

# Primary Care Mental Health Team

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With **all of us** in mind.

- Initially set up in November 2021
- Previous Primary Care Team prior to SWYT transformation linked within Talking Therapies
- Primary care clients absorbed into CORE – increased waiting times, pressures on staff
- Data suggested 29% of those referrals could be seen within Primary Care
- Advantage of reintroducing the team – reduced waiting times, reduced referrals into core, quicker turnaround

Referrals are received from assessment services – SPA, MHLT and Talking Therapies

All GP referrals sent through to Single Point of Access. Referrals screened and either kept for assessment if complex, has history, medication or sent for Primary Care Triage.

Data project in 2024 showed a 52% DNA rate – either did not respond to the initial contact or did not attend first session.

Following this – switched to opt in service. Opt in letter sent with service delivery information leaflet and client is required to contact us.

June 2025 – this had reduced to 38%.

Interventions include -

- Solution focused interventions
- Anxiety/Depression Management
- Challenging avoidant behaviours
- Engaging clients with 3rd sector agencies post intervention e.g. My Best Life, MIND, Age UK
- Linking with accommodation, employment workers, and Recovery College as part of recovery process
- Family Interventions
- Establishing coping mechanisms and relapse prevention plans including WRAP plans to minimise revolving door clients
- Clients are offered up to 10 sessions with appointments usually scheduled fortnightly with an average waiting time of 4-6 weeks for an initial appointment.

With **all of us** in mind.

The team is not linked to a medic therefore all medication queries/requests are managed via the GP.

Specialist medication advice is sought via SPA

Long term vision to introduce prescribing mirroring neighbouring trusts  
Scope for providing this – more funding to provide nurse prescribing training, supervision

Sessions are clinic based with rooms available across the patch. We would always welcome more space!

## **Current staffing set up**

1 X 1.0 Team Manager  
5 X 1.0 Band 6 Mental Health Practitioner  
1 X 0.6 Band 6 Mental Health Practitioner  
1 X 0.8 Band 6 Mental Health Practitioner  
1 X 1.0 Band 3 Team administrator

**Partnership working with Community Peer Support Workers at Recovery College.  
Primary Care staff provide clinical supervision for PSW's and work closely to manage caseloads.**

**Direct link with Recovery College gym**

**Referrals received into PCMHT in 2025 – 1668**

**Referrals received into Community Peer Support workers - 123**

**With all of us in mind.**

## Case study

Client referred due to debilitating symptoms of anxiety – Overthinking, physical symptoms (feeling sick). Due to this, isolating at home, only leaving to attend appointments.

Intervention with nursing staff working through both DBT and CBT skills looking at ways to manage anxiety.

Following this, passed onto peer support who completed graded exposure work and practical skills re bills and organisation.

Client now attends Recovery College and is hoping to become a volunteer

With **all of us** in mind.

## Compliments and complaints

*The support was excellent - also communication was on an equivalent level meaning I was spoken to as a human being, an equal. Thank-you.*

*All was fine, I recommend it all.*

*The support I've received has been excellent, exactly what I needed at the time. Helped me to pin point exactly what the ongoing issue was. Thank you so much.*

*I could talk to someone without judgement and get the support I needed. I was given paper work I could work through myself. Also I could see someone regularly face to face. There is nothing you could do better. Good service.*

With **all of us** in mind.