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AIM

The aim was to pilot a series of adapted versions of the established NES training course “**An introduction to CBT for Anxiety.**” This was to meet the specific needs of staff working in three specialist areas (Older Peoples, Forensic and Substance Misuse Services) and to assess the acceptability of the new training.

INTRODUCTION

The training course “An Introduction to CBT for Anxiety” was developed to meet the training needs of multidisciplinary adult mental health staff in relation to the provision of low intensity psychological interventions in Scotland in line with Scottish Government access targets also the Psychological Therapies Matrix (2015). The course was developed in 2011 to address a training need in adult mental health staff and involved an e-learning module before attending two days of face to face interactive training.

The course content was structured with the following sections:

- Cognitive Behavioural Assessment
- Collaborative Goal Setting
- Working with Changes in the Body
- Working with Thoughts
- Working with Behaviours

The interactive training focused upon developing skills around use of worksheets with patients which addressed particular aspects of CBT.

Over the course of five years of delivering this training it became apparent that the content of the training suited staff in adult mental health services, but less so for those in Older People’s, Substance Misuse or Forensic services who also needed training in this area.

A trio of specialist training courses were developed, in collaboration with clinical psychologists with substantial experience in Older People’s, Substance Misuse and Forensic services, to meet the needs of staff requiring training in these areas. These courses were piloted between 2017 and 2019.

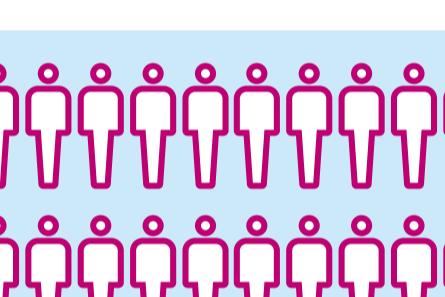
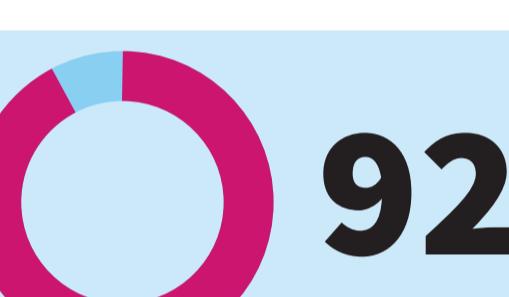
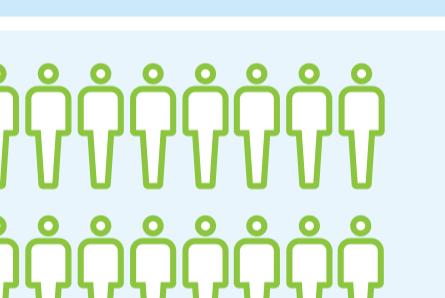
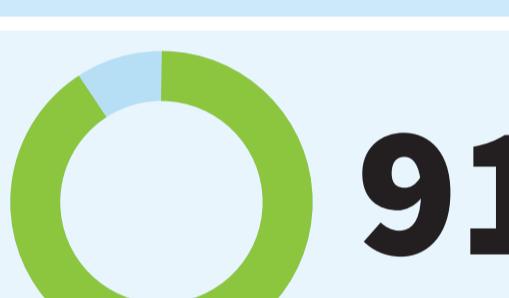
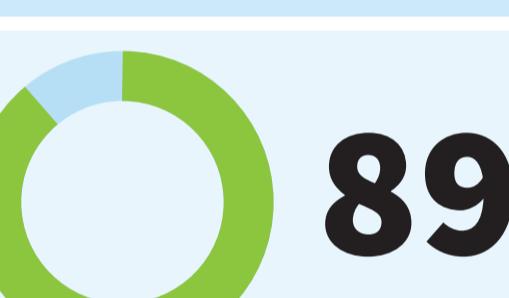
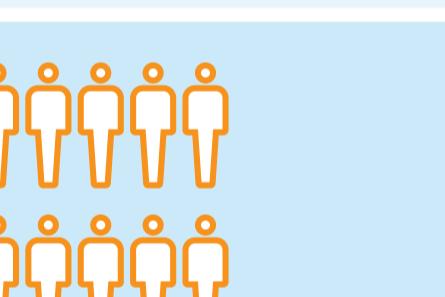
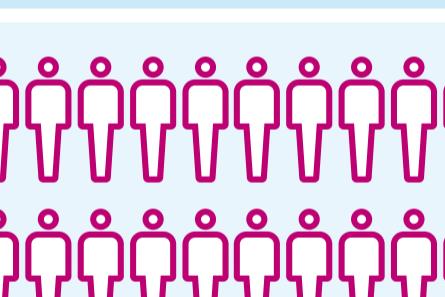
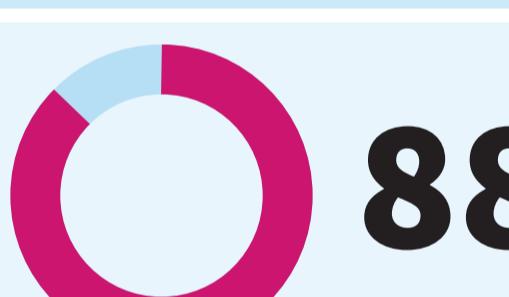
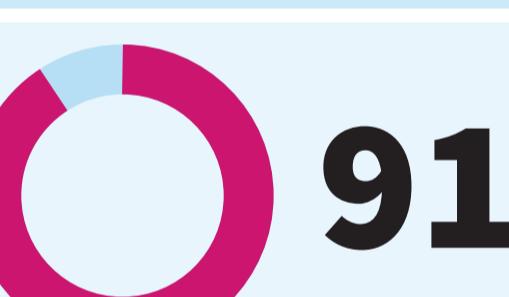
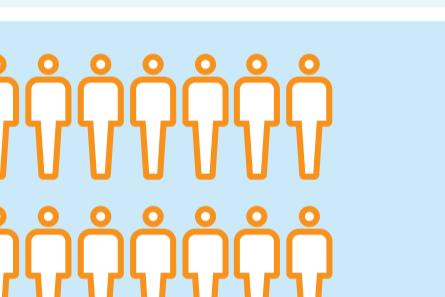
METHODS

