

Mental Health and Wellbeing Practitioner (MHWP) Psychological Professions Event



Emily Walter - MHWP, PPN MHWP CoP in East of England

- **BSc Psychology** - This allowed me to have a good psychological basis for the training and allowed me to expand on my knowledge. From studying and working for 3 years, when undergoing the training I was better equipped to manage my time efficiently.
- **Occupational Therapist Assistant**- this role gave me experience delivering 1:1 interventions and facilitating group therapy. It gave me experience as part of an MDT team and allowed me to understand collaborative working.
- **Trainee MHWP in Secondary Community Mental Health**- Edgehill university first cohort, CMHT's within West Essex working with severe mental health needs.
- **Qualified MHWP in Early Intervention in Psychosis (PATH)**- working with individuals experiencing their first episode of psychosis across Hertfordshire.
- **Qualified MHWP in PT-SMHP Step 4 SMI Service in Mid Essex**- individuals presenting within the primary and secondary care 'gap'.

Anna Papp - MHWP, PPN MHWP CoP in East of England

- **BSc Psychology** with a Year Abroad and **MSc in Abnormal and Clinical Psychology**.
- Prior to MHWP training worked on various inpatient wards (PICU, Eating Disorder, CAMHS).
- **Trainee/Qualified MHWP in Adult Community Mental Health Team:** Undertook assessments, delivered 1 to 1 interventions, co-facilitated therapeutic groups and care coordinated individuals struggling with severe and complex mental health difficulties. Partook in safeguarding investigations, Duty, carers assessments, etc.
- **Qualified MHWP in Enhanced Primary Care Mental Health Service (EPMHS):** Undertaking Dialog assessments, delivering 1 to 1 interventions and co-facilitating therapeutic groups to individuals struggling with moderate mental health difficulties.

Ashley Davies - MHWP, PPN MHWP CoP in East of England

- **Psychology degree and Master in Clinical Psychology** this enabled my successful application for the trainee MHWP position whilst training was under Adult Community Secondary Care Services in Chelmsford (Essex) EPUT Trust and Edgehill University within the first cohort 2022-23.
- **Qualified MHWP in Secondary Care** service this role gave me experience delivering 1:1 interventions in the community and facilitating group therapy. It gave me experience as part of an MDT team and continued to develop my hands on learning experience with additional colleague support, guidance and collaboration.
- **Qualified MWHP currently working in PT-SMHP Step 4 SMI Psychological Therapies Service.** HPFT Trust but based in Mid Essex. I mainly undertake Step 4 assessments and deliver psychological interventions for people with severe mental health needs BPD/EUPD diagnosis and co facilitation STEPPS EI group.

What is an MHWP?

- MHWPs have **2 main purposes**:

1.) To support individuals with severe mental health difficulties, their families, and carers with **collaborative care planning**.

2.) To provide individuals with severe mental health difficulties with **wellbeing focused psychological interventions** based on the best available evidence.

- They coordinate care for a caseload of people with severe mental health difficulties.
- Working under supervision, they deliver psychological interventions that are aligned to cognitive-behavioural principles.
- Currently, MHWPs are being based in a variety of services. E.g: Step 4 SMI services, Secondary Community Mental Health services, Early Intervention in Psychosis, Perinatal services, Enhanced Primary Mental health Service, etc.

What does the role look like day to day?

This will vary depending on the service however here are some things it could include:

- Performing **Initial Assessments**
- **Delivering 1:1 psychological interventions** (Graded Exposure, Teaching Problem-Solving Skills, Improving Sleep, Recognising and Managing Emotions, Guided Self-help for Bulimia and Binge-eating , Building Confidence, Behavioural activation and Medication support).
- **Delivering group psychological interventions**
- Using **Routine Outcome Measures**
- **Weekly supervision**
- **Care planning** and coordination
- **Clinical skills** supervision with trainees facilitated by us qualified MHWPs
- **Improving access** to psychological therapies and signposting to additional services
- Working to incorporate **family and carers.**

Claire Cockerill – Senior Lecturer and Programme Lead to MHWP Course at Edgehill University

