



Chartered Physiotherapists in Mental Healthcare

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## **An Audit of Mental Health in the Undergraduate Physiotherapy Degree in The United Kingdom**

### **Introduction**

The Chartered Physiotherapists in Mental Healthcare (CPMH) planned to publish a statement on the training needs of physiotherapists who work outside the speciality of mental health. The aim of this work is to gather information about the current level of training, to analyse any possible gaps and to offer education opportunities in these areas. The fundamental objective is to improve the quality of care of individuals with mental health problems when they receive care outside mental health services. The standard is that undergraduate physiotherapy students receive opportunities to develop physiotherapy skills and competencies for working with people with mental health difficulties.

### **Methods**

There are 33 universities that offer an undergraduate qualification in physiotherapy (UCAS 2010) and each university was contacted to enquire about whether their curriculum comprised mental health education. The original contact was by email and this was followed up with a telephone call if not responded to. A second telephone call was made if the first one was not responded to. The initial contacts were obtained from the CSP site. The universities were asked the following questions:

- 1) Is there mental health training in the curriculum?
- 2) Is this compulsory?
- 3) Approximately how many hours teaching does mental health comprise?
- 4) What are the topics covered?
- 5) Do you offer a mental health clinical placement?
- 6) Other comments

It was agreed that the name of the university would not be published in the audit.



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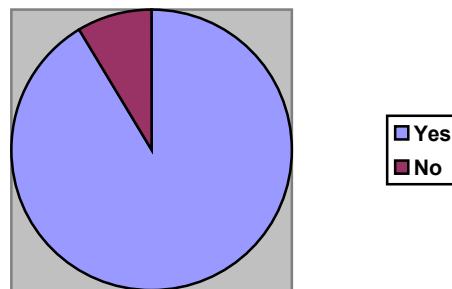
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### Results

#### Response Rate

24 out of 33 universities responded to the audit. One was discounted because the educator was discussing learning disabilities and when prompted about depression etc. responded that they thought this would be covered in a learning disability placement. With this discounted response, there were 23 responses, which is a 70% response rate.

#### Question One: Is there mental health training in the curriculum?



21 out of 23 responding universities had mental health included in their physiotherapy curriculum. 2 universities did not.



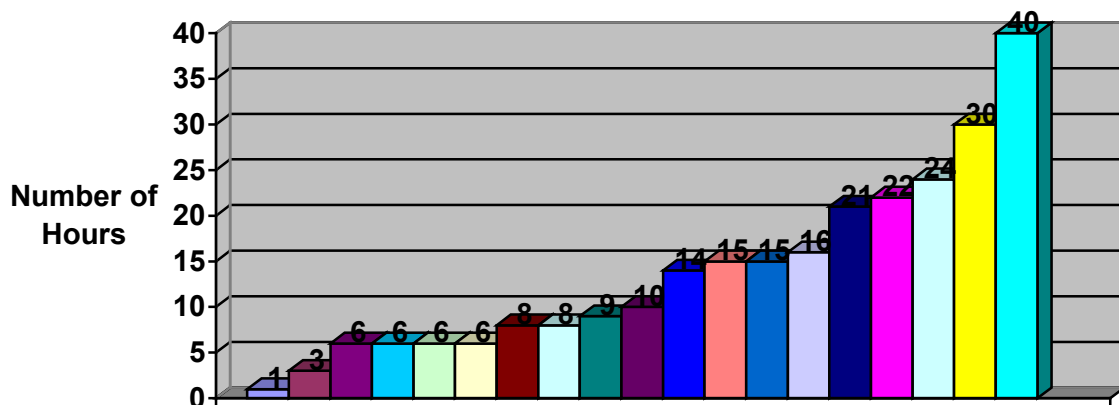
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### Question Two: is this compulsory?

20 out of 21 of the universities who had mental health on their curriculum reported that this was compulsory. In the “additional comments” section, two universities reported they also offered an option module in mental health, in addition to the compulsory training.

