

The RCGP Curriculum: Clinical Modules

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➤ 3.10 Care of People with Mental Health Problems

Summary

- You should consider the mental health of a patient in every primary care consultation: 90% of people with mental health problems across the lifespan are managed in primary care
- Mental health problems contribute to disability, unemployment and social exclusion
- Depression and anxiety are common in people with long-term physical conditions, and increase the morbidity and mortality from these conditions
- People with severe mental health problems have an increased risk of morbidity and mortality owing to cardiovascular disease and diabetes; as a general practitioner (GP) you have a significant role in prevention, detection and management of this physical co-morbidity
- People with unexplained physical symptoms may have underlying psychological distress, but be aware of the dangers of medicalising distress. Repeated investigation is costly in terms of patient suffering and healthcare costs
- Good communication skills, particularly listening skills, empathy, understanding and compassion, are key in managing people with mental health problems
- An exploration of physical, psychological, social, cultural and spiritual issues should be integrated into both the consultation and the management of illness; cultural issues can impact on how mental health issues present and the acceptability of diagnosis
- Offering alternative approaches and close working with the third sector (voluntary and community sectors) are important

Knowledge and skills guide

Core Competence: Fitness to practise

This concerns the development of professional values, behaviours and personal resilience and preparation for career-long development and revalidation. It includes having insight into when your own performance, conduct or health might put patients at risk, as well as taking action to protect patients.

This means that as a GP you should:

- Understand the demands of working with people with mental health problems and the need to make sure you remain healthy; consider the need for supervision and support from your trainer, or peers.

Core Competence: Maintaining an ethical approach

This addresses the importance of practising ethically, with integrity and a respect for diversity.

This means that as a GP you should:

- Understand and reflect on how the need for confidentiality and informed choice may make you feel, always taking into account the patient's perspective
- Understand how your own beliefs and value systems may influence your interactions with patients with mental health problems

Core Competence: Communication and consultation

This is about communication with patients, the use of recognised consultation techniques, establishing patient partnership, managing challenging consultations, third-party consulting and the use of interpreters.

This means that as a GP you should:

- Enable people who are experiencing mental health problems to engage as much as possible in understanding their difficulties and negotiate appropriate, acceptable management
- Use communication skills that enable your patients who are distressed to feel comfortable enough to disclose their concerns
- Use assessment schedules in a patient-centred way
- Understand the concept of concordance, which is particularly important in mental health care:
 - You need to support patients in making choices about which treatment options may work best for themselves
 - You should understand that this ability to choose improves the likely effectiveness of the intervention

- Understand the range of psychological therapies available including cognitive behavioural therapies, mindfulness, counselling, psychodynamic, psychosexual and family therapy
- Provide opportunities for continuity of care for people with mental health problems
- Be aware of the need to promote hope and demonstrate compassion and their use as resources to aid healing

Core Competence: Data gathering and interpretation

This is about interpreting the patient's narrative, clinical record and biographical data. It also concerns the use of investigations and examination findings, plus the adoption of a proficient approach to clinical examination and procedural skills.

This means that as a GP you should:

- Understand the epidemiology of mental health problems in general practice
- Know the prevalence of mental health problems and needs amongst your own practice population
- Understand the difference between depression and emotional distress, and avoid medicalising distress
- Understand the role of case-finding in identifying people at risk of developing mental health problems, using effective and reliable instruments where they are available
- Understand the place of instruments in case-finding for depression (the Whooley questions¹) and for assessment of severity of symptoms (GAD-7² for anxiety and PHQ-9³ for depression)
- Ensure that you appropriately explore both physical and psychological symptoms, family, social and cultural factors, in an integrated manner

Core Competence: Making decisions

This is about having a conscious, structured approach to decision-making; within the consultation and in wider areas of practice.

¹ This two-question case-finding instrument is a useful measure for detecting depression in primary care. The questions are: During the past month, have you often been bothered by feeling down, depressed or hopeless? During the past month, have you often been bothered by having little interest or pleasure in doing things? A positive response to either indicates that a person may be depressed and further assessment is needed.

² The GAD-7 is a brief clinical measure for the assessment of Generalized Anxiety Disorder (GAD). This tool may serve as a case-finding instrument to identify probable cases of GAD, and the scale scores provide a measure of severity.

³ The PHQ-9 is a nine item depression scale of the Patient Health Questionnaire. It is a useful tool for assisting in diagnosing depression, assessing severity, as well as selecting and monitoring treatment.

