The Making of a Therapist: 
How are We Teaching Psychotherapy in 
Graduate Psychiatric Nursing Curricula?

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APNA Graduate Education Council Preconference Workshop
October 22, 2014
The presenters have no conflict of interest to disclose

Pre-Conference Agenda

1:15 Introduction to Graduate Education Council- (Lusk)
1:30 Introduction to Today’s Forum (Lusk)
1:45 Strategies used at NYU (Knight)
2:05 Strategies used at Yale (Moller)
2:25 Strategies used at Rutgers (Pessagno)
2:45 Discussion/workshop small group assignment (ETC)
3:15 Pre-conference adjourns

Objectives

1. Debate the basic knowledge, skills, and attitudes needed by the PMHNP to provide psychotherapy.
2. Discuss various individual, group, and family psychotherapy learning and training opportunities that can be employed in PMHNP programs.
3. Create a forum where individual, family, and group psychotherapy PMHNP learning opportunities can be shared.

Introduction to the APNA Graduate Education Council

- Purpose
- Functions
- Membership
  Please join us
- Monthly conference calls
- Background of today’s pre-conference (survey)

Graduate Education Council

- Deborah Hobbs
  APNA
- Sue Dawson
- Laura Ozurec
- Marian Farrell
- Loma Kendrick
- Teri Dibu
- Candice Knight
- Pam Lusk
- Jeannette Lee
- Brenda Marshall
- Mary Moller
- Scott Zarem

Graduate Programs for Advanced Practice Nurses - Our Fourth “P”

- Physical Assessment
- Pharmacology
- Pathophysiology

- PSYCHOTHERAPY
Scopes & Standards of PMH Nursing (2014)

- Standard 5f. Psychotherapy
- The Psychiatric-Mental Health Advanced Practice Registered Nurse conducts individual, couples, group and family psychotherapy using evidence-based psychotherapeutic frameworks and nurse-patient therapeutic relationships.

Peplau


Peplau had begun to differentiate the clinical specialist as a psychiatric nurse prepared at the master’s level who concentrated on the psychotherapeutic role of the nurse. (Anderson, 1995, p. 79).

Psychotherapy in the Past

- Mental Health Care System
  - Emphasis on psychosocial models
  - Availability of mental health funding
  - Abundant time to practice & process cases
- Graduate PMH Advanced Practice Programs
  - Hildegard Peplau’s interpersonal model
  - Focus on individual, group, & family therapy
  - Longer psychotherapy theory & clinical hours
  - Expert supervision in psychotherapy

Current Influences: Psychotherapy

- Mental Health Care System
  - Emphasis on biological model
  - Managed care – focus on medication management
  - Split treatment
  - Quick-fix consumers
- Graduate PMH Advanced Practice Programs
  - Less curriculum time for psychotherapy courses
  - Reduced clinical hours
  - Less faculty & preceptor psychotherapy expertise
  - Time constraints in clinical agencies

So What Now Is Needed?

- What are the basic knowledge, skills, and attitudes needed by the PMHNP to provide psychotherapy?

Competencies for Psychotherapists

- Generic Therapeutic Competencies - “The competencies needed to relate to people and to carry out any form of psychological intervention.”

**IAPT Competency Model**

- Therapists have primary professional qualifications, some differences in training. (Nursing, Psychology, etc.)
- **IAPT UK – Improving Access to Psychological Therapies Programme**
  - IAPT set out to outline a competency structure for therapists “just detailed enough to specify it as best practice, and set out a form that has utility as well as face validity for its users, and be capable of acting as an aid to practice.”

**Knowledge**

- Professional and ethical guidelines
- Psychopathology
- Common factors research
- Foundational knowledge in basic theoretical orientation
- Assessment and diagnosis
- Knowledge of basic science, evidence-based practice

**Skills**

- Ability to develop rapport and trust
- Adapting interpersonal style and structure to suit the client
- Ability to conduct diagnostic assessment
- Report writing
- General case conceptualization skills

**Skills**

- Diagnosis
- Treatment planning
- Ability to develop and conduct research
- Ability to be an informed consumer of the treatment research literature
- Risk assessment/management
- Communication Skills

**Attitudes**

- Accurate empathy
- Compassion
- Sensitivity to individual differences
- Genuineness
- Lifelong learning

- Roth & Piling 2007, 2008

**Candice Knight**
NYU - Psychotherapy Essentials

- Common Factors (Elements of Effective Therapy)
- Schools of Therapy and Major Subtypes, breadth
- Identifying & Developing a Conceptual Framework
- Developing “Toolbox Skills”
- Depth Psychotherapy
  - Cognitive-Behavioral Therapy (CBT), depth
  - Dialectical Behavior Therapy (DBT), depth
  - Play Therapy, depth
  - Motivational Interviewing, depth
  - Emotion-Focused Therapy (EFT), depth
  - Group Therapy, depth
  - Couple and Family Therapy, depth
- Special Topics: Ethics, research, special populations

