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Monthly Report, May 2020

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### About Us

The Mental Health Council of Tasmania (MHCT) is the peak body for community managed mental health services in Tasmania. We represent and promote the interests of our Members and work closely with Tasmanian Government agencies and Primary Health Tasmania to ensure sectoral input into public policies and programs. We have a strong commitment to enabling better mental health care access and outcomes for every Tasmanian. Our purpose is to improve mental health for all Tasmanians, and our vision is for all Tasmanians to have awareness of, and value, their mental health and wellbeing.

### Introduction

In response to the global COVID-19 pandemic, Federal and State government responded rapidly by implementing a raft of COVID-19 restrictions and social distancing measures in mid-March 2020. In order to clearly understand the impacts on the mental health sector, consumers and their families and friends, MHCT developed a COVID19 Response and Recovery Strategy. The Strategy incorporates extensive and ongoing consultation which allows MHCT to map how these restrictions and their eventual easing are impacting mental health service delivery in our state. In addition, through engagement with service providers delivering psychosocial supports to the broader population in response to COVID-19, MHCT is also gaining understanding around whole-of-population mental health. This document provides a synopsis of impacts and emerging themes identified in the Community Managed Mental Health (CMMH) sector and other stakeholders, along with early indications of the impacts of whole-of-population mental health for the month of May 2020, and is informed by MHCT's COVID-19 Response and Recovery Strategy.

# MHCT COVID-19 Response and Recovery Strategy

The strategy consists of three priority groups and through regular consultation and data collection aims to track how COVID-19 is impacting on the mental health sector, consumers, families and individuals experiencing psychological distress due to the pandemic.

- The COVID-19 Mental Health Sector Network aims to track the impacts of COVID-19 restrictions on Tasmanian Mental Health Sector service providers during the restriction period and beyond into the recovery phase. The Network provides a platform to identify the impact of COVID-19 on service delivery, workforce and client needs and will identify and track emerging issues. The network will provide a mechanism to provide direct and timely information to government, agencies and other key stakeholders as COVID-19 restrictions continue and as services respond to the lifting of restrictions.
- The COVID-19 Psychosocial Supports Working Group aims to provide a platform to capture data and evidence of cross-service collaboration to support people who have no history of mental-ill health, but due to the impacts of COVID-19 are experiencing varying levels of psychological distress. The Working Group members will capture shared data and emerging themes to inform State and Federal Government and relevant agencies on the level of demand and need in the Tasmanian community for psychosocial supports and services during the COVID-19 restriction period, into the recovery phase and beyond.
- The COVID-19 Mental Health Consumer, Carer, Family and Friends Network aims to monitor the impact of COVID-19 on people with pre-existing mental health needs prior to the COVID-19 pandemic along with their families, friends and carers. The Network will provide a platform for sharing the voice of lived experience during the COVID-19 restrictions and into the recovery phase. Network members will provide information on emerging themes and issues experienced by people with mental ill-health, their friends and family in relation to COVID-19 restrictions and beyond into the recovery phase. The Network will provide direct and timely information to government, agencies and other key stakeholders as COVID-19 restrictions continue and begin to ease.

# Identified Impacts during May

#### **CMMH Service Providers**

#### Workforce mental health and wellbeing

- Between 19 March and 8 May, 76% of service providers identified that their staff had been impacted by changed workplace conditions.
- During May, 50% of service providers identified that psychological impacts on staff had increased.
- This increase indicates that impacts may be progressive, resulting at least partially from fatigue caused by managing a novel situation, and the compounding effects of multiple,

unfamiliar and continuing stressors, including unforeseen, almost immediate and significant changes in work practices and delivery methods.

### **▶** Service Delivery

- Over 50% of service providers had ceased face to face (F2F) delivery of services and migrated some or all services to online.
- About 40% of service providers are still delivering F2F services at a reduced rate, to respond to client need, and maintain residential mental health services.
- With the easing of restrictions from late May, several Mental Health Sector Network members have indicated they are starting to recommence smaller group activities.