This means that as a GP you should:

- Understand the roles and the power of emotions and their relevance in well-being and mental illness
- Recognise early indicators of difficulty in the psychological well-being of children and young people and respond quickly to concerns raised by parents, family members, early-years workers, teachers and others who are in close contact with the child or young person
- Understand specific interventions and guidelines for individual conditions using, where appropriate, best practice as described in the Scottish Intercollegiate Guidelines Network (SIGN) or NICE guidelines
- Be able to assess and manage risk/suicidal ideation

Core Competence: Clinical management

This concerns the recognition and management of common medical conditions encountered in generalist medical care. It includes safe prescribing and medicines management approaches.

This means that as a GP you should:

- Understand and empathise with people who are distressed and fully assess them (including risk) and offer appropriate support and management
- Understand the primary care management of patients with common mental health problems
- Understand the initial management of a patient with a suspected psychotic illness
- Manage people experiencing mental health problems in primary care, using alternative interventions where appropriate, including forms of talking therapy, medication and self-help
- Be able to co-create and implement an immediate safety plan with a suicidal patient

Core Competence: Managing medical complexity

This is about aspects of care beyond managing straightforward problems. It includes multi-professional management of co-morbidity and poly-pharmacy, as well as uncertainty and risk. It also covers appropriate referral, planning and organising complex care, promoting recovery and rehabilitation.

This means that as a GP you should:

- Ensure that people with severe mental illness are screened for metabolic and cardiovascular risk factors and that such risks are minimised through appropriate lifestyle advice and management, including facilitating behaviour change
- Know how to use case-finding in people with physical illness who are at risk of mental health problems

- Understand the importance of recognising and treating depression and anxiety in people with long-term physical illnesses
- Understand the common mental health problems in older people and the importance of considering complex multi-morbidities in such patients
- Understand the psychological effects of trauma and war (e.g. post-traumatic stress disorder) and the needs of veterans
- Understand the range of mental health problems that people with learning difficulties may experience
- Recognise the increased risk of mental health problems in the perinatal period and demonstrate how to assess and manage these appropriately in general practice

Core Competence: Working with colleagues and in teams

This is about working effectively with other professionals to ensure good patient care. It includes sharing information with colleagues, effective service navigation, use of team skill mix, applying leadership, management and team-working skills in real-life practice, and demonstrating flexibility with regard to career development.

This means that as a GP you should:

- Understand how to access local health and social care organisations, both statutory and third sector, that are an essential component of managing people with mental health problems
- Understand your responsibilities for supporting children in difficulty, and know how to access support and advice from specialist Child and Adolescent Mental Health Services (CAMHS) and CAMH workers in primary care

Core Competence: Maintaining performance, learning and teaching

This area is about maintaining performance and effective CPD for oneself and others, self-directed adult learning, leading clinical care and service development, participating in commissioning, quality improvement and research activity.

This means that as a GP you should:

- Understand the evidence base for care of people with mental health problems: evidence gathered through randomised controlled trials may not capture the complexities of working with people with mental health problems in primary care
- Be aware of the content, but also the limitations, of the key national guidelines that influence the provision of mental health services

- Be aware of:
 - The Mental Health Act
 - The Mental Capacity Act (or equivalent legislation)
 - The General Medical Services contract and Quality and Outcomes Framework and the reductionist approach to care

Core Competence: Organisational management and leadership

This is about the understanding of organisations and systems, the appropriate use of administration systems, effective record keeping and utilisation of IT for the benefit of patient care. It also includes structured care planning, using new technologies to access and deliver care and developing relevant business and financial management skills.

This means that as a GP you should:

- Know how to use your practice registers for specific mental health conditions and record the required data as part of your General Medical Services contract
- Understand why some people find it difficult to access primary care and mental health services with their symptoms, and what you can do to increase equity of access to care
- Recognise how practice systems may reduce continuity of care, e.g. appointment systems that prioritise access may reduce patient continuity

Core Competence: Practising holistically and promoting health

This is about the physical, psychological, socioeconomic and cultural dimensions of health. It includes considering feelings as well as thoughts, encouraging health improvement, preventative medicine, self-management and care planning with patients and carers.

