What is a Community Mental Health Team (CMHT)

Community Mental Health Teams (CMHTs) are secondary care services found across the whole of the UK. Although the makeup of these teams is fairly consistent they may have different names such as the Community Recovery team or Assessment and Brief Treatment team, Recovery & Wellbeing Team or Complex Care Team.

Most people with OCD or BDD will have mild symptoms and will be treated by their GP but some will have more severe symptoms that have a greater impact on their well being and so will need to see a mental health professional. If your GP feels that this is the case then they will refer you onto your local Community Mental Health Team (CMHT) for an assessment and possible treatment.

A CMHT is a multi-disciplinary team of mental health professionals working with adults, often between 18 and 65. Child and Adolescent Mental Health Services (CAMHS) work with children and young people and often there are specific teams working with people over 65. In addition there are some more specialist teams providing crisis support, assertive outreach, early intervention for psychosis or that have another specific care & treatment focus.

The mental health professionals most often found in a CMHT include:

- **Psychiatrist** – A psychiatrist is a medically qualified doctor with specialist training in mental health. Every CMHT will have a Consultant Psychiatrist and in addition may have a more junior doctor who is trained in psychiatry but has not yet become a consultant. A psychiatrist is often responsible for the prescribing and monitoring of medication.

- **Psychologist** – A psychologist within a CMHT may be a Clinical Psychologist which means they have a degree in psychology and another 3 years training in clinical psychology during which time they work with clients and learn how to give psychological treatments. They also help other members of the team to work psychologically with their clients. Although they are trained to use several models of psychological therapy (usually Cognitive Behavioural Therapy plus at least one other model e.g. psychodynamic/systemic) they do not necessarily have specialist knowledge and experience of CBT.

- **Community Psychiatric Nurse (CPN) or Mental Health Nurse (MHN)** – A nurse trained in mental health who provides emotional and practical support to an individual. They can give medication and monitor its effects.

- **Occupational Therapist (OT)** – An OT provides assessments, information and practical support around self care, everyday tasks and work and leisure to help an individual live independently.

- **Social Worker** - Social workers bring a social perspective to the team’s working. They help people to talk through their problems, give them practical advice and emotional support.
and provide some psychological treatments. They are often able to give expert practical help with money, benefits and housing issues.

CPNs, OTs and Social Workers often have very similar duties and responsibilities within a CMHT and all can be key workers or Care Coordinators.

**Referral & Assessment Process**

It might vary across the UK whether a CMHT will accept a referral from a health or social care professional but they will always accept a referral from a GP. If the CMHT accepts the referral it will arrange for you to have an assessment. There are several different methods of assessment but all involve asking detailed questions to find out how much of your day-to-day life is affected by obsessive-compulsive thoughts and behaviour. The assessment may take place over a number of appointments and with a number of different health & social care professionals.

According to the National Institute for Health & Care Excellence (NICE), before the assessment starts, health and social care professionals should explain:

- what an assessment is, what happens and how long the appointment will last.
- what information they may have to share with others, in what circumstances, and how they will keep the information about you safe
- that any decision about your treatment and care will be a joint one made by you and health and social care professionals.
- that you can refuse permission for any other member of staff, for example a student, to be present.

During the assessment, you should be given enough time to talk about your problems, with time at the end for you to ask questions. If you are given a diagnosis, this should be clearly explained and you should be given a booklet or leaflet about it. The healthcare professional should discuss different treatments and give you information about each. You should also be offered time to talk after the assessment, especially if any sensitive issues were discussed. If you are unhappy about the assessment and diagnosis, you should be given time to talk about this and offered a second opinion.

Copies of all correspondence about your diagnosis, treatment and care between your health and social care professionals and other professionals should be sent to you, unless you decide against it.

If as a result of the assessment the CMHT feel you need further support from them then they should work with you to develop a Care Plan and you will be allocated a key worker or Care Coordinator.

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