Information for Patients

Cognitive Behavioural Therapy
You have been referred to the cognitive behavioural therapy (CBT) clinic here at St Christopher’s Hospice either because you have asked for some help or because a member of the team has suggested that you come. This leaflet aims to answer some of the more common questions about CBT and help you understand a little more about what to expect.

1 How might CBT help me?

Being diagnosed with a serious illness can be a distressing experience for both patients and families and can lead to people experiencing many different feelings. It can affect your relationships and also revive problems from the past. It is therefore not uncommon for patients and family members to feel emotionally overwhelmed. CBT can help people to regain a sense of control, as well as identify ways of coping with their difficulties.

2 What is CBT?

CBT is a brief, problem-focused talking therapy, which involves you and a therapist working together to highlight and understand the relationship between thoughts, feelings and behaviour.

It is based on the idea that how we think and act can sometimes trap us into unhelpful emotional states and patterns. With CBT to change the way we think and the way we act, it is possible to alter and escape self-defeating thoughts, feelings and actions. The focus is mainly on current problems and the beliefs that underpin them, so therapy involves learning to recognise and challenge unhelpful thoughts, as well as looking at the influence of what you
do in terms of behaviour. It aims to build on strengths and develop new ways of coping, so preventing relapse. Together with your therapist you decide which problems to tackle and your aims for treatment.

The length of the CBT course is decided on an individual basis. We review how it is helping after four sessions and a maximum of 10 sessions are offered. As well as coming to regular sessions, which will be structured so that you make the most of your time with the therapist, you will also be asked to practise new skills between sessions. At the end of treatment it is unlikely that all your problems will be resolved but you will have learned new ways of coping with them.

3 Who will I be seeing?

You will be seeing a qualified cognitive behavioural therapist. The therapist is specially trained to help people explore their emotional concerns in more detail and assist them in finding ways of coping more effectively. The therapist will have a detailed understanding of your medical condition and its various treatments but will not prescribe any form of medication.

4 Where and when will I be seen?

You will be seen in a consultation room at St Christopher’s Hospice. All appointments are in office hours. St Christopher’s has a car park and there is ample unrestricted parking in adjoining residential roads. It also has good bus and train links. If however you are unable to get to your appointment, St Christopher’s may be able to help. Please discuss this with your nurse.
5 What will happen during the first appointment?

The first appointment usually lasts for up to 90 minutes. The main purpose of this first meeting is for you and the therapist to explore your concerns further and to decide whether you need, and can make use of the kind of help the therapist has to offer. Once the assessment is complete you will both be able to make a decision together about the best course of action.

6 Will I be wasting the therapist’s time?

No – if you are worried about something then it is worth talking about. The assessment with the therapist will help you both decide what will be most helpful.

7 Is it confidential?

All visits to the therapist are private and confidential and you may talk about whatever you want with them. If there is particular information you do not want shared with the wider team, this is not a problem, except in rare circumstances if there is risk of harm to yourself or another. St Christopher’s has a confidentiality policy, which the therapist will adhere to. If you would like more information about any aspect of confidentiality please ask the therapist at your first meeting.

8 What if I need to be seen more urgently?

We try to see people with urgent problems quickly. If you feel you need to be seen urgently
or if the problem gets worse while you are waiting, please tell the person who referred you to the clinic.

9 **What if I change my mind and decide I do not wish to attend?**

If you no longer wish to be seen, please let us know as soon as possible. This will allow us to see someone else more quickly.

10 **What should I do if I have other questions that are not answered here?**

Please feel free to ask any further questions at your first appointment or talk to the person who referred you.
It is really important for your care that the information you give us is as full and accurate as possible.