#### **▶** Service Demand

• 57% of service providers noted an increase in service demand.

- Of those service providers who noted an increase in demand, 70% identified this increase was due to existing clients requiring more support, and 35% was due to new referrals (please note percentages do not sum, as some survey respondents cited both causes).
- Nearly half of all service providers were effectively unable to begin providing services to new clients during 18 March to 9 May due to service capacity.
- In the period 9 to 20 May, service capacity improved slightly. About 30% of service providers reported they now had greater capacity to start supporting new clients, while 62% reported their capacity had remained the same.

#### Clients of CMMH Services

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Most services that have noted an increase in demand stated this was from existing clients requiring more support (70%). Service providers identified the reasons clients needed more support were due to the broader impacts of COVID-19 (including restrictions, isolation and social distancing), and the impact of changes in mental health service delivery (for example changes from F2F to phone and online supports).

- During May, 47% of Mental Health Sector Network survey respondents noted that former clients had re-engaged to seek further support. Factors associated with reengagement included lapses in recovery from substance use issues and depression, linked to the triggering effects of isolation and being deprived of meaningful activities, and the magnifying effects of COVID-19 on existing stressors.
- The impact of isolation was noted as a frequent cause for new referrals during May.
- Anxiety, drug/alcohol use, relationship problems and family violence were all more frequent presenting causes for new referrals during May.
- Depression, dealing with anger, loss or grief, the impact of unemployment, suicidal ideation and suicide risk were all slightly more frequent presenting causes for new referrals in May.

### Consumers, Carers, Family and Friends

- Consumer representatives identified that consumer's experiences were largely overlooked during the response phase to COVID-19 in March 2020.
- The CCFF Network identified mixed responses from consumers and families about their preferences of service delivery method (i.e. some prefer face to face and some have found video-based support more convenient/preferable). The CCFF Network highlighted the importance of choice in service delivery methods for consumers.
- The CCFF Network identified ongoing confusion about what people can and cannot do based on current government guidelines. This created anxiety and was identified as a barrier to reconnecting with community, services and supports as restrictions began to ease.
- Consumer representatives identified that feelings of isolation, fear and hopelessness were significant issues for their members. Consumer representatives noted that several of their members needed to re-engage with mental health services.
- Carer representatives identified that families have been providing extra support to their loved one with mental ill-health due to day programs being paused or services changed. Additionally, families and friends are providing increased supports around social connection that is not necessarily provided by mental health services.
- Carer representatives have also noted that families and friends hadn't received supports pre COVID and felt they are unlikely to post COVID.

### Whole-of-Population Mental Health

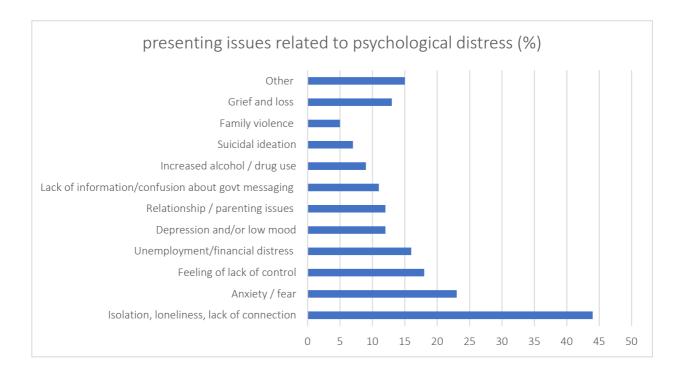
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- The COVID-19 Psychosocial Supports Working Group data collection indicated that during May, 81% of interactions related to psychological distress, of these interactions, 67% were new presentations.
- When questioning the reasons and issues for psychological distress, the following table indicates the areas where individuals in the community are currently being impacted.
- 54% of interactions resulted in ongoing service engagement.