### Question Three: Approximately how many hours teaching does mental health comprise?



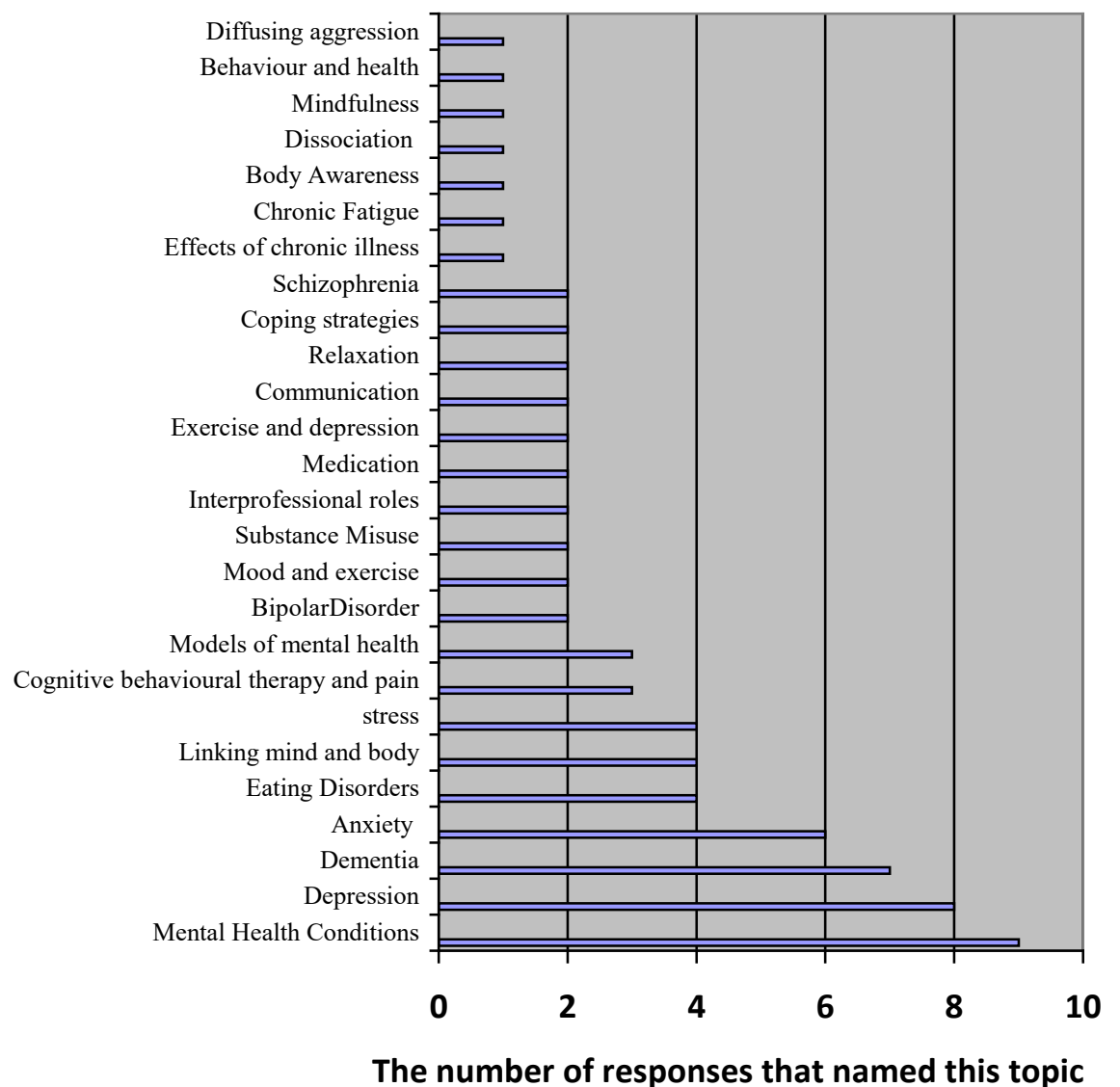
Only 19 responses are included in the table above since once response did not contain the number of hours and another was unable to quantify since the mental health was “integrated”. The values range from 1hour to 40hours with an average of 13.6hours. In the “additional comments” section four of the universities noted that, in addition to their compulsory number of hours, there were mental health issues embedded into other modules so the exact number of hours was difficult to define.



