

Public Mental Health Training - Quality Marker Checklist

Introduction

Good mental health is vital to everyone in the population. It can impact an individual's ability to reach their own potential and cope with everyday challenges. Empowering people to manage their own wellbeing can greatly improve their quality of life and ability to live a productive and fulfilling life.

Mental health promotion is a key aspect of public health that aims to foster positive mental health in the population. We can improve the overall health and quality of life at a population wide level through the provision of training and education that aim to prevent mental ill health and promote wellbeing. Mental health promotion training aims to improve mental health and wellbeing across a variety of settings and audiences by reducing the stigma around mental health and equipping individuals and communities with the knowledge and skills to manage their own and other's mental health.

Development of quality markers

The core principles and measures of quality outlined in the resource have been identified through a three step process, involving a literature search, data gathering on quality markers through focus groups and a survey, and targeted feedback on the emerging markers from a range of stakeholders. Data and feedback were provided by public health professionals, mental health trainers, health and social care professionals, and experts by experience.

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Purpose and use

This resource provides quality markers to guide the evaluation of existing public mental health training programmes and to inform the design of new training programmes. The aim of this checklist is to create a shared standard of quality across training providers and commissioners to enable organisations to assess their options when commissioning training against sector agreed standards. It sets out to identify features and principles that denote good educational practice.

This resource should be utilised alongside the [Public Mental Health Content Guide: For introductory courses or professional development in mental health and wellbeing](#) and the [Public Mental Health Content Guide: For public health academic courses, professional training programmes and professional development](#) both of which provide core content for public mental health training. It should also be used in conjunction with the Public Mental Health Training Directory which sets out available training resources.

The content has been divided into four columns. The first column states the overarching quality principle that is addressed by specific quality markers. The second column includes specific areas within the quality principle that have been identified as important to consider in a training programme. The third column describes different activities that represent measures of quality within the quality marker. The final column allows the user of the checklist to assess the extent to which the training programme meets the expected standard of quality described by the sector:

1. **Training providers:** Course developers, trainers, and researchers can use the final column to guide the production and delivery of the programme. This can help training providers evaluate and review course content to ensure it matches agreed standards.
2. **Commissioners:** Organisations looking to commission a course can use the final column to assess their options according to quality standards and prioritise areas of quality relevant to the commissioner’s training outcome goals.

This resource is a universal guide to be applied to a local context by the user.

QUALITY PRINCIPLE	QUALITY MARKER	MEASURES OF QUALITY	ASSESSMENT: FULLY, PARTIALLY OR NOT MET
1. Training Approach	1.1 Learning modality should be experiential and acknowledge different learning styles.	<ul style="list-style-type: none"> • Opportunity to practise skills learned in the training and receive feedback. • Inclusion of group discussion to share experiences and ideas, harnessing peer learning. • Sharing of ‘good’ and ‘bad’ practice examples to support learning. 	

Public Mental Health Training – Quality Marker Checklist

		<ul style="list-style-type: none"> • Inclusion of activities that encourage self-assessment and reflection on learning. 	
	<i>1.2 Promotion of a holistic approach to mental health and wellbeing.</i>	<ul style="list-style-type: none"> • Understanding of wellbeing within the learner’s social, cultural, spiritual and economic context. • Integration of wellbeing practices across all aspects of the learner’s context, through engaging with principles of behaviour change and motivation. • Equipping learners to self-manage their mental health in whichever way is most relevant and feasible for them. 	
	<i>1.3 Focus on prevention and promotion.</i>	<ul style="list-style-type: none"> • Education about risks and protective factors. • Teaching coping strategies and wellbeing management techniques. • Education on evidence-based interventions and approaches at population, community, and/or individual levels. • Setting action plans and goals to improve wellbeing at population, community, and/or individual level. 	
	<i>1.4 Process of design should take accuracy and relevance of information into account.</i>	<ul style="list-style-type: none"> • Evidence of service users and learners being at the centre of the design process, from co-production through to consultation. • Piloting of the training programme and regular review of the educational content to keep up to date with new developments. • Consultation with stakeholders to identify priorities. • Consultation with community members to contextualise training. 	
2. Key features	<i>2.1 Normalisation of mental health and wellbeing.</i>	<ul style="list-style-type: none"> • Explanation of mental health and wellbeing as a double continuum and the differences between the two. • Focus on every day experience of mental health and wellbeing, contextualised against the medical model for mental illness. • Use of evidence-based content to destigmatise mental health. 	
	<i>2.2 Application of the training to the context of the learner</i>	<ul style="list-style-type: none"> • Understanding of cultural and individual differences in learners and how this can impact their mental health and wellbeing. • Consideration of the learners’ beliefs and how these can influence wellbeing practices. 	

