

## Liverpool John Moores University

Title: EVIDENCE BASED LOW INTENSITY TREATMENTS FOR COMMON MENTAL HEALTH DISORDERS  
Status: Definitive  
Code: **6201PQHEAL** (124124)  
Version Start Date: 01-08-2021  
Owning School/Faculty: Psychology  
Teaching School/Faculty: Psychology

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**Academic Level:** FHEQ6      **Credit Value:** 20      **Total Delivered Hours:** 90  
**Total Learning Hours:** 200      **Private Study:** 110

### Delivery Options

Course typically offered: S1 & S2 & Summer

Component	Contact Hours
Lecture	30
Practical	60

**Grading Basis:** 40 %

### Assessment Details

Category	Short Description	Description	Weighting (%)	Exam Duration
Essay	AS3	2500 word Written analytical case report. This component must be passed	100	

<b>Competency</b>	Practice
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### Aims

*Psychological Well being Practitioners (PWPs) aid clinical improvement through the provision of information and support for evidence-based low-intensity psychological*

*treatments and regularly used pharmacological treatments of common mental health problems. Low-intensity psychological treatments place a greater emphasis on patient self-management and are designed to be less burdensome to people undertaking them than traditional psychological treatments. The overall delivery of these interventions is informed by behaviour change models and strategies. Develop general and disorder defined knowledge and competence for the safe management and delivery of evidence based low intensity psychological and pharmacological interventions for common mental health problems*

*Demonstrate knowledge of self management recovery options and competence in deliver low-intensity interventions using a range of methods. This module will, therefore, equip PWP's with a good understanding of the process of therapeutic support and the management of individuals and groups of patients including families, friends and carers. Skills teaching will develop PWP's general and disorder-defined 'specific factor' competencies in the delivery of low intensity treatments informed by cognitive-behavioural principles and in the support of medication concordance including face-to-face, telephone and electronic communication.*

*Demonstrate an understanding of the process of therapeutic support through case management, including change to risk status*

## **Learning Outcomes**

After completing the module the student should be able to:

- 1 Critically evaluate a range of evidence-based interventions and strategies to assist patients manage their emotional distress and disturbance.
- 2 Demonstrate knowledge of, and competence in developing and maintaining a therapeutic alliance with patients during their treatment programme, including dealing with issues and events that threaten the alliance
- 3 Demonstrate competence in planning a collaborative low-intensity psychological or pharmacological treatment programme for common mental health problems, including managing the ending of contact
- 4 Demonstrate in-depth understanding of, and competence in the use of, a range of low-intensity, evidence-based psychological interventions for common mental health problems.
- 5 Demonstrate knowledge and understanding of, and competence in using behaviour change models and strategies in the delivery of low-intensity interventions.
- 6 Critically evaluate the role of case management and stepped care approaches to managing common mental health problems in primary care including ongoing risk management appropriate to service protocols.
- 7 Demonstrate knowledge of, and competence in supporting people with medication for common mental disorders to help them optimise their use of pharmacological treatment and minimise any adverse effects.
- 8 Demonstrate competency in delivering low-intensity interventions using a range of methods including face-to-face, telephone and electronic communication.

## **Learning Outcomes of Assessments**

The assessment item list is assessed via the learning outcomes listed:

Essay	1	2	3	4	5	6	7	8
Practice	1	2	3	4	5	6	7	8

## Outline Syllabus

*Evidence based low Intensity interventions for depression and anxiety. Examples of interventions include providing support for a range of low-intensity self-help interventions (often with the use of written self-help materials) informed by cognitive-behavioural principles, such as behavioural activation, exposure, cognitive restructuring, panic management, problem solving, CBT-informed sleep management, and computerised cognitive behavioural therapy (cCBT) packages as well as supporting physical exercise and medication adherence Methods of delivery which includes: support specifically designed to enable people to optimise their use of self-management recovery information and pharmacological treatments and which may be delivered individually or to groups of patients (psychoeducational groups) and through face-to-face, telephone, email or other contact methods. PWP's must also be able to manage any change in risk status. . Session planning and subsequent sessions. Maintaining therapeutic alliances. Decision making. Case Management. Stepped Care. Managing the ending of contact.*

## Learning Activities

A range of learning activities will be used for module delivery including lectures, case discussion groups, experiential learning, video role-play, reflective practice and formative skills assessments, practice based learning, guided reading and independent study.

## Notes

All assessments must be passed independently to achieve the credits for the module. Learning outcomes are assessed in both theory and practice. Academic skills are assessed via the essay. Competency in practices is assessed via the portfolio. Practice skills are assessed by the skills assessment.

Module assessment strategy

Skills assessment - standardised role-play scenario(s) where trainees are required to demonstrate skills in undertaking both triage within an IAPT service and problem focused assessments. This may be a single scenario, combining both triage within an IAPT service and problem focused assessments, or two shorter assessment scenarios. This (these) will be video-recorded and assessed by teaching staff using standardised assessment measures. Marked as Pass/Fail (with 50% pass threshold)

Academic assignment: trainees should also provide a reflective critical analytical essay on their performance on the skills assessment. Graded (pass mark of 40%)

Successful completion of the following practice aspect of the learning outcomes, to be formatively assessed by means of a practice outcomes portfolio (Practice Skills Assessment Document). Marked as Pass/Fail (with 50% pass threshold)

Students must:

Demonstrate experience and competence in the selection and delivery of treatment of a range of presenting problems using evidence based low intensity interventions across a range of problem descriptor including depression and two or more anxiety disorders

Demonstrates the ability to use common factor competencies to manage emotional distress and maintain therapeutic alliances to support patients using low-intensity interventions

Demonstrates high quality case recording and systematic evaluation of the process and outcomes of mental health interventions, adapting care on the basis of these evaluations

The training programme requires trainees to learn from observation and skills practice under supervision while working in fully functioning IAPT services, as well as through the theoretical teaching, skills practice and practice-based learning directed by the Higher Education Institute. Trainees should complete a minimum of 80 clinical contact hours with patients (face-to-face or on the telephone) within an IAPT service as a requirement of their training and should undertake a minimum of 40 hours of supervision of which at least 20 hours should be case management supervision and at least 20 hours should be clinical skills supervision. These 80 clinical contact hours and 40 supervision hours are in addition to the 15-20 practice-based learning days directed by education providers.

These requirements will be identified in the Practice Placement Skills document (PSAD).

This module runs as part of the undergraduate CPD: Improving Access to Psychological Therapies

The module learning outcomes align with the QAA framework for higher education qualifications in England, Wales and Northern Ireland. The module is aligned to Level 6 descriptors.

The module involves classroom attendance, which is further supported by a range of learning support opportunities and practice based learning. This is full time and lasts for 52 weeks.

The criteria for admission to the module require that candidates must have 120 credits at level 4 or 5 or demonstrate equivalent portfolio evidence.

The students have access to Canvas LJMU's virtual Learning tool and the University's other range of electronic support such as access to the electronic library facilities.

The programme is assessed and run in line with the Academic Framework <https://www.ljmu.ac.uk/about-us/public-information/academic-quality-and-regulations/academic-framework>

Attendance is required throughout the module; although some learning material will be available through the Blackboard site.

Validated 2015/16

The methods for improving the quality and standards of learning are as follows:

Annual monitoring Review

- Liaison and feedback from the students
- Reports from External Examiner
- Programme team ensuring the module reflects the values of the current teaching and learning strategy
- Module leader updating knowledge and skills to ensure these remain current and relevant
- . A specific external examiner is identified for the module
- . The approved intake month is flexible.
- . The programme codes for this programme are 36903 and 36901.