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- In 30% of interactions the client was referred onward to other services and supports including private mental health services, family and relationship services and employment and financial services.
- Preventative strategies were recommended in 91% of interactions. Preventative strategies aim to reduce the risks of mental ill-health and promote good mental health and wellbeing.



# **Emerging Themes**

### The Impacts of Isolation

The impacts of isolation, loneliness and lack of connection are of particular significance both within the Tasmanian community and highlighted as a frequent presenting cause for new and returning referrals by service providers.

We are yet to understand the full impact of isolation and loneliness as it relates to the COVID-19 pandemic, however, the lifting of restrictions now provides opportunities for consumers to reconnect with community. As restrictions ease, isolation and loneliness may reduce as a presenting cause. However, as identified in the CCFF network, COVID-19 restrictions guidelines and messaging have contributed to anxiety and confusion and has created a barrier to reconnecting with community. MHCT will utilise its COVID-19 Response and Recovery Strategy group to explore how best to promote community connection and a sense of safety as Tasmania moves into the recovery phase.

Another important cohort to consider who will continue to feel the impacts of isolation are *COVID-19 vulnerable groups*. COVID-19 vulnerable groups consist of cohorts at greater health risk if infected by COVID-19, with these groups encouraged to maintain restrictions for an indefinite period. It is not yet known how this recommendation to remain sheltered will impact on the longer-term mental health and wellbeing of COVID-19 vulnerable groups.

#### An Increase in Service Demand

As restrictions begin to ease, and services come back to F2F modes of delivery, the COVID-19 Mental Health Sector Network anticipates that those clients who chose not to engage with phone and online supports will re-engage. Additionally, during May, 57% of service providers noted a rise in service demand due to the increased support needs of existing clients, along with former and new clients presenting to the service.

While some service providers noted that they had increase in capacity to start supporting new clients, many providers reported limited capacity. Of those service providers who reported increases in demand for services, 35% identified that the increase in demand was due to new referrals. In addition, as the impacts of COVID-19 are felt and psychological distress within the community increases and as those in distress are referred onto other services and supports (30% in May), there are early indications that service demand will increase across mental health and community support services in Tasmania.

MHCT will continue to monitor increases in service demand and report on service providers' capacity to meet demand, however, as we move forward into the recovery phase it is important to not lose sight of the anticipated mental health implications of COVID-19 within the community, and the need for the mental health sector to be well equipped to meet any rises in demand.

### The Need for Promotion, Prevention and Early Intervention (PPEI) Initiatives

The increase in psychological distress is highlighted through the COVID-19 Psychosocial Supports Working Group data collection. 81% of interactions were identified as related to psychological distress and of those, 67% were new presentations. With service providers noting presenting

issues relating directly to fear and anxiety, there is an important need for a coordinated approach to promote positive mental health, prevention of mental health problems and early intervention (PPEI) to address the impacts of COVID-19.

A coordinated PPEI approach will be imperative to ensure that people experiencing psychological distress in Tasmania know when, where and how to access supports and services, to avoid escalation and an increase in severity. These services must be accessible and available so that individuals in the community can get help early to prevent further impacts on their mental health and wellbeing.

As Tasmania transitions into the recovery phase, we must take seriously the concerns regarding a 'second wave' where the broad population may experience increased levels of psychological distress due to the impacts of COVID-19 including significant lifestyle and societal changes. MHCT's paper on Population mental health and Wellbeing (appendix 3) notes we may need to brace for this delayed response in individuals reporting distress, as the subsequent economic and societal implications are yet to be fully realised. As such, MHCT will continue to monitor whole of population mental health and presenting issues of distress through the COVID-19 Psychosocial Supports Working Group.

## Appendices:

- Mental Health Sector Network report summaries 1 and 2
- Psychosocial Supports Working Group collated data report
- Mental Health Council of Tasmania: <u>Population Mental Health and Wellbeing in Pandemics</u>, April 2020

Mental Health Council of Tasmania 5 June 2020