This means that as a GP you should:

- Understand that a model of mental illness that creates an artificial separation between mind and body is often unhelpful – particularly in understanding psychosomatic complaints, psychological consequences of physical illness and medically unexplained symptoms
- Be aware of the impact that social circumstances such as poverty, debt, inequalities and upbringing can have on mental illness, and that recovery is contingent on the effective management of those social circumstances
- Understand that mental illness is culturally determined and depends on assumptions that may not be universal, e.g. that a psychological intervention may not be acceptable to some people who have alternative explanations for, and understanding of, their symptoms
- Be aware of the need for you to be culturally sensitive in your approach to all patients
- Understand the well-being agenda and the importance of mental health promotion and psychosocial interventions in preventing mental ill-health

- Demonstrate an understanding of the evidence base for the positive relationship between work and mental health, and the association between unemployment and declining mental health

Core Competence: Community orientation

This is about involvement in the health of the local population. It includes understanding the need to build community engagement and resilience, family and community-based interventions, as well as the global and multi-cultural aspects of delivering evidence-based, sustainable healthcare.

This means that as a GP you should:

- Understand the stigma that can be associated with the label of a mental health problem
- Understand how mental health problems contribute to (and are caused by) social exclusion, health inequalities and unemployment, and be aware of the contribution that you as a GP can make to support a patient
- Be able to work in partnership with other agencies to offer appropriate social interventions for individuals
- Be able to work in partnership with other agencies to secure wider public health for your local population

Case discussion

Bushra is 51 years old and rarely consults the practice. She works as a teaching assistant. Her husband, Imran, is 56, has diabetes and has just been made redundant from his job in a national IT company. Bushra attends your surgery complaining that she can't settle, she feels 'uptight' and irritable, and finds it difficult to get to sleep. She is hot most nights and complains of palpitations. She stopped having periods about nine months ago. She is tearful in the consultation, but doesn't feel that her mood is low all the time. She says she is 'just about' coping with school, but feels she is getting frustrated with her pupils. She is worried about her husband, who has stopped going to family events and only goes out to the job centre when he needs to. She says he recently came to an appointment at the practice with a different doctor. Bushra tells you that she is worried because Imran's brother has a 'mental problem', which the family don't talk about, and he is on some very strong tablets. He was admitted to hospital once, when he was 19, and the family are very ashamed of that.

The couple have four children; the youngest daughter, Safa, is 15 and Bushra describes her as 'wayward'. She stays out late at night with friends from school, and Bushra thinks she might be smoking cannabis but hasn't told her husband as he already always seems to be shouting at Safa. She worries about her daughter and wonders if she should confront her about her behaviour.

You spend some time in the consultation exploring Bushra's concerns and think she is anxious. She scores 14 on the GAD-7 and you discuss with her the possibility that she has an 'anxiety problem' that might benefit from some treatment. You also suggest she has a blood test done to 'check her thyroid'. She agrees to have the blood test but says she doesn't want tablets – she thinks her husband might have been prescribed some, but she is not sure, and she feels that she should be able to sort things out for herself. She also feels that tablets are only for weak people.

You suggest that Bushra may wish to make contact with a South Asian women's group held at the local library. She is not too sure and asks if there is anything else. You give her details of the local self-help services and explain that she needs to make contact with them herself. You also give her some written material about anxiety and panic and ask her to read it, and come and see you in two weeks.

Imran comes to see you later in the week saying that another doctor in the practice had prescribed some tablets because he said he was depressed. Imran disagrees and hasn't taken the tablets. You explore how Imran is feeling and he starts to cry. He tells you that he feels worthless and feels that he has no function in the family. He admits that he does wish that he would not wake up, although he has not thought about harming himself. He denies any odd or unusual thoughts. You ask Imran what he thinks would help him and why he is reluctant to take the tablets. He describes his fear of becoming ill like his brother. You suggest that he might be depressed and perhaps discussing this would be helpful.

Reflective questions

To help you understand how the GP curriculum can be applied to this case, ask yourself the following questions:

