

COVID-19 has placed all sectors of the health service under immense pressure. The full mental health impact is yet to be felt. This briefing outlines three principal ways for how the Coalition for Psychoanalysis in the NHS is uniquely placed to offer help. It also features case studies for some initiatives we are taking.

Remembering our colleagues; re-building our teams

The early response to this crisis has been impressive. Many services have instituted psychological first-aid and well-being programmes, drawing on the wealth of knowledge from effective interventions after single episodes of trauma, such as natural dis-

interventions after single episodes of trauma, such as natural disasters and terrorist attacks.



Frontline clinicians have had to make life-or-death decisions regarding the allocation of scarce healthcare resources. With other keyworkers, NHS nurses and doctors have had to weigh up their own safety against the needs of their patients. Non-clinical staff have had to grapple with logistical dilemmas and difficulties which have real and measurable impacts on patient recovery and survival rates, as well as the safety of their colleagues. It is understandable, in such a period of crisis, for there to be deeply conflicted feelings about the realities of limited resources and how those resources are deployed. Collectively, these workforces have faced stresses and suffered moral injury above and beyond anything they have previously had to deal with.

Looking after the psychological wellbeing of NHS clinical and non-clinical staff who are engaged in the fight against COVID-19 is essential to the continued functioning of the health service. This is a role which psychoanalytically-oriented practitioners have been involved in for decades.

The range of team-support work which organisations comprising the Coalition for Psychoanalysis in the NHS are involved in includes:

- providing support/supervision, and containment e.g. ongoing Balint groups for junior doctors and facilitated peer-support groups for nurses and care home staff, which provide a safe space for practitioners to reflect on, and explore, the impact that difficult experiences at work have on them
- providing expertise and tools to wellbeing leads (and to those leading teams at the frontline in mental health) to support them in the work they are doing to support their own teams
- providing consultation to senior NHS management in terms both of containment, rebuilding their teams, and helping them attend to the primary tasks of effective leadership
- for families of NHS staff who must deal with the grief of losing loved ones to the virus, and for close colleagues who lose a valued team member, we are on hand where needed to offer sensitive and compassionate individual bereavement support
- providing support, supervision and reflective practice in the criminal justice system to
 prison and probation staff who are struggling to manage their clients in understaffed and
 risky settings.

Staff working for the NHS, as well as members of the public, are making huge sacrifices to reduce the spread of the virus, treat patients and save lives, and to 'Protect the NHS'. The psychoanalytic community is keen to play its part in that endeavour. We have the expertise and experience to help build and sustain the resilience and effectiveness of the health service as it meets the challenge of this crisis.

Case Study Recovering morale after criticism for failings

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Following a critical report into the services provided by a large, psychiatric unit - and in the context of very high staff turnover - self-reflective group sessions were established by the leadership team to offer a safe and containing space where non-clinical staff members could focus on their challenges.

Facilitated by a psychoanalytic consultant using the Tavistock systems/psychodynamic model, the staff group established four areas of anxiety all of which linked to the risk that the leadership team were having to manage.

Over a number of sessions, the staff group developed a shared capacity to work more collaboratively and healing old antagonisms that had arisen in the context of high stress levels. New and more creative ideas were developed which challenged and changed the existing over-engineered, bureaucratic systems. The staff group reported increased job satisfaction and the unit as a whole was able to benefit from improved staff morale and greater capacity to manage work-related anxieties.

Case Study

Reflective practice groups as a 'safety valve' for medics in Leeds

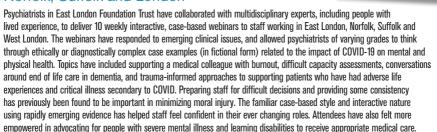
A reflective practice group, co-led by two Consultant Psychiatrists in Psychotherapy (BPAS trained Psychoanalysts), was established in Leeds in response to covid-19. The groups are run weekly for consultant psychiatrists lasting one hour via Zoom. A proper setting up of these groups has been crucial to allow and maintain a safe (virtual) space. The themes arising have changed over time from feelings of anxiety and anger about the organisational response towards facing painful personal and professional struggles with bearing the uncertainty of a changing work environment. There is a core membership of consultants with others joining less often; the group is experienced as lively and thoughtful.



