret guidance for their service/service users (PPE guidance rapidly changing)
- Team WhatsApp group – daily updates on staffing, tasks, ongoing conversation
- Minimising home visits to essential tasks (depots, clozapine bloods if self-isolating, crisis)
- Clozapine dispensed for longer (in case of self-isolation) – 6/52
- Reviewing people prescribed long acting antipsychotic injections – reducing frequency
- Identifying clients who require ‘shielding’
- Encouraging smoking cessation
- Challenging unhelpful decisions (e.g. eviction notices, sudden discharge of patients from inpatient wards)
- Creative thinking to avoid admissions wherever possible – weighing ethical dilemmas

Research (Institute of Mental Health, UCL)

- Working with NHS England's existing mental health rehabilitation project to map Covid-19 cases amongst severe and complex group and facilitate fast information sharing to feed into guidance for this group
- Mental Health Policy Research Unit – proposing several project ideas to Department of Health on impact of Covid-19 on mental health services and service users
- National programme for evaluating delivery of psychological therapies (CBT) for depression and anxiety – moved on-line
- Systematic review of psychiatric impact of Covid-19
- Researching staff wellbeing - assessment and support initiatives

Impact of Covid-19 on University life

- All staff working from home
- Teaching - all rapidly moved on-line
- All conferences cancelled
- Covid-19 research prioritised for funding and ethical approval
- All Covid-19 related research has to be approved by NHS England to avoid additional burden on health staff
 - Most existing projects are paused
 - New grant funding paused

Many thanks you for your attention
Stay well!



Question and Answer Session

- Please use the Chat facility in Zoom to write your question. Please enable all participants to see your question.
- The moderator will call your name and invite you to ask your question.
- Please ‘unmute’ your microphone and when finished go to ‘mute’
- Note that if there are questions on the same topic or theme, then the order of questions will change.
- Thanks for following this advice as it will enable more questions and discussion.

Next Zoom Seminar – Thursday 9nd April, 17.00 Aust Eastern Standard Time (AEST)

Dr Mikkel Rasmussen

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Thank you & Stay in touch

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