Core Competence	Reflective Questions
<p>Fitness to practise This concerns the development of professional values, behaviours and personal resilience and preparation for career-long development and revalidation. It includes having insight into when your own performance, conduct or health might put patients at risk, as well as taking action to protect patients.</p>	<p>What are the boundaries of my involvement and responsibilities?</p> <p>How do I maintain my own health as a GP?</p> <p>What is meant by 'resilience'?</p>
<p>Maintaining an ethical approach This addresses the importance of practising ethically, with integrity and a respect for diversity.</p>	<p>How do I feel about patients consulting me with complex psychosocial and mental health problems?</p> <p>How do I deal with my feelings about working with patients who are distressed?</p> <p>What are the relevant sections from Good Medical Practice?</p>
<p>Communication and consultation This is about communication with patients, the use of recognised consultation techniques, establishing patient partnerships, managing challenging consultations, third-party consulting and the use of interpreters.</p>	<p>How might mental health problems affect communication between doctor and patient?</p> <p>How do I achieve empathy and understanding of mental health issues?</p> <p>How do my own feelings affect my interactions?</p>
<p>Data gathering and interpretation This is about interpreting the patient's narrative, clinical record and biographical data. It also concerns the use of investigations and examination findings, plus the adoption of a proficient approach to clinical examination and procedural skills.</p>	<p>What assessment tools are appropriate for use in Primary Care?</p> <p>What are the essential 'red flag' symptoms and signs?</p> <p>How do I assess alcohol and drug misuse?</p>
<p>Making decisions This is about having a conscious, structured approach to decision-making; within the consultation and in wider areas of practice.</p>	<p>How do I differentiate between organic and psychological symptoms?</p> <p>Am I familiar with variations and patterns of presentations of common mental health conditions?</p> <p>How might time and continuity influence my decisions?</p>
<p>Clinical management This concerns the recognition and management of common medical conditions encountered in generalist medical care. It includes safe prescribing and medicines management approaches.</p>	<p>What are the important evidence based guidelines for management of mental health issues in Primary Care?</p> <p>When and how should I refer to specialist services?</p> <p>How do I manage continuity of care, response to treatment, and regular monitoring?</p>
<p>Managing medical complexity This is about aspects of care beyond managing straightforward problems. It</p>	<p>How does pre-existing or comorbidity affect the presentation of mental health problems?</p>

<p>includes multi-professional management of co-morbidity and poly-pharmacy, as well as uncertainty and risk. It also covers appropriate referral, planning and organising complex care, promoting recovery and rehabilitation.</p>	<p>What conditions have most significant implications for medical management and drug treatment?</p> <p>What are the priorities for ensuring patient safety?</p>
<p>Working with colleagues and in teams This is about working effectively with other professionals to ensure good patient care. It includes sharing information with colleagues, effective service navigation, use of team skill mix, applying leadership, management and team-working skills in real-life practice, and demonstrating flexibility with regard to career development.</p>	<p>What alternative interventions and therapies are available in Primary Care?</p> <p>How do we create seamless multi-disciplinary services in this field?</p> <p>How do we define areas of responsibility and leadership in mental health services?</p>
<p>Maintaining performance, learning and teaching This is about maintaining performance and effective CPD for oneself and others. This includes self-directed adult learning, leading clinical care and service development, participating in commissioning*, quality improvement and research activity.</p>	<p>What are the best sources of updated information in Mental Health?</p> <p>What is the role of peer group support e.g. Balint groups?</p> <p>How can I audit the standard of care I provide?</p>
<p>Organisational management and leadership This is about the understanding of organisations and systems, the appropriate use of administration systems, effective record keeping and utilisation of IT for the benefit of patient care. It also includes structured care planning, using new technologies to access and deliver care and developing relevant business and financial management skills.</p>	<p>What additional risk factors should I screen for in patients with mental health problems?</p> <p>What systems do I need to be in place to ensure safe and consistent monitoring?</p> <p>How do we develop services to provide ready access to marginalised and stigmatised members of society?</p>
<p>Practising holistically and promoting health This is about the physical, psychological, socioeconomic and cultural dimensions of health. It includes considering feelings as well as thoughts, encouraging health improvement, preventative medicine, self-management and care planning with patients and carers.</p>	<p>What are the important determinants and influences on mental health?</p> <p>How does my role extend beyond the medical model?</p> <p>How well equipped am I to explore cultural and spiritual factors in patients' lives?</p>
<p>Community orientation This is about involvement in the health of the local population. It includes understanding the need to build community engagement and resilience, family and community-based interventions, as well as the global and multi-cultural aspects of delivering evidence-based, sustainable healthcare.</p>	<p>How can I ensure equity of access to mental health services?</p> <p>What community resources are available for my patients with mental health problems (including the third sector)?</p> <p>How do I ensure that I understand and recognise the cultural issues in my practice population?</p>

How to learn this area of practice

Work-based learning

In primary care

Primary care, both inside and outside the practice, is the ideal environment for you to learn about the care of people with mental health problems. As a GP specialty trainee you should become familiar with the assessment schedules you can use in consultations to aid diagnosis and guide your management of patients with mental health problems. GP trainees should learn from patients and carers by offering health reviews and participating in their training practices' mental health activities.

