

NIHR Greater Manchester PSTRC

Plain English Publication Summary

Publication: [Effects of the first COVID-19 lockdown on quality and safety in mental healthcare transitions in England](#)

Publication details (Vancouver format)

Tyler N, Daker-White G, Grundy A, Quinlivan L, Armitage C, Campbell S, et al. Effects of the first COVID-19 lockdown on quality and safety in mental healthcare transitions in England. BJPsych Open. Cambridge University Press; 2021;7(5):e156.

What are the most important findings/conclusions in this paper? Why are they important?

The COVID-19 pandemic increased some quality and safety concerns about patients receiving mental health care, for example:

- tensions between healthcare teams
- reduced support in the community
- difficulty accessing services
- increased pressure on carers
- increased difficulty for patients to be admitted.

Also, several improvement ideas that had been recommended by research, but which seemed difficult to use in practice, quickly began to be used (for example, the use of video calls for team meetings between different organisations).

What did you do?

We spoke to 34 individuals during the first UK COVID-19 lockdown to ask them about their experiences of moving between mental health services (for example, discharges and admissions). The people that we spoke to fell into four categories:

- patients
- carers
- healthcare professionals
- other people with relevant experiences (for example, charity workers, policy makers, advocates).

Then we studied everything that people had said, to find the key themes in the discussions.

Why did you conduct this research?

Discharges and admissions are a risky time in the patient journey, and this was known even before the pandemic. We wanted to understand how the first UK lockdown affected people's views about the quality and safety of discharges and admissions.

What was known before your paper was published?

Moving between the places where healthcare happens is called a transition. Admissions and discharges to and from mental health services are both examples of transitions. There are safety concerns about these kinds of transitions, but many people thought that mental health transitions could be improved if professionals from different groups communicated more frequently, for example, by using video calls. But, before the pandemic, people felt that it would be difficult to make these changes.

What is next? What is the potential impact of the work in this paper? What will change as a result of this paper (or the study it describes)?

We are developing a set of changes to mental health transitions - these changes are called an intervention. The intervention will make sure the same processes are taking place everywhere, and will reduce harm in mental health transitions. To design the intervention, we took on board the changes to services that happened during the pandemic, which people told us about in their interviews.

Does this paper link in to a particular study / project? If so, please summarise the study and explain how this paper has improved understanding, or will move the study forward.

This work is linked to the SAFER mental health care transitions project. It helped us to understand the changes to services that happened as a result of the COVID-19 pandemic, and we will use this information in our future work.