

## Talking Therapies - Referral Criteria

NHS Talking Therapies services provide treatment for adults with depression and anxiety disorders that can be managed effectively in a uni-professional context. NICE-recommended therapies are delivered by a single competent clinician, with or without concurrent pharmacological treatment. NHS Talking Therapies services also provide treatment for people who have long-term conditions or other persistent physical symptoms in the context of depression and anxiety disorders.

### Suitable for Talking Therapies

NHS Talking Therapies are a primary care, brief therapy service, designed to increase access to therapies for those at Step 2 and Step 3 of the stepped care pathway (see below).

Suitable clients should present with features of a common mental health problem (diagnosis not required) and be suitable and willing to engage in a brief therapeutic format. To include:

- Depression or low mood
- Worry and Anxiety
- Anxiety disorders
  - Panic Disorder (and/or agoraphobia)
  - Generalised Anxiety Disorder
  - Post Traumatic Stress Disorder
  - Health Anxiety
  - Obsessive Compulsive Disorder (includes Body Dysmorphia)
  - Social Anxiety
  - Specific Phobias
  - Body Dysmorphia
- Sleep issues
- Stress
- Complex or Traumatic Grief
- Chronic pain and Long-Term Conditions – where mood is impacted by, or impacting on physical health

### Readiness for clinical work:

All of the NHS Talking Therapies work requires clients to be at a point where they are ready to engage in the challenge work involved. Therapy involves personal exploration, growth and change and therefore clients need to be aware of and ready to engage on this level. Often basic needs may need addressing in the first instance, such as housing, employment, substance use, finances and acute physical health need.

### Not Exclusion Criteria

The below does not exclude clients from talking therapies however close assessment and detailed discussion in case management would define suitability and optimal timing for treatment.

- Mild learning disabilities and difficulties
- Neurodiversity
- Mild cognitive impairment
- Non- verbal/English speaking
- Mobility issues
- Suicidal thoughts (with no plans or intent)
- Mild, controllable drug or alcohol use (refer to positive practice guide)
- Multiple or childhood trauma
- Self harm

### Exclusion Criteria

We do not see people whose needs will be better met elsewhere by a specialist service and/or their other difficulties would be an obstacle to effective treatment in our service, e.g.

- Under the age of 16
- Registered with a GP outside of Wakefield District
- High levels of risk (to self or others)
- Chaotic and unstable factors
- Severe impact on functioning (including inability to leave the house, not looking after basic care needs, neglect)
- Support for Long standing, severe and enduring mental health difficulties (Axis II/Cluster 5+ disorders) - psychosis, personality disorders, bipolar disorder, Eating Disorders
- Currently undergoing treatment within secondary care (unless medication outpatient review only) or engaging in any therapeutic intervention with another service
- Perinatal female demonstrating risk factors requiring specialist perinatal mental health care pathway within secondary care.
- Complex PTSD requiring Enhanced Team or long-term talking therapy approach (see PTSD guidance)
- Hoarding
- Requires specialist, long term input, for example for attachment issues, requiring significant number of sessions to overcome therapy barriers and increase engagement, schema work etc

- Dementia or memory/cognitive impairment
- Psychosexual issues
- Organic brain disorders
- Moderate to severe learning disabilities
- Referrals for issues related to behavioural problems (i.e. treatment of ADHD or anger related to behavioural/developmental issues)
- Relationship counselling (no presence of a common mental health problem in either party, couple seeking helping with relationship issues)
- Primary problem substance or alcohol use
- Gambling or other addictions
- Unsuitable for short term psychological therapies – or the therapies offered in service (i.e. emotional regulation requiring DBT)