

DCP Scotland

Newsletter – May 2020

Welcome to the new issue of the DCP Scotland newsletter. We hope that all of our members are keeping well at this tumultuous time, and that this keeps you up-to-date on all that the DCP is doing to respond to the current crisis.



Scotland Chair's Update – Alison Robertson

I have to confess that I never used to be particularly interested in mindfulness, but if there was ever a time to practise it, this must be it! My evening exercise after work tonight started with a little light weeding, taking more time than usual to pull dry strands of grass from between the rose hedge. The sun was bright but the breeze was cold, and if I shut my eyes I could only hear the wind, blowing in little gusts. Somewhere in the distance there might have been a fishing boat in The Minch.

After supper, I could see the forecast snow clouds gathering, so I headed uphill to the end of the village road, and onwards up a crunchy gravel track to a weather station in the middle of a moor. From there, I looked into the blue sky to the north towards the next settlement along the coastline, over a small loch set in a dip in the heathery peat cuttings. Looking back south west, the heavy grey snow clouds were working across to the east, but seemed to forgive us in my bit of headland. Still sheltered by blue skies, I took a seat on a bit of concrete, and settled down with jacket pulled round, to gaze at the changing sky.

A gap on the horizon revealed grey layers of hills towards Harris. Across Broad Bay I could just about see the Butt of Lewis. A skylark popped out of the heather and soared upwards. Three ducks flew by – why in threes? Big cumulus white clouds formed amongst the peachy pink in the west. Sheep baaed now and then. I could not



Scotland chair's update, *continued*

decide if it all made me feel happy or sad. A helicopter hovered a few miles away, somewhere near the hospital, and I remembered – this is the year of Coronavirus... I got up to head down through the village to the house, and thought I must get hold of a bike as the roads are delightfully empty. I didn't meet a soul.

I have written this towards the end of what is usually my week off. In fact, it has been another manic week of choc-a-bloc team meetings with NHS and local authority colleagues (and I have met lots of people with whom I have never worked before), as we have planned a pathway at breakneck speed to support any anxious public, adults and children, and most importantly made good use of the BPS guidance for supporting staff. That guidance seems to have been universally well received and provides a useful framework or checklist, ensuring it is neither just about trauma counselling, nor just about PPE, but about ensuring good leadership, good communication, as well as practical and emotional support provided by peers and team leaders.

Other meetings have been with other Heads of Services and NHS Education for Scotland, along with Scottish Government representatives. A couple have been with Scottish Government colleagues, reporting on how we are getting on with HEAT targets as well as how our work has temporarily changed due to the Covid-19 challenge. The hard work, collegiate approach, and quick decision making by fellow psychology leaders in Scotland has been truly impressive.

As a result, colleagues have managed to produce and launch agreed resources hosted on NHS Inform and NES Turas sites. We have agreement from the Mental Health Division to fund a whole suite of digital interventions at various levels for the next 12 months across the country, as well as a forum for agreeing the best ways to deliver trainee learning outcomes, while allowing them to contribute to the challenges we face if that is appropriate. We have shared pathways and resources for specific client groups. We have been able to have direct discussion with a number of Scottish Government colleagues about how we might manage waiting lists at present. We have been able to share worries about governance issues re: new Covid-19 services. Quite apart from all getting better at using remote meeting media! If you want to know more, please ask, and if I don't answer just ask me again.

I sincerely hope that some of these outcomes are also benefiting you – for me they have been evidence of the way in which peer support can be one of the best stress-management strategies. After a day and half back at work I found myself waking at 3am, having heard the medical director's worst case scenario predictions about local death rates and learned from the chaplain that there are now no proper funerals. Then suddenly there was no hospital visiting at all, and we had security on the door, as well as the odd military officer type wandering about.

This now well-established group (HOPS) was originally set up for just such purposes, with a focus on support for senior psychologists as well as workforce planning. After the very first meeting I felt much better contained and started sleeping better again. I hope you are also able to make use of whatever peer groups you can access, whether faculties, DCP or work-based teams. They are crucial at times like these.