The process involved a review of the educational content of the existing face to face training programme by the main author, along with clinical psychologists from each of the fields of Older People’s, Substance Misuse and Forensic Services. New educational content was developed to meet the needs of staff in these three areas. This included providing “top and tail” context for each of section of the course (see above), and a number of appropriate case studies on which to “hook” the specific cognitive behavioural content to make it more relevant for staff from these services. At the end of the workshops, the participants were given the Training Acceptability Rating Scale (TARS, Davis et al, 1989) to evaluate the content and process of the adapted training. Participants were also given the opportunity to give qualitative feedback.

RESULTS

The results are shown below. The results indicated that all the adapted versions of the training achieved 88% and over acceptability in terms of content and 89% and over in terms of how it was delivered (the process).

ACCEPTABILITY OF THE ADAPTED VERSIONS OF THE INTRODUCTION TO CBT FOR ANXIETY TRAINING

SPECIALITY	DATE	PARTICIPANTS	TARS CONTENT	TARS PROCESS
Substance Misuse	October 2017	 20	 93%	 92%
Forensic	November 2017	 16	 91%	 89%
Older People	February 2018	 10	 96%	 94%
Substance Misuse	October 2018	 22	 88%	 91%
Older People	February 2019	 14	 91%	 95%

Participants generally gave very positive qualitative feedback:

“using real life examples and relevant case studies helped with my understanding”

“very well presented, effective and extremely relevant knowledge to further develop my own practice within my current caseload”

“teachers were knowledgeable and it was relevant to our workplace”

CONCLUSION

Five specialist courses have been run. Two for substance misuse staff (total n = 42), one for forensic staff (n = 16) and two for staff working with older people (total n = 24). The acceptability of the training was high for both the content of the training and how it was delivered, as measured by the TARS (>88%). More specific feedback was highly encouraging particularly in relation to certain service specific content that was developed through the review process.

In conclusion, the new specialist training courses were highly acceptable to specialist staff in terms of meeting their training needs to deliver a low intensity cognitive behavioural intervention in their services.

REFERENCES

The Matrix (2015) A Guide to Delivering Evidence Based Psychological Therapies in Scotland.
Davis et al (1989). Acceptability of behavioural staff management techniques. *Behavioral Residential Treatment*, 4, 23-44.

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