Seven years on – involving service users & carers in clinical psychology training

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Introductions

- Me:
 - My role



- Who are you?
 - What's one thing you'd want on a desert island?



Morning session



- Why listen to service users/carers?
- 7 years down the road ... Involving service users/carers in clinical psychology training at Surrey ...
- Comfort break
- Small group exercise
- Feedback & discussion
- Lunch



Ground rules

- No right or wrong answers
- Respect others' views & opinions
- Confidentiality some issues are personal to those people expressing them, so please don't repeat them
- Say if you don't understand or disagree

A word about words

- Patient, consumer, client, 'people with lived experience', survivor, service user, ex-service user, etc.
 - Surrey programme:
 - Service users: people who access mental health services
 - Carers: people who care for someone who accesses mental health services
 - (Can be both)



Clinical psychology



- "Clinical psychologists deal with a wide range of mental and physical health problems including addiction, anxiety, depression, learning difficulties and relationship issues and aims to reduce psychological distress and to enhance the promotion of psychological well-being." (BPS)
- PsychD clinical psychology training at Surrey University
- Two regulatory bodies HCPC & BPS
- Why involve service users/carers in training?

Why listen to service users & carers?

- Service users our own experts
- Differing views distress & treatment
- Alternative approaches
- Adds to evidence base
- In training policies, eg:
 - British Psychological Society accreditation criteria: "Programmes must work collaboratively with service users, carers ... and implement ... the active participation of these stakeholders in the programme."



Changing practice ...

"Understanding how services are perceived and experienced by service users has been invaluable when thinking about how I conduct myself and the ways in which I work with my clients."

(University of Surrey PsychD clinical psychology trainee)

The Surrey story

- 2004: our Service Users& Carers AdvisoryGroup is formed
- **2006:** funding for my post secured
- Now: service
 users/carers in all
 aspects of PsychD
 training eg:



- The '4 strands' of the Surrey PsychD:
 - Selection interviewing candidates applying to the PsychD course
 - Teaching contributing to lectures
 - Clinical placements when trainees work in NHS
 - Research part of training

Strategy & philosophy

- Our strategy from invitation to collaboration
- Our philosophy unique addition to training
- Our focus on trainee learning
- Putting it into practice:
 - Service User & Carer Advisory Group
 - Projects discussed, tested, evaluated



The four 'strands'



Service users/carers in:

Selection:

Creating & marking interview tasks

Academic:

- Lectures
- Essay titles
- Presentations by trainees (eg Problem Based Learning)
- Reading seminars

Clinical placements:

- Within Placement Contracts
- Supervisor workshops
- Working with SUC organisations

Research:

- Trainees' research presentations
- Research Drop-Ins

Comfort Break

10 minutes



Benefits & challenges

Of involving service users/carers on Surrey's PsychD programme:

- For trainees
- For staff
- For service users & carers



Benefits: for trainees

- Reduces power imbalances the 'us and them' mentality
- Offers different perspectives
- Helps develop professional skills



Benefits: for service users & carers

- 'Experts by experience' unique knowledge
- **Develop** new skills & roles
- Feel valued & listened to
- **Meet** other service users & carers
- Contributes to recovery:
 - "It is argued that user involvement can be therapeutic in itself, by virtue of enhancing confidence and self-esteem" (Mental Health Foundation, 2003)

Challenges: staff



- **Resistance** from staff
- **Feαr** of change
- **'Scientific practitioner'** model in clinical psychology who is the expert?
- **Power** differentials
- Not used to being challenged by service users/carers!

Challenges: service users/carers

- Fear getting involved may affect care
- Views expressed seen as 'part of the diagnosis'
- *Undervaluing* knowledge, skills, experience
- Jargon
- Low self-esteem
- Not used to being asked!



Small group exercise



In small groups: 10 mins + 10 mins feedback:

A mental health professional and a service user/carer go to lunch together.

What could they learn from each other?

Feedback, discussion, comments, questions