Of course, as an IT colleague said to me here, we seem to have modernised the NHS in two weeks flat. The same may be said of BPS and DCP – I have nagged on about videoconferencing meetings for ages and at last it seems no bother at all – the time, hotel bills and carbon emissions it must save are at least one benefit.

Having worked in very hard-pressed inpatient learning disability settings in the past, I am acutely aware of the challenge colleagues in those and in care settings face, and have tried to ensure that any work we do as psychologists refers to those groups of staff and clients as well as NHS. This has been welcomed locally.

I was really pleased to hear that some of my points seem to be moving forward locally, including meal delivery to frontline staff, on real plates rather than polystyrene, which kitchen staff apparently thought more appropriate. Empty Airbnbs here have also offered staff who might benefit places to stay nearer to work, which will be really helpful to some for various family reasons. Senior managers are getting better at telling people what they should do rather than what they should not, and writing communications in a more collaborative style, moving away from the 'senior managers to staff' mode. All of this is psychology too, and a fairly steep learning curve for many of us. Writing the chief executive's tweet could be a first for me. Psychology - never a dull moment!

DCP Scotland committee update

There are several other important developments which pre-date all of that.

Firstly, Joan Fraser has retired and we met our new membership services support, Anne Kerr, who will be supporting Wales and Northern Ireland also.

We have not yet managed to have a goodbye lunch for Joan – events have overtaken us, but it will happen and we will be pleased to catch up. Joan worked with BPS and DCP-S for many years, and was a font of knowledge and experience.

However, I think Northern Ireland have had a number of things in common with us and Anne's experience with them should bring us new ideas also. We will continue to have support on policy from Pagoda, and from Nigel Atter from the BPS on policy matters.

The BPS has a Covid-19 Working Group led by David Murphy, and DCP-UK has a number of workstreams, some of which should offer psychologists support during this tough time. Recently, a related BPS webinar was full with 1,000 sign ins. Webinars - another thing I have really hoped for from the BPS over the last few years, as the draw of a trip to London has lessened.

The DCP-S committee met in Glasgow at the Queen Elizabeth University Hospital, to draw up a revised strategic workplan that allowed us to address the things people have thought important but within the much-reduced budget. I will share this next time when the committee have seen it and agreed it. It reflects the usual areas of member support, and policy and public engagement in various ways.

Other updates

Media and communications

As the nation shifts from a busy 9-5 working environment to an uncertain routine, being wholly aware of the present moment, comes increased use of technology for many to distract ourselves from uncertainty.

There can be benefits and caveats for this. Cascading of information on social media can be problematic if not checked for accuracy, particularly from news organisations with questionable values, creating unnecessary fear and anxiety.

Yet, whilst we act as psychologists within our clinics, helping to deal with the uncertainty of current times, we can support our community by populating social media

platforms with:

- accurate/reliable information on the situation,
- directions to online advice, links, and resources to support and promote psychological wellbeing and resilience

I have and will continue to do this myself through our DCP-S Twitter account as well as my own personal social media platform. The DCP-UK has also gathered a useful and reliable list of resources which is [available on the website](#).

Jamie Ferrie

Students

During these unprecedented times, there has been understandable uncertainty for our trainee psychological workforce in Scotland that has impacted upon the provision of clinical placement and academic teaching.

The directors of both East and West DClInPsy programmes and the two MSc CAAP courses have been negotiating a unified approach to ensuring ongoing training is not impeded.

The BPS has recently released [guidance for accredited DClInPsy programmes](#) due to the Covid-19 outbreak. For now, interviews for 2020 intakes have still being going forward with videoconferencing technology that have been successful in England DClInPsy courses. Vivas in Scotland have also been successfully completed this way. Such experiences will surely prime our future workforce to be tech-savvy!

