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"Lost between the interface of physical and mental health": focus groups exploring liaison psychiatry staff's perception about working during the first wave of the COVID-19 pandemic in Birmingham and Solihull Mental Health Foundation Trust

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Aims. As the COVID-19 pandemic continues, increasing attention is being drawn to the welfare of healthcare providers who have endured many months of sustained exposure to the virus, disrupted working conditions and psychological stress. This project aimed to explore the subjective experiences of staff working in Liaison Psychiatry (LP) in the Birmingham and Solihull Mental Health Foundation Trust, (BSMHFT) during the first wave of the COVID-19 pandemic. These findings have been used to devise recommendations for subsequent waves.

Method. Data collection occurred as part of a mixed method service evaluation project. We invited all clinical and non-clinical staff from LP departments across BSMHFT to participate in focus groups conducted via Microsoft Teams. The focus groups were video-recorded and facilitated by a moderator and an observer. Subsequent anonymised transcripts were coded and themes were generated by at least two evaluators, using thematic analysis.

Result. The focus groups, which ranged from 21 to 69 minutes, involved consultants, junior doctors and nurses from four hospitals within BSMHFT. Six major themes emerged including an initial reduction in number yet increase in acuity of patients seen by LP, with some perception that this resulted from reduced face-to-face contact with community mental health services. A feeling that LP was lost at the interface between the physical and mental health trusts emerged as another theme. Uncertainty in adapting to unprecedented working conditions, for example, unclear guidance concerning the use of personal protective equipment, was also described alongside anxiety about contracting and transmitting SARS-Cov-2. Additionally, increased pressure was felt due to staff shortages and inadequate interdepartmental communication. Participants reported differential uptake of remote working, as well as conflicting views regarding the feasibility of remote assessments in LP.

Conclusion. Liaison psychiatry staff within BSMHFT continued to provide a crucial service during the COVID-19 pandemic. Focus groups with thes staff indicate several recommendations for implementation within the Trust and provoke questions for future research. Due to the unique role that LP plays in providing mental health care within general hospitals, clear guidance for LP staff is key for effective service provision and supporting LP staff. Although used widely across community mental health services, the role of remote working in LP is contentious and requires further exploration. However, there are limitations to the use of focus groups and these findings may not fully represent the experiences of LP staff throughout BSMHFT. Different themes may have emerged through the use of anonymous questionnaires.

The impact of first COVID-19 peak on patient referrals to Liaison Psychiatry Service and staff perception about service provision in Birmingham and Solihull Mental Health Trust Birmingham - a service evaluation project

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Aims. Based on recommendations from the Royal College of Psychiatrists, this project aimed to evaluate the impact of the first peak of the COVID-19 pandemic on referral patterns to the Queen Elizabeth Hospital Birmingham (QEHB) Liaison Psychiatry (LP) service. Additionally, we aimed to explore staff experiences in LP services across Birmingham and Solihull Mental Health Trust (BSMHFT) in order to generate Trust recommendations promoting optimal healthcare provision amidst the on-going pandemic.

Method. A mixed method service evaluation was conducted using quantitative and qualitative analysis. Quantitative methods involved reviewing referrals made to the QEHB LP service from March to June 2020, compared with the equivalent time period in 2019. Data were retrospectively extracted from the electronic clinical databases RIO and PICS, and subsequently analysed using Microsoft Office. The number of, and reasons for referrals to LP were identified, whilst focus groups were conducted to explore the subjective experiences of staff working across BSMHFT LP services.

Result. Between 1st March and 30th June 2020, 984 referrals were made to the QEHB LP service, compared to 1020 referrals in 2019, representing a 3.5% reduction. From 2019 to 2020, referrals due to psychotic symptoms and deliberate self-harm rose by 12.8% and 14.1% respectively, whilst referrals for drug and alcohol-related causes reduced by 28.3%. A significant increase (150%) in referrals for medication or management advice was seen. Focus groups indicated that staff perceived an initial reduction in number of referrals, but an increase in the acuity of patient presentations.

Staff reported anxiety around contracting and transmitting SARS-Cov-2, exacerbated by uncertainty around patients' COVID-19 status. In QEHB, sixty-five of the 984 referrals (7%) had a positive SARS-Cov-2 PCR swab, with the remaining 919 referrals being either negative (68%) or unknown (25%). Ninety-six percent of consultations were conducted face-to-face in QEHB. There were conflicting views amongst staff regarding whether more consultations could have been conducted remotely. Furthermore, varying perceptions of support and communication from both the physical and mental health trust were reported. Conclusion. Quantitative data indicates that COVID-19 impacted LP healthcare provision in BSMHFT. Whilst referral numbers remained similar between the equivalent period in 2019 and 2020, a change in the nature of referrals to LP at QEHB was seen. This was corroborated by qualitative data which highlighted a perceived change in acuity of referrals. These findings have been disseminated across the Trust and subsequent recommendations are being implemented during the on-going pandemic.