**Alison Brabban - National Clinical Advisor to AMH Programme and
Clinical Lead for Community Transformation.**

The MHWP Role & its role in Transforming Community Services

Dr Alison Brabban
National Clinical Advisor,
NHS England



Key Principles of the Community Framework

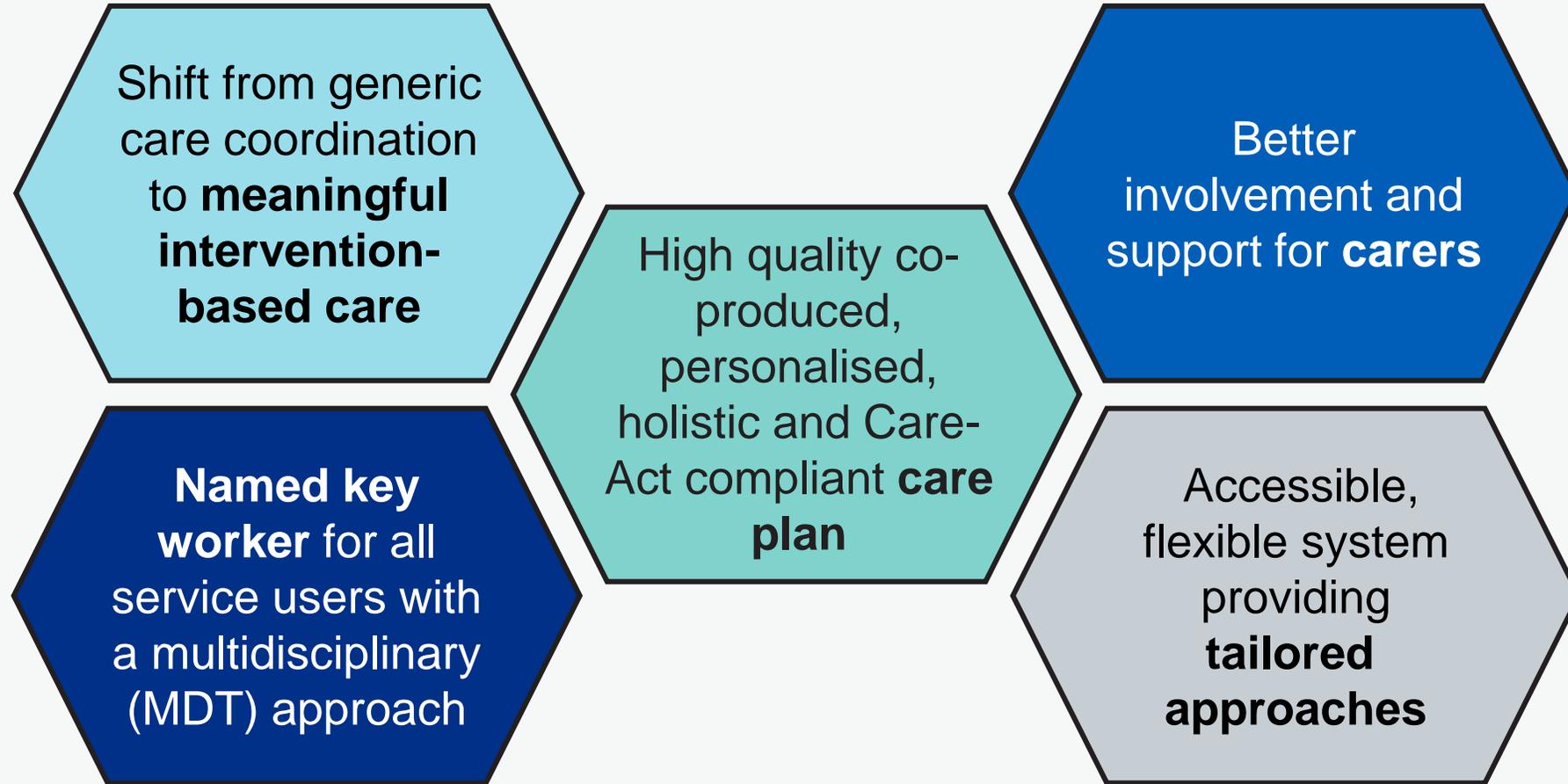
- A personalised, recovery orientated and trauma informed approach that addresses **needs** and helps someone to live as healthy and fulfilling a life as possible
- Recognises the wide range of community assets (including families & carers) and dedicated services that may be involved in meeting needs.
- Integration & partnerships with other services (primary care; social care; VCSO; housing; community based services; education etc).
- Single, coherent, integrated & seamless model
- Interoperability across systems
- No wrong door: Removal of arbitrary exclusion criteria; proactive and inclusive care including for co-existing needs.



Key Principles of the Community Framework

- Enhanced, integrated support within primary care to help manage fluctuating needs with flexible ‘stepping up’ / ‘stepping down’ of care based on intensity of input required (moving away from concept of “discharge”.)
- Shorter waiting times – new waiting time standard
- Equalities: Ensuring the needs of marginalised groups and those who are often invisible to services are met.
- **Access to high quality evidence-based interventions including psychological therapies.**
- A competent & confident workforce to meet the needs of the population it serves:
 - Should incorporate paid roles for people with lived experience, including peer support workers and lived experience practitioners.
- Services measuring outcomes that are meaningful to service users to find out if we are making a difference.