Case Study

Using case-based interactive webinars to provide connection and share learning for psychiatrists in Norfolk. Suffolk and London

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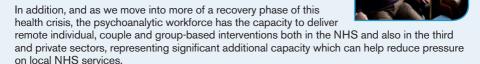




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Working with vulnerable groups and individuals and those who have been hit the hardest



Our focus is on those groups and individuals who have been hit the hardest, where our personalised and culturally-informed approaches can deliver real engagement and more meaningful person-centred recovery. We already know who is most vulnerable, and the communities they come from. Traditionally, we have been seen as a specialist intervention to turn to only when other interventions have failed. We now have new evidence-based brief interventions, however, that give us the real opportunity to provide first-line responses.

Across the age range from infants through to old age, psychoanalytic interventions can now be delivered in family-based, group-based, couple-based or as one-to-one therapies, including digital models. There is also a strong tradition of psychoanalytically-informed arts, music and expressive therapies, such as drama and dance and movement therapy. Expansion of Child and Adolescent Psychoanalytic Psychotherapists and IAPT therapists will enable us to:

- respond to young people who are coming to us feeling in crisis during this period, and
 engaging them in psychotherapeutic relationships, working remotely. We are pleased
 that it has been recognised we will need more Child and Adolescent Psychoanalytic
 Psychotherapists to meet increased demand for help from children and young people and we
 are working on recruiting new trainees to expand this workforce
- provide Dynamic Interpersonal Therapy within IAPT services to those affected by the lockdown – e.g. cases of depression and presentations where there is significant distress related to loss, earlier life adversity, patients who express a preference to address their underlying relationship patterns.

Dynamic Interpersonal Therapy is a brief psychodynamic therapy that is offered as a High Intensity treatment in IAPT, and has recently been shown to be effective in a randomised controlled trial. NICE recommends brief psychodynamic therapy as a treatment option for mild-to-moderate and moderate-to-severe depression in adults.

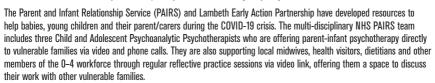
Psychoanalytic practitioners working in and alongside adult IAPT services and delivering short-term therapies in local schools and direct to families are well placed to be at the forefront of re-building the therapeutic resources that can help local communities recover from this crisis.

There has been a lot of concern about how Covid-19 has impacted on certain groups in particular. This has shone a light on issues of structural racism, ongoing discrimination against people with learning disabilities, and a need to address inter-generational cycles of mental health inequalities during the current pandemic. It is recognised there are a complex set of factors that may account for why the death rate is already seen to be considerably higher than average in certain population, ethnic and disadvantaged groups. We are also working with Health Education England to increase training opportunities for BAME trainees to start to make good their historic under-representation in publicly funded psychoanalytic psychotherapy services. Likewise, we are updating our training curriculums and actively seeking to attract and retain more diverse trainee groups, including LGBT and people from different socio-economic backgrounds also, for example.

Case Study

Helping those caring for babies and young children during the COVID-19 crisis

This is a stressful time for everyone but especially so for adults caring for young children and babies.



Together, using attachment and contemporary psychoanalytic thinking, the multi-disciplinary teams are providing essential support at a critical time in life to ensure the families they work with are safe.

Case Study

Psychoanalytic work with young people in schools (remote working)

Kathy is a 16 year old girl who has been referred to psychotherapy for STPP (short-term psychoanalytic psychotherapy) because of her worrying response to a recent family bereavement. Her mother is worried about how she regularly now gets into arguments at home with her younger brother, and is struggling similarly with friendships. She is becoming more isolated from her peers and stays in her room, and is now falling behind on her online schooling as she cannot focus. More recently she cannot sleep well and is becoming highly anxious, feeling helpless and expressing a sense of hopelessness and despair about Covid-19.

STPP provided by Child and Adolescent Psychoanalytic Psychotherapists is a brief evidence-based psychoanalytic treatment that has been shown to be effective in a large randomised controlled trial. NICE guidance recommends short-term psychoanalytic psychotherapy for young people such as Kathy.



Case Study

Support for mental health and medical staff working with older people in Edinburgh

Reflective practice groups in Edinburgh, predominantly in the rehabilitation psychiatry service, have been set up in response to a survey of staff where a quarter of staff felt that they would like more support. One recently-created ward for older adults has also had reflective practice built into the ethos of the new service from the start. An online Balint group for senior medical staff is being offered by an old age psychiatrist and a psychoanalytic psychotherapist working together, and there are plans for a less structured reflective practice group for the same staff group once meeting together physically is possible.



Meeting the wave of grief in our communities and learning from what we got right in 2008: how do we prepare a mental health response that helps



promote recovery from this pandemic?

The Centre for Mental Health predicts that the scale of depression, trauma and complicated grief arising from bereavement during this pandemic will lead to 500,000 more people needing mental health treatment. The NHS Long-Term Plan for mental health already includes a commitment to increase access in IAPT for another 380,000 people by 2024. In 2008, the Department of Health published its Statement of Intent (in response to the New Savov Declaration), and over the past decade we have seen a year-on-year increase in access to evidence-based talking therapies. This focus on talking therapies at the heart of recovery for people with mental health problems was a transformative shift in our policy response that we got right at that time.

Today, however, if the CMH prediction is right, it leaves us with a shortfall that will require additional expansion of the workforce beyond existing plans. We know workforce expansion plans have fallen behind in some regions. More importantly, if we are to learn lessons about economic consequences of Covid-19, we must also plan our response to protect against widening mental health inequalities within local communities.

Leadership expertise within the Coalition for Psychoanalysis in the NHS includes people who have been at the heart of the National IAPT and CYP-IAPT programmes since 2008, as well as many frontline clinicians and clinical leads amongst Medical Psychotherapists (Consultant Psychiatrists). Consultant Clinical Psychologists. Child and Adolescent Psychoanalytic Psychotherapists and experienced Adult Psychotherapists, as well as other disciplines within the Psychological Professions. Our members have leadership roles within NHS Trusts and 3rd sector charities, as well as professional bodies. We are engaged in development of NICE guidelines and in research such as treatment efficacy studies (RCTs).

This expertise can be put to use in partnership with local commissioners and system leaders by:

- · offering alternative talking therapy pathways to local commissioners for people with more complex mental health needs who may not fit the standard CBT-first IAPT offer, or as a referral on option for primary care counsellors - this might include traumatised frontline staff as well as traumatized COVID-19 patients (e.g. post -ITC), bereavements and acute grief reactions that are complicated by pre-existing depression, anxiety or emotional vulnerability related to adverse childhood experiences
- · strategic and organizational level planning with commissioners, mental health leads and senior management teams to help shape how the recovery phase pathways can be mapped, including where psychoanalytic interventions can add value to services, and how applying our expertise to underlying psychological and organisational dynamics can preempt problems encountered by services that otherwise may impede their development and adaptation.

The family of evidence-based psychoanalytic interventions, including MBT (mentalisation based therapy), STPP (short-term psychoanalytic psychotherapy) and DIT (dynamic interpersonal therapy), has a growing skills base across the NHS. Psychodynamic models have been adapted for different common mental health conditions (e.g. medically unexplained symptoms, panic), as well as more severe or more complex problems (e.g. psychosis, trauma-related dissociation, gender and sexual identity). Innovative approaches to stepped or tiered care, such as the Tavistock/Anna Freud THRIVE model, and integrative models, such as Working Well, are being taken up by local commissioners.

Case Study

Supporting staff in a residential care home for people with learning disability to deal with sudden deaths of residents



The staff at Melrose House, a residential home for six residents with a learning disability, were struggling as two of their residents had just died; one due to an existing heart condition and the other to COVID. This latter resident had no other underlying conditions, so it was a massive shock to everyone. His family were heartbroken and felt that, "something must have gone wrong." The therapist met the staff team for a number of support sessions to help them process their emotions, including guilt and shock, as they had never dealt with death before. This enabled them to start thinking about the impact also involved in missing both these funerals, and how to help their residents find alternative ways of expressing their grief.

Case Study

Using joined-up talking therapies and employment support teams to improve employment outcomes across Greater Manchester



Greater Manchester's Working Well programme focused on helping people on ESA (incapacity) benefits to gain work. The independent evaluation demonstrated its success in helping over 20% of its clients achieve sustained employment over 12 months, The dedicated Talking Therapies team recorded recovery rates that were higher than national IAPT averages, and with clients whose mental health presentations at entry point were more complex and chronic than in IAPT.

Working Well embodied the original principles in the Department of Health's Statement of Intent, including personalised support, integrated ways of working in multi-disciplinary teams, and choice of the specific interventions that would best meet the client's own identified goals. Importantly, by focusing on population needs amongst claimants for social security benefits and improving their employment outcomes, health inequalities within some of Greater Manchester's most deprived communities were also reduced. Mental health commissioners in London are looking to learn from Working Well's success and apply these to local neighbourhood models.