Policy and government

Alison Clark continues to seek views on the consultation for the Mental Health Act, which has had an extended deadline into May. Although many people are busy, others are working from home and may be able to contribute.

Clare Haughey, Minister for Mental Health, has provided direction for NHS health boards to continue their focus on mental health, but with appropriate prioritisation of referrals and waiting lists in the current circumstances.

Furthermore, Scottish First Minister, Nicola Sturgeon, has announced an additional £3.8m will be invested in NHS mental health support services. This includes additional funding for Breathing Space's online and

phone services, and £2.1m for the NHS mental health hub.

This should allow the hub to expand, to make it available to the public 24/7. The expansion of the mental health hub will bring in additional psychological wellbeing cover with support from a range of new or redeployed staff – some may be part of the rich skill mix from within clinical psychology.

Additional funding will also allow Cognitive Behavioural Therapy to be delivered via further online interactive learning platforms and via CBT therapists working through live messaging.

The Mental Health Directorate has provided an update

on how current mental health legislation has been impacted by Covid-19:

“This note is to clarify that at present there is no change to the provisions of the Mental Health (Care and Treatment) (Scotland) Act 2003. The temporary

modifications in relation to Scottish mental health legislation which are laid out in the Coronavirus Act 2020 are not yet in force and will not come into force until Scottish Ministers decide – on the basis of data and advice - to commence the provisions.”

Professional development

I hardly need to tell you all face-to-face events have been cancelled. Despite this, please use this time to get your thinking caps on about how DCP Scotland could offer webinars for CPD or zoom support groups, and feel free to respond to BPS email request to offer a webinar to colleagues.

Webinars have been very popular with a recent one for psychologists being oversubscribed by 2,000 people! I guess that if they are recorded, they can be a very efficient way of making them available later or using them when isolation is over in a facilitated teaching or CPD slot.

Leadership and Management

The wellbeing event which was planned by the DCP-UK Leadership and Management Faculty for Edinburgh in April had to be cancelled, but is being rescheduled for September. We (via Judy Thomson at NHS Education for Scotland) had made links with Scottish Government for an opening address at this.

We were pleased to have confirmation from a few Scottish speakers including HR in NHS Fife who won an award a few years ago for their culture of kindness, and from Mairi Claire Shankland. Anyway, this gives them all much more time to get prepared... maybe!

Response to Covid-19

In light of the current situation, NHS health boards across Scotland are using their initiative in using the broad competencies of our psychological workforce in supporting not only the wellbeing of the public, but our staff and colleagues.

NHS Greater Glasgow & Clyde has proposed to redirect emergency mental health presentations away from A&E departments by establishing a ‘Mental Health Assessment Centre’. Clare Haughey, Minister for Mental Health, has endorsed this proposal and encourages other health boards to consider similar initiatives.

NHS Lanarkshire and NHS Lothian has also set up dedicated helplines for NHS staff who may need support during the current circumstances, supported

by our diverse psychological workforce.

NHS Tayside has also organised a series of workshops for key frontline staff to assist them in supporting Scotland amidst the Covid-19 outbreak. One of these workshops focus on ‘Mental Resilience and Wellbeing in Staff’.

This involves a 45-minute presentation and group discussion on what staff experiences are, and how they can support themselves and one another through incrementally stressful times, facilitated by clinical psychologists and CAAPs across different services.

We want to hear from you!

Many NHS health boards have begun to increase capacity of video conferencing technology through NHS Attend Anywhere using 'NearMe'.

Yet, we understand that many other services are approaching this challenging time in innovating ways. We are keen to hear how each of our psychological workforce across the NHS health boards and services are responding to the Covid-19 outbreak.

Please [contact us](#) and share how your service is responding to these unprecedented times. At your consent, we will share this with the wider DCP-Scotland community in our next newsletter.

For now, stay safe, stay at home if not working, and save lives, and our NHS...

Get in Touch

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