

## Mind Cymru

### 10 KEY POINTS ON MENTAL HEALTH FOR GPs AND SURGERY STAFF

1. Don't assume that any patient does or does not have mental health problems. Most of the time someone's mental health status will only emerge through talking to them, not by looking at them.
2. People with mental health problems have the same range of physical health needs, problems and concerns as anyone else, but these physical needs are all too often overlooked. Don't be tempted to think that reported physical problems are merely a manifestation of an established mental health problem. Also, if a patient is known to have mental health problems, don't assume that they have come to the surgery in relation to their mental health.
3. Remember that mental ill-health has no connection with intelligence, education or knowledge. Be careful not to talk down to someone because they present with mental health problems. Pay attention to them and what they are saying, and respond to them as an individual with due care and respect.
4. Provide a quiet waiting area/room in case a patient is distressed and unable to sit in the general waiting area.
5. Once it is established that a patient is experiencing mental distress, the GP should take as much time as possible with them and, as is already practice in many surgeries, book double-length appointments for follow up care.
6. If a patient with mental health problems is accompanied by a friend or carer, make sure you focus on talking to the patient not their companion.
7. Every effort should be made to discuss treatment options with the patient, and the patient should be in a position to make *informed choices* about medication or any other treatments.
8. Provide a range of leaflets and fact-sheets on mental health issues in the waiting room as well as in the GP's consulting room. These will be useful to people whether or not they define themselves as having a mental health problem. Such leaflets will also send out positive messages about your practice, and may facilitate somebody being able to disclose hidden mental distress and thereby access appropriate treatment.
9. Every effort should be made to offer the patient talking-treatments (psychotherapy etc), be that instead of or in addition to drug treatment.

10. If you need to discuss hospital admission with the patient, remember that this may be extremely distressing and/or shocking for them. Think how you would feel if it was you, and talk to the person with the care and consideration that you yourself would hope for.