

# How to employ a mental health therapist

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# Common mental health conditions account for a large proportion of our caseload in primary care.

Mental health conditions have historically been stigmatised, and their diagnosis and treatments under-resourced, something the improving access to psychological therapies (IAPT) initiative sought to address.

To take this further, the General Practice Forward View (GPFV) set out to 'co-locate' 3,000 new mental health therapists in primary care. However, this is through expansion of existing IAPT services, to be developed and commissioned by CCGs rather than through funding for practices to employ staff directly.

The role of the mental health therapist is not listed as one of the additional roles that will be subsidised by the Network DES under the new GP contract for 2019/20 (although this may be open to future negotiation). A network may decide to employ a mental health therapist separately, without the subsidy.

This article focuses on what individual practices can do to ensure that the mental health needs of their unique patient population are met.

#### What do we mean by 'mental health therapist'?

A mental health therapist is a trained professional who can offer a wide range of therapeutic support for mental illness to individuals or groups.

#### **Psychotherapist**

In general practice, this could be a therapist who practices talking therapy such as counselling, psychotherapy or cognitive behavioural therapy. The duration of therapy would usually be in blocks of weekly appointments for six to 12 weeks or longer – the type of therapy offered by IAPT services.

Therapist qualifications vary from diplomas to degrees or postgraduate-level training in the specific therapy practised. There are no compulsory training courses but to register with the British Association of Chartered Psychotherapists requires three to four years of training, while psychotherapists registered with the UK Council for Psychotherapy require a postgraduate masters qualification taking four years.

#### Mental health nurse

The other option is a registered mental health nurse (RMN) who would provide appropriate psychological and therapeutic support to the individual, and liaise with the primary care team regarding diagnosis and treatment of mental health conditions. The qualification is a three-year degree with Nursing and Midwifery Council (NMC) registration. Experience in working in a crisis team would be very useful.

#### Job role

The great thing about the mental health therapist role is that it is very flexible and varies depending on what the individual practice population needs.

If the local IAPT service has long waiting times or is located far from the surgery, then a therapist who can offer initial assessment and start a counselling process may be most useful. If GP appointments are in short supply, then a therapist who can offer a diagnosis, risk assessment and come up with an initial management plan, including starting medication and onward referral/signposting, will be the best option.

#### Mental health therapists can see:

- New or follow-up patients with common mental health conditions: this can be after first contact with the reception team or after referral by a GP or nurse
- Patients on the practice mental health register with more severe mental illness
- Other patients depending on the individual practitioner skills, such as patients with dementia, those with eating disorders or patients under 18
- Patients who require a home visit

#### They are also able to:

- Undertake mental capacity assessments
- Oversee QOF registers for depression, mental health and dementia\*
- Refer patients to secondary care

\*The mental health, dementia and depression QOF points are a substantial source of income – around £10,000-20,000 a year. Delegating QOF work to a mental health therapist where possible can be cost-effective, as they are well placed to conduct the depression reviews, and annual reviews for mental health and dementia, that ensure maximum QOF points are attained.

#### Co-located IAPT practitioners

Information regarding the mental health therapist roles created under the expansion of IAPT through the GPFV is available from NHS England. The majority of the extra 3,000 IAPT practitioners will specifically be offering help to patients with a comorbid long-term condition or medically unexplained symptoms, although NHS England has promised the expansion of core IAPT services will also provide extra practitioners for primary care.

#### Hiring a mental health therapist

You will be looking for an experienced, confident therapist who is excited to work in primary care to improve mental health for your patients. So as not to duplicate any services already provided, it is important to be clear with the practitioner what you are hoping to achieve; for example, reduce the strain on the GP appointment system, or provide ongoing counselling.

All therapists must have a sound knowledge of confidentiality, safeguarding and risk assessment.

Community psychiatric nurses working in the crisis team or holding a caseload of patients would typically be on the NHS Agenda for Change Band 5 or 6 pay scales, and a primary care practitioner doing similar work in the GP practice should expect similar remuneration.

Band 5 RMN pay scales are currently £23,023-29,608 full-time (hourly rate £11.78-15.15) and Band 6 £28,050-36,644 (hourly rate £14.35-18.75), depending on levels of experience. Qualified psychotherapists employed in the NHS tend to be on Band 8 pay scales.

# Indemnity

Nurses in general practice are now automatically covered for clinical negligence under the state-backed indemnity scheme. Indemnity provided by defence organisations will need to be assessed on a case by case basis for therapists with alternative qualifications.

# **Funding**

The GPFV committed funding to CCG baselines to employ more IAPT clinicians, rather than funding GP practices to employ their own mental health therapists. There are currently no specific funding streams available for individual practices or networks to employ a mental health therapist. I would suggest discussing funding options within your primary care network and taking that back to the CCG.

# Managing the role

Professional development of the therapist in areas relevant to the practice is useful: we identified a need for our therapist to undergo additional training to work with adolescents.

Thought must also be given to looking after the practitioner, as seeing many patients a day with depression and anxiety can be hard. You should factor in time each week for the mental health therapist to discuss cases with colleagues – ideally your GP lead on mental health – and plenty of breaks. It's also important to include the therapist in regular practice meetings so they are not isolated.

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