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### Question Four: What are the topics covered?



There was a variety in the detail of the responses received. This varied from “mental health conditions” to those who detailed every condition covered. The topics included are in the

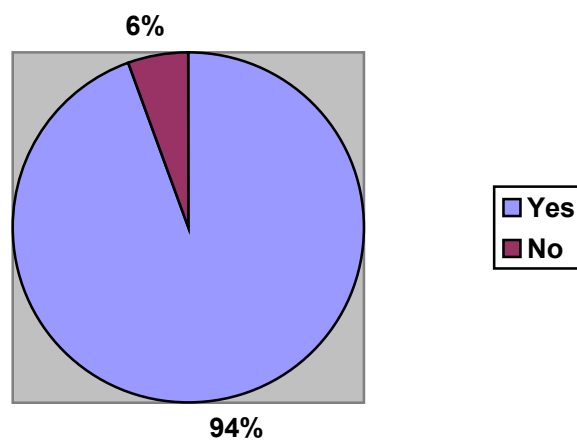


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chart above and if the topic was identified more than once, the number of times is noted on the y axis.

### Question Five: Is a mental health placement offered?



22 out of 23 responding universities reported they had access to a mental health placement and one reported that they did not due to the lack of availability in their area.

### Discussion

The absent responses may be due to the methodology comprising only two phone calls and an email. If the online contact details were not up to date then the program lead may not have received the audit request. Messages were left if no one answered the attempted telephone calls. Five lecturers agreed to complete an audit by email, but chose not to respond to this when sent.

The results show a large discrepancy in the amount of mental health training included on the physiotherapy curriculum, ranging from no mental health to forty hours compulsory mental health. The names of the universities are not included in the audit but the auditor notes there was not geographical pattern to the data.



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Question four was ineffective since it did not produce a consistent amount of data in each response, this should be redesigned if repeated. Two universities noted that their curriculum was under review and that they planned to increase the amount of mental health content.

Question five indicates that 17 out of 18 universities had access to a mental health placement. Comments were made that the spaces were limited due to there being low numbers of clinical educators who work in mental health settings.

### Conclusions

- ⇒ Not all universities offer mental health on their BSc Physiotherapy curriculum
- ⇒ The mental health training that is offered is variable in the number of hours and topics covered. There is no clear pattern to this variation.
- ⇒ Potential challenges include a busy curriculum

### Proposed Topics for Including on BSc Physiotherapy Courses

#### Method one:

The audit outcomes were discussed with the CPMH committee and responses were collated to produce a statement.

#### Method Two:

An advert was placed on the ICSP website as follows:

“Call for Physiotherapists to identify mental health training needs! The Chartered Physiotherapists in Mental Healthcare (CPMH) are reviewing the training opportunities they offer. We want to hear from physiotherapists who do not work full time in a mental setting but who sometimes treat people with mental health problem. Tell us if you feel you have any training needs in mental health that would improve your practice? Please blog any topics or comments in response to this below by 15<sup>th</sup> January.”

#### Outcomes

There were no responses to the ICSP website. The CPMH committee identified the following core areas they recommend including on the curriculum:

1. Common conditions and their characteristics (Dementia, Depression, Anxiety, Bipolar Affective Disorder, Schizophrenia)



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2. Adapting physiotherapy goals and treatment plans to meet person-centred needs (communication, motivation, goal setting, enabling)
3. Case studies and problem based learning (ideas for case studies: a person with chronic pain and low mood, a person with schizophrenia and has side-effects of medication, falls risk for a person with dementia).

The CPMH note that there many more significant topics that could be included in the physiotherapy curriculum and have identified these as a starting foundation for when universities are organising their curriculum.