Psychotherapy Curriculum

3 Psychotherapy Modalities
- Individual
- Group
- Couple & Family

Content: Common Factors

- Interpersonal Skills
  - Empathic Understanding
  - Facilitative listening
  - Affective Modulation
  - Pacing & Timing
- Forming an Alliance
- Awareness of One’s Own Psychological Process
- Providing an Acceptable Explanation for Client’s Distress
- Inspiring Hope
- Monitoring Progress

Content: Therapy Schools & Subtypes

- Psychodynamic
  - Classical, Interpersonal, Ego, Object Relations, Self, Individual, Brief
- Humanistic-Existential
  - Person-Centered, Gestalt, Existential, Emotion-Focused
- Cognitive-Behavioral
  - REBT, Beck, Stress Management
- Post-Modern
  - Solution-Focused, Narrative, Feminist
- Integrative
  - Motivational Interviewing, EMDR, DBT, Schema
- Group
  - Process Groups
- Family
  - Systemic, Structural, Strategic, Emotion Focused

Content: Tool Box Skills

- Psychoanalytic
  - Interpretation
  - Free association
  - Transference, countertransference, resistance
  - Life recollection review
- Humanistic-Existential
  - Awareness
  - Mindfulness
  - Here-and-now
  - Empty chair
- Cognitive-Behavioral
  - Cognitive restructuring
  - Thought stopping
  - Stress management skills (breathing, relaxation)
  - Systematic desensitization
- Postmodern
  - Miracle question
  - Transforming the story
  - Empowering the client
- Integrative
  - Resolving ambivalence and change talk
  - Rating intensity of distress & distress tolerance skills
- Group
  - Group communication
  - Group interventions
- Couple and Family
  - Genogram
  - Enactment
  - Paradoxical intervention

Content: Theoretical Orientation and Depth Therapy

Identifying & Developing a Theoretical Orientation
- Cognitive-Behavioral (CBT)
- Dialectical Behavior Therapy (DBT)
- Play therapy
- Group Therapy
- Couple and Family Therapy
- Motivational Interviewing
- Emotion-Focused Therapy (EFT)
NYU: Current Curriculum

- MH1: Ind Ind Psychotherapy
  - 30 th + 30 exper lab
- MH2: Found PMH: Assess/Dg, Psychopath, Pharm, Therapy
  - 30 th + 30 exper lab + 30 supervision = 130 pr
  - Cognitive-Beh therapy, depth
- MH3: Grp, Couple, Family
  - 30 th + 30 exper lab
  - Group, Couple, Family, depth
- MH4: Child & Adoles Th: Psychopatho, Pharm, Therapy
  - 30 th + 30 exper lab
  - DBT & Play therapy, depth
- MH5: Child & Adoles Pr & Supervision
  - 250 pr + 30 sup
- MH6: Adult & Gero Th: Psychopath, Pharm, Therapy
  - 30 th + 30 exper lab
  - MI and EFT, depth
- MH7: Adult/Gero Pr & Supervision
  - 250 pr + 30 sup

Total:
- 630 Practicum Hrs
- 150 Experiential Lab
- 90 Supervision Hours

Psychotherapy Process

Didactic Learning
- Reading
- Lecture & Discussion by Expert Faculty
- Demonstrations by Expert Faculty & Trainers
- Video
- DVDs
- Digital recordings
- Live presentations

Experiential Training
- Student as Authentic Self
- Student in Client Role
- Student in Therapist Role
- Student in Supervisor Role
- Standardized Patients
- College Support
- Expert faculty
- Video equipment
- Faculty training support

Personal Therapy
- Require or Recommend?
- Purpose:
  - Internalize template/model
  - Discover blind spots & work through issues
  - Understand being a patient
  - Enhance own skills and techniques
- Develop Assignments
  - In-class simulation
  - Genograms & life recollection inventories
  - Self-reflective journals
- Develop Referral Sources
  - College counseling services
  - PMH-APRNP private practices
  - Institutes

Training Institutes
- Clinical Hours Allocated for Training
- Development of Training Institutes by PMH-APRNs
- Training through Professional Organizations
- Encouragement of Life-Long, Post-Graduate Training

Supervision
- Case Consultation
- Self-Exploration
- Method
  - Audio, videotape
  - Transcribing sessions
  - On-line clinical discussions
  - Direct observation at practicum sites

Psychotherapy Process

Case Study: Mary Moller
Yale University

- Graduate level 1:1, group and family therapy courses
- 1:1 psychotherapy course included major theorists and therapies and module on motivational interviewing
- Course Objectives:
  1. Discuss the concept of nurse as psychotherapist in the context of psychiatric advanced practice care across the lifespan with a variety of patient populations.
  2. Evaluate advanced practice psychiatric nursing models as frameworks for establishment of the therapeutic alliance, all phases of the therapeutic relationship, and decision tree for identification of appropriate psychotherapeutic modalities for utilization in the treatment relationship across the life span.
  3. Discriminate among major psychotherapeutic modalities of care across the lifespan to encompass theoretical foundations, treatment assumptions, and major interventions.
- Psychodynamic psychotherapy taught via film analyses

