Evaluating the effect of the COVID-19 pandemic lockdown measures on urgent psychiatric hospital transfers from HMP Wandsworth

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Aim
To identify whether there was a change in the number of, and time taken for, urgent psychiatric hospital transfers from HMP Wandsworth following the introduction of the COVID-19 pandemic lockdown measures.

Background
• In 2005 the Department of Health (DoH) introduced a 14-day target for urgent psychiatric hospital transfers from prison after identifying unacceptable delays in the process, but published data shows this target has since consistently been breached.1,4
• The COVID-19 pandemic significantly impaired the function of psychiatric services, with a reduction in the provision of community and inpatient adult services.5,6
• Lockdown measures in prison consisted of a far more restrictive regime,7,8 which early evidence suggests has had a negative effect on prisoners’ mental health.9
• This study aims to assess the impact of lockdown measures on the urgent prison-to-hospital transfer process at HMP Wandsworth.

Method
Data were collected on all patients urgently transferred to psychiatric hospitals from HMP Wandsworth under sections 47/49 and 48/49 of the Mental Health Act 1983 over an 18-month period (nine months either side of the Coronavirus Act 2020 coming into force: 26/6/2019-25/12/2020). Data collected included the number of patients referred and transferred, the time taken for transfer to take place, and the security level required. Statistical analysis compared time taken from referral to transfer from the pre- and mid-pandemic groups.

Results

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<th>Number of patients transferred to hospital</th>
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<td>General adult (PICU) transfers</td>
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<td>Forensic transfers</td>
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<td>Pre-Pandemic</td>
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<th>Time taken for urgent transfers to hospital</th>
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- 33 patients were referred for urgent transfer pre-pandemic, and 39 were referred in the mid-pandemic group. 21 were successfully transferred (mean time taken: 76.1 days) pre-pandemic, and 29 (mean time taken: 44.6 days) mid-pandemic. Those referrals not transferred were either withdrawn or declined.
- Despite a difference of 31.55 days in the time taken for transfer to take place between the groups, it did not meet statistical significance (p=0.109).
- There was one general adult (PICU) transfer pre-pandemic (4.8% of all transfers, taking 64 days), and eleven mid-pandemic (37.9%; mean time 18.3 days).
- 20 patients were transferred to forensic wards prior to the pandemic (mean of 76.8 days), and 18 were mid-pandemic (60.7 days).

Conclusions
• The 14-day DoH target continues to be breached.
• The reduced overall transfer time during the pandemic is primarily due to the increase in number of quicker transfers to non-forensic PICU wards, possibly due to the reduced general adult psychiatric provision increasing the number of those patients presenting via the Criminal Justice System.
• The reduced forensic transfer time during the pandemic lockdown may be due to a willingness for clinicians to accept referred patients without a face-to-face assessment.
• A larger, multi-site sample is required to increase the sample size to further investigate these findings.

References