Recipe for Success

Developing mental health services in FE colleges

November 2011
Welcome to `Recipe for Success` a guide to effective practice in supporting students and staff in further education (FE) who have experience of mental health problems.

When Hackney Community College won the Association of Colleges Beacon Award (2011) for Widening Participation for its work with students with mental health problems they decided to share their award with the sector by commissioning this e-guide to effective practice. They commissioned the development of research tools and the collection of qualitative data from Hackney and five other further education colleges; this data informed the findings about the essential components of effective practice presented in the resource.

This guide uses the familiar analogy of a ‘recipe’ for success as a way to explore the key components of successful mental health services in further education. Using the ingredients everyone agrees make things ‘work’, they illustrate how a mental health service can help individuals to succeed and can positively influence an organisation and its stakeholders.

Hackney Community College’s recipe for success is complemented by contributions from other colleges that have also developed and (sometimes over many years) sustained partnerships to improve their services. The information presented on each page is supplemented by a range of college documents one click away in the right hand margins – providing numerous practical examples of how to develop more effective support for learners and staff.

In the conclusion some key challenges are explored including the need for a deeper understanding of some of the issues and the sector's policy and practice responses.
‘A professional service’

**Ingredients**

Core values

Secure single source sustained funding for 14 years

Well-established partnership steering group

Commissioned outcomes focused on the needs of individual students

2 x experienced specialist Mental Health Education and Employment ‘fixers’ and ‘boundary spanners’ who remove barriers

Secure and welcoming campus

Mixture of discrete and mainstream provision and locations

On site and off site learning and support (including onward)

Joint initial health and educational (risk) assessments and support
Method

1. Place learners at the heart of the service
2. Develop referral procedures through strong local networks and partnerships
3. Provide one-to-one in-depth impartial information, advice and guidance (IAG)
4. Offer an informal and open door policy for learners and staff with questions/queries/problems
5. Provide support to teachers and other professionals, including staff training and less formal ad hoc one-to-one advice and support
6. Blend on-site and off-site IAG and learning opportunities with both discrete and mainstream curriculum choices and personalised support
7. Set up a steering group for good governance. Add (as we have recently) direct learner involvement
8. Invite new local partners to join the group as required to meet the needs of different groups of learners, e.g. forensic services, child and adolescent mental health services
9. For the best results and year on year improvements, ensure service stability (via a single source external funding contract with North East London NHS Trust)

10. To resolve problems in the mix, consider adding more resources (rather than reducing or removing them)
11. Monitor, review and learn
12. Allow sufficient cooking time (14 years so far) for the service to develop and earn trust and its ‘place’ in the matrix of local services

Blend support, the curriculum offer and external partnership working carefully. Adjust exact quantities of each to suit individual taste.
To serve / presentation

Make the service visible, including (but not only via) a strong and practically useful welcoming presence on the college website.

Contribute to wider internal and external initiatives, like Healthy FE and the Time to Change Campaign.

Use opportunities (like World Mental Health Day) to raise awareness of mental health and illness and challenge stigma and discrimination in the college.

Tasting

Invite peer review and internal and external scrutiny.

Take findings (as well as the service) outside college to share learning and contribute to supporting the FE sector to improve services for people with mental health problems.
Key components

College mental health service

- Governance
- Networks
- Support
- Persistence
- Co-production
- Community
Colleges' ‘recipes’ reveal six shared or ‘key’ components’ that they use to deliver a professional mental health service in an FE college.

These key components are:
1. Good governance;
2. Using informal internal and external networks;
3. Reliable and responsive individual support for learners;
4. Co-production;
5. Creating a sense of community; and
6. Persistence.

The secret to success lies in the approach that is then taken - how exactly providers use these six key components.

1. **Good governance**
   - A clear rationale for the service which recognises the benefits of learning to recovery
   - A formally constituted group, comprising external and internal partners, to drive, challenge and support as well as monitor and review activities

2. **Using informal internal and external networks**
   - Recognising and using informal, 1-1 relationships to promote positive outcomes for learners
   - Using informal networking to consolidate and sustain cross-college and external partnerships

All of the colleges used all 6 key components to some degree.

**Sometimes in quite different ways.**

Most colleges were continuously adjusting the amounts and their methods.
Key components

3. Support
Support is the most frequently described component of college services. It is about responsive and reliable individual support for learners.

