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Mental Health Cases in Primary Care

Experiment 4 - Practical Notes

Name: _____ Roll no.: _____ Date: _____

Aim

To recognise a need for supportive communication and timely professional assessment in a fictional primary-care case.

Principle

Low mood, anxiety or difficulty functioning can have many causes. A learner listens, asks respectful questions and supports referral without assigning a diagnosis from a short conversation. Immediate risk of harm needs urgent escalation under the local care pathway.

Practice Case

Fictional simulation: Dev, 24, says he has slept poorly and felt persistently low for several weeks. Work has become difficult. He is worried that asking for help will lead to judgement. The case does not establish a diagnosis.

Roles and Scoring

Work in a group of three: learner, patient or partner, and observer. Score each criterion 0 = not demonstrated, 1 = partly demonstrated, 2 = clearly demonstrated. The checklist is for classroom feedback, not a validated clinical assessment.

Requirements

- Case sheet, quiet practice space and timer.
- Observer checklist and notebook; no real patient details.

Procedure

1. Read without labelling

Separate the person's reported feelings from assumptions about cause or diagnosis.

2. Begin supportively

Ask permission to talk and use an open question about how daily life has been affected.

3. Explore needs

Acknowledge the concern, ask about available support and encourage assessment by an appropriate health professional.

4. Respond to urgent risk

If the roleplay introduces immediate risk of self-harm or harm to others, involve the designated clinician or emergency pathway immediately. Do not manage the crisis alone.

5. Plan follow-up

Agree how the person will access care and address a practical barrier such as arranging an appointment. Summarise using non-stigmatising language.

Healthcare Psychology and Communication Skills

Suggested Practice Dialogue

- Learner: "It sounds as though these changes are making everyday life difficult."
- Learner: "What kind of support would make it easier to speak with a health professional?"
- Learner: "A clinician can assess what is happening. We can discuss how to arrange that appointment."

Observations and Record

Criterion	Score 0 / 1 / 2	Observed behaviour
Non-stigmatising language	—	—
Separates report from diagnosis	—	—
Appropriate assessment / referral	—	—
Recognises urgent-risk escalation	—	—

Worked Example

The numbers below are illustrative; enter your own observations in the record.

- Illustrative scores: 2 + 2 + 2 + 2 = 8/8. A high classroom score does not authorise independent clinical assessment.

Result

Total score: ____ / 8. Record one effective phrase, one missed opportunity and one specific action for the next attempt.

Precautions

- Do not diagnose or advise starting or stopping medicines from the roleplay.
- Use fictional details and protect confidentiality.
- Follow urgent-risk procedures if an immediate safety concern is introduced.

Viva Questions and Answers

1. Why avoid a quick diagnosis?

Similar reported symptoms can have different causes and need fuller assessment.

2. What is supportive wording?

Language that acknowledges difficulty without blaming or labelling the person.

3. What changes the response to urgent escalation?

An immediate safety concern, rather than routine appointment planning.

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