Film Analysis for Psychodynamic Psychotherapy

- **The Snake Pit**: Psychodynamic psychotherapy with psychosis, PTSD, ECT, historical perspectives
- **Ordinary People**: Psychodynamic psychotherapy; adolescent depression, suicide, family dynamics, survivor guilt, PTSD
- **Good Will Hunting**: Psychodynamic psychotherapy with adolescent trauma
- **The Three Faces of Eve**: Psychodynamic psychotherapy with dissociative identity disorder
- **I Never Promised You a Rose Garden**: Psychodynamic psychotherapy with psychosis
- **Now, Voyager**: Psychodynamic therapy; family dynamics

Grading Criteria

- Identify the major therapeutic modalities utilized by the therapist 20 points _____
- Describe the theoretical basis and philosophical underpinnings of the techniques associated with this modality. 30 points _____
- Describe the therapist interventions with specific film examples and verbatim quotes to include critique of: 50 points _____
  - Therapist strategies and implementation techniques with examples (15)
  - Prescribed length of time and determination of transition between and intensity of actual therapeutic interventions (20)
  - Desired/actual patient outcome measures for the selected strategies and interventions (15)

Other Suggested Movies

- Depression/Suicide
  - Ordinary People
  - Docu: Out of the Shadow
- Schizophrenia:
  - Mania
  - Mr. Jones—first 45 minutes
- Anxiety disorders:
  - PTSD/Dissociation:
  - Fearless
  - Personality disorders
  - Sleeping with the Enemy
  - Substance Use
  - Clean and Sober: Requiem for a Dream
- Eating disorders
  - Documentary: Perfect Illusions-Eating Disorders and the Family
- Autism
  - Autism: The Musical
- Alzheimer's disease
  - A Song for Martin; Iris

Group Psychotherapy

- In the clinical setting at Suncrest Wellness Center (Spokane), Washington State University graduate PMHNP students co-led 12 week trauma recovery CBT program and conducted outcomes research

Rick Pessagno
1. Two modalities taught: Individual and Group Therapy but Family Therapy & Couples and family systems theory included.

2. Development of a Psychotherapy Theory course includes experiential learning of demonstrations of various therapies by experienced nurse therapists.


4. Theoretical orientation is selected by the student; the graduate experience supports individual development of the student’s own theoretical orientation.

5. Strongly encourage all students to be actively involved in their own personal therapy during the program.

6. Clinical Supervision – 3 hours every other week; develops group skills; keep students in the same supervision group.

7. Use numerous DVD's with therapy demonstrations: Corey "Stan" Therapy DVD and Psychotherapy.net

Rutgers University

- Corey’s Group Therapy demonstration DVD
- Individual Therapy: Each student develops a PPT presentation on an individual orientation for a specific disorder or patient population.
- Group Therapy: Each student develops a Group – select a patient population, definition, client selection, number of sessions, marketing plan, evaluation tool
- Family Therapy – students select from a list of movies and apply a family therapy intervention, also use a Genogram having each student complete and then share in their clinical supervision group (2nd term of practicum).
- Couples therapy presentation relative to various couples issues (addictions, extramarital affair, same sex couples, blended families, dealing chronic and terminal illness).

Rutgers continued

- Role play for individual, group, and family sessions during clinical supervision.
- Utilizing state psychiatric hospitals for individual and group therapy experiences.
- Support and encourage participation in various trainings during graduate training including EMDR, CBT, Psychodynamic, Play Therapy, Psychodrama, Couples; as well as any other therapy CEU programs.
- Challenge identifying clinical sites where APN’s are providing psychotherapy – limited experiences.

Group Discussion

- What should be taught/facilitated?
- Clinical experiences available
- In-depth training in modalities?
- Simulation
- Handouts (film assignment, other panel members provide materials)

Questions?

Therapy Competencies

- Do each of these exemplars give the student the opportunity to develop core therapy competencies?

Basic Therapeutic Competencies

Concise List (Roth & Pilling 2008)

- Knowledge and understanding of mental health problems
- Knowledge of, and ability to operate within professional and ethical guidelines
- Knowledge of a model of therapy, and the ability to understand and employ the model to practice
- Ability to engage client
- Ability to foster and maintain a good therapeutic alliance, and grasp the client’s perspective and “world view”
• Ability to deal with emotional content of sessions
• Ability to manage endings
• Ability to undertake generic assessment (relative history and identifying suitability for intervention)
• Ability to make use of supervision

• UK – Improving Access to Psychological Therapies (IAPT) Programme

Workshop:
• Interactive / sharing of other exemplars from participants.

References:

