

Mental Health and Suicide COVID19 Response

1. Making Recovery Real Partnership COVID19 Response

- 1.1. Face to face partnership meetings have been put on hold due to social distancing requirements however some partners have been able to meet through online platforms to continue discussions and keep the momentum going with collaborative planning. There have been barriers to involvement from statutory services at this time whilst prioritising the urgent COVID-19 response and delivering Critical Functions only.
- 1.2. Primary care provision of support to promote mental health and wellbeing has remained in place during the pandemic through the commissioned 3rd Sector service from Penumbra Wellness Centre. First Response support by phone/email/zoom and the Mental Health GP Link Workers and Distress Brief Interventions Service also still operational through online connections. Moray Wellbeing Hub have also continued to provide support and opportunities for connection through online engagement.
- 1.3. Secondary services used a RAG (Red, Amber, and Green) system to prioritise contact with service users and considered to be Critical Functions. The risk is that with the suspension of face to face contacts for non-essential work that there may be an unknown deterioration in someone's circumstances. Assurances were given to service users in writing to be in touch with the service if need change. Other mitigating arrangements included the establishment of a Grampian wide Psychological Resilience Hub that accepted self-referrals from adults, children, staff etc.
- 1.4. The partnership has encountered technology issues both in the availability of equipment and security. Availability of access to common group social media platforms that all partners can make use of would be of benefit going forward.

2. Public Protection Intelligence Report COG Questions -Mental Health and Suicide

- 2.1. **Have there been changes in patterns of demand relating to statutory Mental Health activity over this period?** There has been an increase in activity of approximately 25% in comparison to the same time frame for 2019.
- 2.2. **Is there sufficient MHO capacity to meet need and are there appropriate supports available to support engagement with individuals eg use of 'Near Me'?** This extra work is largely being absorbed by the MH team with assistance from Drug and Alcohol, social work and will continue to be monitored by the Public Protection Chief Officer Group.
- 2.3. **Is there active multi-agency monitoring of suspected suicides and are key staff including helpline staff suitably supported to deal with MH issues (eg access to Safe Talk training)?** There are mental health pathways in Moray that signpost to services, how to access them and the Moray Wellbeing Hub deliver a lot of training.
- 2.4. **Has the wider partnership, arrangements in place to plan for increased need in this area?** Operation Home First is considering what has worked well during Operation Rainbow (Critical Functions), in particular the Urgent Care Team (Adult Mental Health) Connect Team and MASH (Children and Young People's mental health). Process to restart some functions with redesign,

increase use of Near Me technology and reassess ways of working and status of patients on caseloads, with an overall move toward a recovery focussed service.

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