Public Mental Health Training – Quality Marker Checklist

		<ul style="list-style-type: none"> • Explanation of the biopsychosocial approach to mental health and wellbeing to encourage holistic and personalised thinking. 	
	<i>2.3 Provision of resources to support learners beyond the training.</i>	<ul style="list-style-type: none"> • Availability of signposting information to help support the learner and others in their context on a continuing basis. • Guidance on sourcing further learning in related areas. • Description of interventions and strategies that learners can implement to approach mental health promotion (i.e. awareness of health services or community approaches as available). 	
	<i>2.4 Standardisation of training experience.</i>	<ul style="list-style-type: none"> • Outline of the aim and purpose of the training. • Development of learning outcomes that are relevant to the target audience and feasible to achieve. • Adaptability of core course content to be tailored to learner groups. • Description of clear and consistent learning outcomes that can be assessed at the end of every training session. • Description of the allowances to tailor learning to individuals. • Transparency of what the training is equipping learners to do, and what it is not equipping them to do. 	
	<i>2.5 Inclusion of lived-experience perspective or relevant stakeholder perspective in the development or delivery of the programme.</i>	<ul style="list-style-type: none"> • Consultation with service users, learners and other relevant stakeholders during design. • Embedded lived-experience perspectives throughout the development of the training activities. • Opportunity for learners to share their own experience and their individual approaches to their mental health and wellbeing. • Consideration of the psychological safety of learners in sharing own experiences and learning about others' experiences. 	
3. Trainer and/or Developer Attributes	<i>3.1 Evidence of excellent facilitation skills in this area and academic qualifications where appropriate.</i>	<ul style="list-style-type: none"> • Understanding of mental health and wellbeing in the context of people's everyday lives to answer questions and communicate the existing evidence. • Ability to create an open and supportive learning environment. • Ability to lead discussions by encouraging critical thinking, reflection and self-evaluation. 	

Public Mental Health Training – Quality Marker Checklist

	<i>3.2 Standardisation of trainer/developer attributes.</i>	<ul style="list-style-type: none"> • Provision of train the trainer programmes to ensure a standard of trainer knowledge, skills and quality. • Incorporation of feedback from training evaluations to develop trainers' styles and skills (i.e. peer or learner feedback). • Evidence that the trainer has completed the relevant train the trainer programme or has equivalent training/teaching experience. 	
4. Evaluation	<i>4.1 Evidence of measurement of the impact of a training resource at different check points.</i>	<ul style="list-style-type: none"> • Inclusion of baseline measurement pre-training (e.g. confidence and knowledge ratings). • Measure of immediate impact on learners and learning outcomes after the training. • Measurement of follow up or longer term impact on learners and learning outcomes (e.g. 3-6 months post training). 	
	<i>4.2 Evidence of training assessment on different stakeholders.</i>	<ul style="list-style-type: none"> • Measurement of training impact on trainees. • Measurement of training impact on target audience. • Measurement of training impact on the wider community and at whole organisational level. 	
	<i>4.3 Evidence of diverse impact measures.</i>	<ul style="list-style-type: none"> • Inclusion of quantitative data in the impact evaluation (an guide to developing an evaluation strategy can be found here). • Inclusion of qualitative data in the impact evaluation (i.e. feedback from learners and observations). • Use of self-report impact measures on stakeholders. • Use of objective success measures (i.e. validated surveys). • Use of relevant and accurate measures for the outcomes. 	
	<i>4.4 Evidence of independent training evaluation.</i>	<ul style="list-style-type: none"> • Endorsement of training quality from an external organisation. • Accreditation of training from a trusted organisation. • Evaluation report undertaken by an external organisation. 	

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About Maudsley Learning

Maudsley Learning is a mental health training centre and part of South London and Maudsley NHS Foundation Trust, working closely with the Institute of Psychiatry, Psychology and Neuroscience at King's College London. Our mission is to enhance mental health and wellbeing for all through high quality education and training.

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