Case Study





Developed by Consultant Clinical Psychologist IAPT leads, working with Consultant Psychiatrists with responsibility for psychiatry training in SLAM, a supervision group for trainee psychiatrists to take on higher risk and/or more complex IAPT patients has been running for the past several years.

The group is led by a Senior Accredited DIT Supervisor and involves reflective practice reviewing audio-taped sessions with patients, and checking against DIT competences for fidelity to the model. Embedding the trainee psychiatrists in the IAPT pathway enables the IAPT service leads to offer brief therapeutic interventions flexibly, safely and with successful outcomes to a wider range of patients, as well as providing a valuable learning experience for the trainees, who will have psychoanalytic skills at the heart of their future leadership roles in mental health.

The challenge created by the Covid-19 pandemic is likely to have an impact across all sectors of the Long-term plan for mental health. We believe the knowledge and expertise represented in the Coalition for Psychoanalysis has something of added value to offer to the task of preparing for this challenge – across settings in Perinatal, Children and Young People & Schools, IAPT, Adult SMI & Eating Disorder, Crisis & Liaison, Inpatient & Forensic, Suicide prevention and Bereavement support, and Older peoples' services.



To enquire about using our expertise and commissioning services, training or supervision, please contact the individual organisations listed below. Or to make a general enquiry, please email: appnhs@gmail.com.

Anna Freud Centre

The Anna Freud National Centre For Child and Families is a charity that has been working with mental health for over 60 years. Children and young people are at the heart of what we do and as such we are continuing to support their mental health and wellbeing during the coronavirus pandemic.

Since the outbreak of the Covid-19, we have come together across programmes and teams to support vulnerable families in numerous ways. As such, we continue to teach, supervise, consult and work in partnership with stakeholders to support the vulnerable families we work with.

As part of our timely response by clinical services, the Child and Adolescent Psychoanalytic Psychotherapy Team – within the Adolescent Programme – has responded proactively and effectively to the current crisis. Our team consists of a dynamic group of psychotherapists who work in the Anna Freud Centre and in schools.

A critical part of our response has been to continue to work with young people, alongside working with parents and carers, by offering psychotherapy remotely. This is particularly significant when working with vulnerable teenagers and younger school age children. By offering remote psychotherapy we have been able to continue to offer families a vital therapeutic space during this time of uncertainty and loss. In this way we have continued to provide a holding environment for our patients.

As part of the adolescent programme, we continue to engage new teenagers who have come to us in crisis. We have been thoughtful and responsive to their needs, whilst preserving sound analytic principals of good practice in the delivery of our service.

https://www.annafreud.org/|Annabel.Kitson@annafreud.org| Annabel Kitson, Head of Psychotherapy

Association of Child Psychotherapists (ACP)

ACP Child and Adolescent Psychoanalytic Psychotherapists are core members of many NHS services and have adapted to their practice to the COVID-19 pandemic. This includes providing treatment and consultation remotely via telephone and video to children, young people, families and carers. Others are working in crisis units or providing support and supervision to fellow professionals. The ACP has provided guidance to support safe and effective remote working, specifically with children, young people and families.

https://childpsychotherapy.org.uk/ | nick.waggett@childpsychotherapy.org.uk | 020 7922 7751 | Nick Waggett, Chief Executive

The Association for Psychoanalytic Psychotherapy in the NHS (APP)

The Association for Psychoanalytic Psychotherapy in the NHS (APP) is the association for professionals and students of all disciplines and backgrounds, who work in the NHS, public, or voluntary sector providing psychoanalytically informed care. Our shared mission is to promote the highest standards of applied psychoanalytic and psychodynamic work and thinking in the health care system, across the whole age range. We also share the founding values of the NHS to provide prompt access to treatment, free at the point of need, to all people who can benefit.

https://app-nhs.org/ | appnhs@gmail.com | Jeremy Clarke, Chair

The British Psychoanalytic Council (BPC)

The British Psychoanalytic Council (BPC) is the UK's representative body for psychoanalytic psychotherapy. Psychoanalytic psychotherapy is a therapeutic process which helps people to understand and resolve their emotional and relational difficulties. As well as psychoanalytic psychotherapy, BPC registrants provide therapeutic supervision and facilitate reflective groups for NHS staff to process the pressures encountered in their daily work. The BPC is accredited by the Professional Standards' Authority for Health and Social Care.

