

Serious Mental Illness and COVID Oximetry @ Home – South London

Early detection of deterioration in patients with confirmed or suspected COVID-19 is crucial so that timely response and escalation of care can take place. We also know that the ability to detect reduced oxygen saturation levels in patients is critical due to links to poorer outcomes. As part of the NHS national COVID-19 response, the Health Innovation Network (the AHSN and Patient Safety Collaborative for south London) has supported the two south London Integrated Care Systems to implement primary care led COVID Oximetry @Home services. These services have enabled patients at risk to safely monitor their condition at home. Early emerging evidence has shown increased COVID related mortality in people with severe mental illness (SMI), with a recent paper showing that, of the measures assessed, schizophrenia has the greatest effect on 45-day covid mortality, second only to age (Nemani et al, 2021 <https://jamanetwork.com/journals/jamapsychiatry/fullarticle/2775179>)

Following local discussions with key stakeholders including South London and the Maudsley NHS Foundation Trust, we made a broad agreement that those with SMI should be considered as an 'at risk' group. We have outlined the following as broad considerations for services to help support those with a diagnosis of SMI who get COVID-19;

- **Referral process:** expand COVID Oximetry @Home referral criteria to include SMI and make changes to referral forms/standard operating procedures to enable SMI to be flagged at point of referral e.g. by adding SMI to risk indicator to referral form or at onboarding. Enable mental Health teams to refer into COVID Oximetry @Home pathway. Consider proactive searches in primary care
- **At onboarding:** Consider the psychosocial needs of the patient and their current situation. Consider alerting mental health services if a patient under their care has been admitted onto the COVID Oximetry @Home pathway
- **Oximeter provision:** Oximeters should be provided as usual within the pathway and at presentation, with focus on whether patients may need additional support to help them to take and record readings. A patient oximeter should not be withheld because of an assumption that a patient may not be able to manage this process
- **Capability and workforce implications:** Consider support for COVID Oximetry @ Home staff e.g., training, scripts or telephone number to access local mental health team if needed
- The following links provide useful information regarding mental health medication during covid-19.
 - <https://www.rcpsych.ac.uk/about-us/responding-to-covid-19/responding-to-covid-19-guidance-for-clinicians/community-and-inpatient-services/providing-medication>
 - <https://www.sps.nhs.uk/articles/clozapine-drug-monitoring-in-primary-care-during-covid-19-for-stable-patients/>. Please note that active infection/ inflammation may increase serum clozapine levels, as will stopping smoking cigarettes.
 - The Medicines Information Team in Maudsley Pharmacy will be available to answer specific queries where needed.
 - <https://www.youtube.com/watch?v=JYafRpgAUL4&list=PLrVQaAxyJE3cbdJCYYsIZgHrhY9PtINIA&index=2> This link is a resource for carers produced by HEE

Discussions nationally are ongoing regarding SMI as a risk indicator for the COVID Oximetry @ Home pathway.