Psychology Primary Care Liaison Project - Improving Access to Psychological Therapy

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DESCRIPTION
The Primary Care Liaison Project is a pilot project currently being undertaken within two GP practices in Dumfries and Galloway. The project deals with unmet need of patients who frequently visit GPs with mental health difficulties but don’t meet referral criteria for existing mental health services or have obstacles to engage. GPs feel they lack time or knowledge to advise, refer, or signpost these patients. By basing psychological practitioners in primary care settings they can guide patients to a variety of mental health enhancing activities or third-sector resources resulting in improved access to psychological care.

AIM
By working closely with GPs and third sector practitioners the project offers an integrated service approach aiming to improve access to services which are most appropriate for patient needs.

METHODS
It was proposed to trial a service adapted from the IAPT programme. Practitioners approached two GP practices with high referral rates to psychology which identified they could benefit from increased psychological input. Psychology practitioners are now offering referral and signposting advice to GPs as well as brief psychological intervention to patients where appropriate within these practices.

OUTCOMES
At the 6 month time point the service had had 41 accepted referrals. It is showing good outcomes on patients’ CORE 10 scores indicating improvement in overall mood and functioning. Group Identification Scale scores have increased suggesting improved social connections. The service has been able to advise on inappropriate referrals and signpost these to suitable services.

Furthermore those PCL patients with one or more previous referrals to psychology have a 71% discharge due to DNA rate from previous referrals to AMH or Self-help. The DNA rate for the PCL service is currently 6%. This is a drastic difference within this specific client group and again highlights that people who have previously found it difficult to engage or who have a history of cyclic referrals are more likely to attend and engage with the PCL service.

Referrals to Adult Mental Health from these practices have reduced. The rate of did not opt in’s to other psychological services has also decreased suggesting a clearer understanding of what psychological therapy involves in these practices and patients are more ready to engage. Additionally referrals to Self Help have not been impacted suggesting PCL is not being used as a default for GPs and those that are appropriate for Self Help are still able to access that service.

Patients Reported

“[liked] the fact that it was in [their] surgery”

“[The service spoke] to the GP and got me more help”

“Very knowledgeable and willing to think outside the box to help people overcome obstacles”

“[Can] refer patients who would previously have fallen between services”

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“Very worthwhile and would recommend to people that have similar problems to myself”

“Better understanding of psychology input”

“Fewer follow up consultations needed”

“Referred people for help who otherwise would have been recurrent attenders at the GP with little benefit, or who would have not engaged with full psychology”

GPs Reported

“Refered people for help who otherwise would have been recurrent attenders at the CP with little benefit, or who would not have engaged with full psychology”

“Very worthwhile and would recommend to people that have similar problems to myself”

“I was reassured that I was providing the correct support to a particular client”

“No one would think outside of the box to help people overcome obstacles”

“Fewer follow up consultations needed”

References