As a GP trainee you should take the opportunity to gain a better understanding of the role of the primary care mental health teams, specialist teams, referral criteria and care pathways. Attend any liaison meetings that are held in the practice with members of the specialist team. Attending clinic appointments with patients will help you better understand the patient's journey and the partnership across the primary/secondary interface. As a trainee you should also take the opportunity to learn how to adopt a shared-care approach to primary care mental health with the community mental health teams and intermediate care mental health teams.

Teamwork learning resource

There is a toolkit specifically designed for primary care teams to evaluate the extent to which they and their practices promote mental health. It is available from d.p.c.tomson@ncl.ac.uk or maryanne.freer@pcpartners.org, or from NIMHE.

In secondary care

Some GP training programmes contain placements of varying length in psychiatry units. These will give you exposure to patients with mental health problems but it is important that as a GP specialty trainee you gain a broader understanding of mental health than can be obtained in the psychiatry ward or clinics. Learn from community mental health teams about how referrals are assessed, which patients are cared for by both primary and specialist care, and understanding their physical health needs. There should also be opportunities to learn from graduate mental health workers/psychological practitioners (and other primary care mental health service providers, including the third sector) about which resources are available locally and how to create a local practice resource directory.

Self-directed learning

Many postgraduate deaneries and RCGP Faculties provide courses on mental health problems.

The RCGP offers e-learning courses on a number of mental health topics (such as older people's mental health; improving access to psychological therapies; substance misuse) as part of the e-GP programme (www.e-GP.org).

Learning with other healthcare professionals

Managing patients with mental health problems often requires teamwork across health and social care, and the third sector. Careful consideration and discussion of the roles of various individuals representing the many professional and non-professional groups should be fruitful. As a GP specialty

trainee it is essential that you understand the variety of services provided in primary care. Joint learning sessions with psychiatry trainees and mental health practitioners will help you gain a greater understanding of both the services provided locally and the need for cross-agency communication and partnership working.

Useful learning resources

Books and publications

- Age UK. *Promoting Mental Health and Well-being in Later Life, 2011*
- Ballatt J and Campling P. *Intelligent Kindness: reforming the culture of healthcare* London: RCPsych, 2011
- Beech R and Murray M. Social engagement and healthy ageing in disadvantaged communities *Quality in Ageing and Older Adults* 2013; 14(1): 12-24
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- House of Lords' Select Committee on Public Service and Demographic Change *First Report: Ready for Ageing?* March, 2013
www.publications.parliament.uk/pa/ld201213/ldselect/ldpublic/140/14002.htm
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- Taylor D, Paton C, Kapur S. *Maudsley Prescribing Guidelines (10th edn)* London: Informa Healthcare, 2009

Web resources

The Mental Capacity Act Code of Practice

Provides an explanation of the Act and the obligations of those, including health professionals, caring for people who lack capacity. www.gov.uk/government/publications/mental-capacity-act-code-of-practice

Mental Health Act

Provides an outline of the amendments to the Mental Health Act 1983. www.legislation.gov.uk/ukpga/2007/12/contents

NHS Wales NSF Mental Health

This website provides information and links to the National Service Framework for Adult Mental Health Services in Wales www.wales.nhs.uk/sites3/home.cfm?orgid=438

NIMHE National Early Intervention Programme

The Early Intervention in Psychosis IRIS Network supports the promotion of EI in psychosis. Their website includes links to resources. www.iris-initiative.org.uk

Northern Ireland Association for Mental Health

Niamh, (the Northern Ireland Association for Mental Health), is an independent charity focusing on mental health and wellbeing services in Northern Ireland. www.niamh.co.uk

Royal College of General Practitioners (RCGP)

There are a number of mental health courses on the online learning environment. www.elearning.rcgp.org.uk

The Primary Care Mental Health Forum (2009-12) developed a number of factsheets which are still available on the RCGP website. www.rcgp.org.uk/clinical-and-research/clinical-resources/mental-health.aspx

Royal College of Psychiatrists (RCPsych)

This website provides a number of useful resources including:

Improving physical and mental health

www.rcpsych.ac.uk/mentalhealthinfo/improvingphysicalandmh.aspx

The Lester UK Adaptation: Positive Cardiometabolic Health Resource: an intervention framework for patients with psychosis on antipsychotic medication.

www.rcpsych.ac.uk/quality/nationalclinicalaudits/schizophrenia/nationalschizophreniaaudit/nasresources.aspx