There are 5 key principles underpinning the move away from CPA



Requirements for a new national role

Meets a
workforce need

Has synergy
with, but distinct
from established
roles

Competence
framework

National
curriculum

Good
governance

Does not disrupt
existing roles
required by
policy

Good return on
investment



The Mental Health and Wellbeing Practitioner

1. A new psychological profession
 2. A parallel role to PWP, CWP and EMHP for **Adult Community Mental Health Services with a focus on severe mental health problem**
 3. **What is their role?**
 - MHWPs will be coordinating care (Key Worker role)
 - Recovery and Trauma Informed Role
 - Assessment and Psychological Formulation
 - Provide specific wellbeing-focused, psychologically informed interventions supported by best available evidence:
 - Behavioural Activation and Graded Exposure using the “GOALS” programme
 - Teaching problem-solving skills
 - Improving sleep
 - Recognising and managing emotions
 - Guided self-help for bulimia and binge-eating
 - Building confidence
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Recruitment & Training



Recruiting from a new pool of potential staff



Training is funded by NHS England



Salary is funded whilst training (Band 4 for 1 year)



Commitment required to employ at a Band 5 once qualified.



MHWP Professional Registration is imminent

How this role helps with community workforce challenge



Delivering care coordination and risk management

- Helps with current team pressures
- Embeds collaborative, psychologically-informed care coordination



Delivering wellbeing-focused psychologically-informed interventions and building relationships with services users and their families/carers

- Additional support to improve people's wellbeing
- Help prepare individuals to better engage with therapy



Changes Culture: More “intervention” focused.



Supply pool for future therapists



Delivery Requirements

- Working with people with severe mental health problems in community mental health settings, including drug and alcohol services.
- MHWPs will be based in services that provide seamless access for service users on the MHWP caseload to be seen, if necessary, by a practitioner psychologist or psychological therapist (seamless means there is no need for additional assessment to access this).
- Require at least 1 hour a fortnight of clinical supervision
- Require at least 1 hour a week of caseload supervision

What we like about the role:

- Delivering psychological interventions and the variation of these.
- Working with complex client presentations allows the role to feel varied and everyday is different.
- Flexibility of the role.
- Being part of a transformation plan and increasing access to psychological therapies.
- Its potential to encourage psychological mindedness within multidisciplinary teams and a more holistic approach to patient care.
- Its efficacy to engage those more difficult to reach clients by being more flexible in the way psychological interventions are delivered (e.g.: sessions at client's home).

Potential challenges of the role and ways to overcome these:

- Main challenges are the variation in the role across different services and the impact of this on trainees.
- Lack of understanding of the role within services can lead to MHWPs being asked to work outside of their competence.
- The role can be demanding so being able to manage caseload effectively is essential and so is self-care.
- Spreading awareness of the role and how it is to be incorporated across services. E.g.: meetings, discussions with colleagues, articles (CBT today), publishing research.

Patrick Larsson, Clinical Lead PT-SMHP SMI Service

To view the video of Patrick Larsson discussing the role of MHWPs in his service, please watch the recording of the MHWP event posted on the national PPN website at www.ppn.nhs.uk

Fiona Roberts- Clinical Director of Psychological Services, Chief Psychological Professions Office

Service user feedback

“I have tried many different types of therapy, and this has been the best thing I have done. I have learnt how to care for myself, communicate better with my partner and coping skills for when I feel overwhelmed and distressed”

“The managing emotions sessions have allowed me to understand my emotions better, identify my triggers and learn ways of dealing with how I am feeling. I have never known what a healthy relationship looks like but now I do and have learnt how to communicate with others in a healthier way. Other people have seen the difference in how I handle situations and my mood. These sessions have changed my life and I am so grateful”

“These sessions have allowed me to get outside my comfort zone and challenge my anxiety. I am now able to do things that I haven't done in so long and get outside of my house. I feel like I am getting the old me back”

“Through being able to talk and understand how I am feeling, I feel in a better place to cope with life difficulties. It's been so helpful to talk things through and get techniques to help with how I handle my emotions and to have more compassion and understanding for myself. These sessions have been life changing”

“It's so nice to think in a new positive way, I feel like a completely different person”
“I have really learnt a lot, so thank you so much it has really helped and even my mum can see it, she says how much better I am now at managing things, and I feel really confident now so thank you for all your help”

Progression

- BPS accreditation- Currently being reviewed on a course-by-course basis, still ongoing.
- MHWP Registration
- Senior MHWP roles, Team leaders, Senior Clinicians..
- KSA route, CBT Therapist roles.
- MHWP specific CPD

Thanks for listening 😊

Q&As