

# The Wales Mental Health in Primary Care

## (WaMH in PC)

### Bursaries 2003

Name of Applicants: Mark Boulter

Subject: The Towy Valley Mental Health Project

#### AIM

To improve the knowledge and skills of all people working within the primary care setting in mental health issues, as well as raise awareness of mental health problems in our communities, and what strategies are available to deal with them. This will be a multi-disciplinary day for all practice staff, nurses from practices as well as from district nursing, health visitors, the local community mental health team, as well as users and carers selected from another area to give a feel for how services work for them and what dealing with these problems means on a daily basis. This will involve the full participation of two rural general practices in the Towy valley (Llandovery and Llandeilo) plus the local Community Mental Health Team, and will be an important step in improving local communication and co-ordination of services across a large rural area in West Wales

#### WHY THIS PROJECT?

It has become obvious from discussions within one practice that most of the staff were poorly equipped to deal with mental health problems. Only 30% of GP's have any postgraduate training in Psychiatry, most nurses have only the mental health component of their generic nurse training to fall back on, and reception staff who often deal with very delicate and stressful situations involving people with mental health problems have no special training to help them recognise and deal with them. Yet mental health problems according to the WHO are set to be the single biggest cause of disability in the world within the next few years and most research has shown that there is a mental health component in over 30% of our consultations. So there is a huge tension within primary care ( where over 90% of mental problems are dealt with) between demand and the skills available to deal with it. In addition there are huge workload pressures which threaten to further marginalise mental health problems, and we have a workforce which has little confidence in dealing with such problems on a daily basis.

Secondly a study based in Carmarthenshire looking at mental health in primary care found that one of the most important issues for GP's was the interface with Secondary Care, and in particular the boundary with Community Health Teams ( personal communication). We hope that by joining two practices together whose boundaries are almost identical with the local Community Mental Health Team, we can pool resources, foster new working relationships, and look at cross boundary working.

### WHAT WILL WE DO?

We aim to close both surgeries for a half-day, and joining members of the Community Mental Health Team, meet at an independent venue. The staff involved will be GP's and GP registrars (and possibly medical students as both practices are teaching practices), practice nurses, district nurses, health visitors, nurse practitioners, health care assistants, reception and administration staff, psychiatrists, CPN's, occupational therapists, psychologists and support workers. We will also invite local pharmacists. Users and carers will also attend the afternoon from another area. We have decided to use users and carers from outside our own area as we feel that at present structures for user/carer involvement in Primary Care are in their infancy and that they would not be mature enough yet to enable a free and balanced flow of information and ideas. We hope to remedy this in future events.

There would be opportunities before hand for all members attending to decide on what they want to discuss, by asking them to choose topics from a list supplied to them ( based on the WaMH in PC training-needs questionnaire), and it is envisaged that there will be a few plenary sessions (maybe giving the users perspective, discussing common diagnoses such as depression and anxiety, information about stigma/discrimination) but then we would break in to groups for discussion around the topics decided by the staff themselves. Finally there would be a feedback session and a plan of work to be carried out. It is hoped that this is just the beginning, and that there would be regular follow on events in the future. It is hoped that we would be able to involve our own carers and users in the future.

### WHAT WILL WE GET OUT OF IT?

We hope that we will improve everyone's level of awareness of the spectrum of mental health disorders and in particular how they affect sufferers and their carers. We also hope to improve levels of knowledge and confidence in dealing with such problems in our working lives. In addition we anticipate improvements in team working, working across boundaries and hopefully service provision. It is anticipated that this session will not be an end in itself, but part of a rolling programme of such events, as we cannot hope to cover everything in one day. Also we hope that members will develop projects from the discussions that take place in the workshops, which could be presented at future sessions. We would also hope to show that such awareness days are feasible, effective and worthwhile and that other primary care settings should consider such activities themselves.

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