Delivering remote groups

The context
Sussex Partnership NHS foundation Trust - Acute Day Service (ADS)

The tools
Go to meeting and Attend anywhere

The challenge
The Acute day service provides a 4-week mental health group treatment programme which acts as a bridge between acute hospital and community mental health support, and can prevent inpatient admission. During the COVID-19 pandemic, there was a need to continue providing an acute day service, but groups were not permitted due to the social distancing restrictions in place.

The solution
The team explored various IT options available to the trust and trained in the use of 2 virtual platforms. Group content was then converted into a virtual format, so that it could be presented via these platforms.

As part of the initial contact which was conducted on the phone, people were asked if they had suitable technology and a Wi-Fi connection to access the virtual consultations and group sessions on offer. This telephone contact aimed to support service users to choose therapeutic groups based on their individual therapeutic goals to promote recovery. The team used 2 different virtual platforms to deliver the 4-week programme. Attend Anywhere was used to conduct 1-1 video consultations. During these 1-1 video consultations, occupational therapists were able to work with a person to review therapeutic goals and discuss a discharge plan. Go to meeting software was used to deliver the group programme.

The impact
The 4-week Acute day treatment service was able to continue throughout lockdown. Friends and family feedback found that

- People who had previously accessed this service when it was provided face to face and again when it was delivered remotely, reported that it was as effective in meeting their needs.

- Remote groups completely removed the need for hospital transport. For the person, this improved access to the service with the added benefit that they didn’t need to wait around for transport.

- ADS were able to continue to support the Crisis team to manage their caseload by increasing the number of contacts; by attending ADS groups, this reduced the need for further 1-1 contacts.

- People who may have previously been unable to access the groups due to physical and mental disabilities were now able to access them from their own environment.
The learning
For the team delivering the remote groups, initially staff did require more planning time to convert the usual group content into online presentations and resources before the sessions started. However, it was easier to share links to further information and additional resources with people during and post session, as they could now communicate with services via email which wasn’t permitted before. Sharing information digitally can support confidentiality e.g. people who attend the groups do not need to carry paper copies of activities or advice sheets to and from a session as well as supporting environmental sustainability.

There is a need to consider virtual facilitation skills e.g. virtual warm up activities that encouraged people to use their cameras to introduce themselves because some group members seemed to be reluctant to make themselves visible. There is also a need to make the groups more interactive as they previously were in the face to face sessions; eg: paired activities.

Virtual groups have other benefits which could improve service provision in the future

- Easier to participate in outside of normal working hours e.g. evenings and weekends
- Reduction in cost e.g. room booking and transport
- More accessibility for service users who struggle with anxiety going outdoors and also physically being with unfamiliar people in a group.