www.bpc.org.uk | eva.demarchi@bpc.org.uk | Eva De Marchi, Policy officer

The Institute for Group Analysis

IGA trained clinicians work in many parts of the NHS, and are experienced at offering a range of group interventions for therapeutic, reflective practice and organisational purposes. We are familiar with the complexity of human responses to trauma and grief, and the pressures of working in a large public organisation. We have experience of working with commissioners to develop appropriate groups to meet the needs of the organisation. Examples of current practice include:

- 1. Peer Support Groups for GPs
- 2. Reflective Practice Groups for frontline staff
- 3. Peer Supervision Groups for practitioners
- 4. Staff Groups addressing the trauma and stress arising in working on the frontline during the current outbreak.

https://www.groupanalysis.org/ | Board-ViceChair@groupanalysis-uk.co.uk

The Tayistock and Portman NHS Foundation Trust

The Tavistock and Portman NHS Foundation Trust is offering a wellbeing package called TogetherInMind aimed at psychological first aid and wellbeing to frontline staff. The Tavistock Trauma Service has been asked to consult to this project, bringing the wealth of experience we have in working with individuals, groups and organisations following major traumas.

The Tavistock Trauma Service can offer:

- consultations to organisations and senior leadership to facilitate adherence to the primary task during the early phase
- 2. supervision, training and consultation to mental health staff on the frontline working with trauma
- 3. individual trauma-informed work-based consultations to professionals who are struggling in role
- strategic planning and developing of trauma-informed pathways in preparation for the recovery phase to incorporate frontline staff, traumatised (post-ITU) survivors of Covid 19, and traumatically bereaved
- 5. strategic planning and developing of trauma-informed pathways for vulnerable individuals affected by lockdown.

In the longer term we would be a specialist site for treatment of PTSD and Complex PTSD Post-Covid cases offering adapted psychoanalytic and multimodal therapeutic interventions to all the above groups in 4 and 5.

https://tavistockandportman.nhs.uk | Jstubley@tavi-port.nhs.uk | Dr Joanne Stubley, Consultant Medical Psychotherapist, Lead Clinician Tavistock Trauma Service Lead

Tavistock Relationships

The couple therapy charity, Tavistock Relationships, offers consultation and treatment online for couples and individuals in dealing with COVID-related stress. The charity is also offering a brief intervention, Living with Lockdown and its aftermath, to support resilience in relationships, protecting parental and child mental health at this time of increased strain for families.

Additional services include the Adoption Support COVID-19 Service, offering a brief intervention for adoptive couples dealing with increased family pressures caused by the pandemic, and Living Together with Dementia, a service for couples where one partner has dementia – a group that is particularly negatively affected by social isolation and lockdown.

Tavistock Relationships also offers online support and reflective work-focused groups for frontline NHS and social care staff, and online CPD courses to groups of NHS staff - for example to IAPT practitioners, helping them with the transition to online working.

https://tavistockrelationships.org | abalfour@tavistockrelationships.org | Andrew Balfour. Chief Executive

The UK Council for Psychotherapy (UKCP)

The UK Council for Psychotherapy (UKCP) is the leading professional and regulatory body for psychotherapists across modalities in the UK. Our members are working in the public, voluntary and private sectors responding to the mental health consequences of Covid-19, working to our updated standards on remote therapeutic work.

Our members are involved in several initiatives across the UK providing voluntary therapeutic support to frontline NHS and social care workers, as well as offering a supervisory function to support others involved in protecting the psychological wellbeing of frontline staff. We are working to ensure these programmes are coordinated with the centralised support from NHS England and NHS Scotland.

www.psychotherapy.org.uk | adam.jones@ukcp.org.uk | 020 7014 9498 | Adam Jones, Policy and Public Affairs Manager

WPF Therapy

WPF Therapy is a charity that provides psychotherapy and trains psychotherapists; in the 50 years that we have been providing support we have developed a range of services, and are able to tailor responses to organisational need. The organisation runs as a Social Enterprise, charging fees for services that enable us to subsidise support for those on very low incomes.

All of our services are currently provided on-line through our Community Clinic, we are using Microsoft Teams for individual/small group sessions and Zoom for larger groups.

https://wpf.org.uk/ | therapy@wpf.org.uk | Sam Downie, Chief Executive

The Coalition for Psychoanalysis in the NHS

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