It is characterised by prompt responses to queries, access to on-going 1-1 support, formal meetings and an informal ‘open-door’ policy that is consistent in approach with learners’ recovery and empowers them to:

✓ Make informed choices about their learning
✓ Develop resilience in skills in the learning environment which enable them (and those who support them) to manage any fluctuations in their condition and persist in learning
✓ Participate in the wider college community
✓ Progress and achieve personal goals
✓ Access impartial information and advice
✓ Receive time unlimited support, especially during enrolment

4. Persistence
Persistence is associated with the following:

✓ Keeping outcomes focused on meeting the needs of individual learners
✓ Spreading understanding of mental health across the organisation and with stakeholders
✓ Prioritising funding for the service in challenging times

5. Co-production
In this context, co-production is learner involvement plus. It is about a creative collaboration by all the partners involved and it frequently means that staff mental health and wellbeing is valued and included.

In terms of students, it is about going or aspiring beyond learner voice activities; stretching the bounds of learner involvement, so that learners are partners too in finding and deciding on what else is needed to develop and improve the service.
6. Creating a positive sense of community

Creating a positive sense of community involves the following:

✓ Core values, endorsed by the college community, that drive continuous improvement

✓ A physical environment that contributes to a structure of feeling that encourages and enables people to feel safe and welcome on campus and able to enjoy using college facilities

✓ Differentiated learning environments that are responsive to individual need, without having to ask

✓ Each member of staff plays a role in supporting a students’ wellbeing
Ingredients

A shared vision of what you want to achieve (internally, externally and with learners)

Leadership and ownership – including embedding in formal structures and a champion with enough seniority in the management structure to persistently drive the mental health agenda both in the organisation and with external partners.

An anti-stigma attitude about mental health problems

Staff - teachers and support staff with awareness and understanding of mental health difficulties and their impact on learning

Belonging - a positive and inclusive approach that enables an individual to feel valued and ‘part of something’

Learner involvement - including peer support

Personalised, flexible, responsive curriculum, which includes wellbeing and mainstream provision

Supportive environment - that builds confidence and self-esteem
**Method**

1. Use the champion’s enthusiasm and commitment to mental health to influence all key college decision-making bodies

2. Ensure you have formal internal and multi-agency groups where mental health matters /curricula are mapped and discussed

3. Strong local partnership direct working at a strategic level and with specific services/leads

4. Hold your nerve when partners are re-organising. Be ready to (re-)engage with the new structure

5. Hold panel reviews for learners

6. Make sure staff have access to appropriate training – we have used Headspace and a student to deliver ours

7. Take a positive approach to raising awareness and supporting inclusion. Challenge stigma if/when it is identified.

8. Develop increased confidence in learners by valuing them as individuals and making the programme fit their needs – which may change during the course.

9. Offer a peer student support group and support to other providers wishing to establish similar provision
The Hull College Group mental health service

- Student Services – finance/IAG/admissions
- Counselling Service – providing 1:1 counselling
- Additional Learner Support – provide discrete in/out of class support
- Discrete Courses/Mainstream Courses
- Health and Wellbeing Support – drop-ins with external agencies
- Enrichment Team – offering trips and support to engage students
- Learning Mentors – offering first point of call support and signposting
- Tutorial Support – offering information, specific tutorials re MH awareness etc
- Partnerships with external mental health services

Student

The Hull College Group mental health service
Ingredients
100g of relevant knowledge, skills and experience of college staff supporting students with mental health issues
100g of offering a package of options to ensure an individual and personalised approach.
150g of listening (including counselling)
150g of respect, tolerance and understanding
Season with a spoonful of reality so we only offer what we can professionally manage within the limits of the college and resources

Method
1. Decide who is involved in the cooking and only involve other (internal and external) on a need to know basis.
2. Involve the student during all aspects of the cooking, and ensure they understand the method, ingredients and process, and consent to this.
3. If the recipe is not working out, we may discuss bringing in a professional chef.
4. We may turn the oven off for a while to give a student space to work out a cake recipe to suit!
5. Cook according to personal recipe to create the best cake possible!

Tasting
The taste is more important than the presentation so if it is the right recipe for the cake, icing and cake decorations may not be necessary and may distract from the nutrition of the cake!
Ingredients

Leadership which includes a passion for moving things forward

Clear communication

Willingness to undertake partnership working (external and internal)

Learner involvement

Expertise - at least one key member of staff, (not necessarily with a mental health background) who knows how the college ‘works’ and who to approach to make things happen

Method

1. Be persistent – follow everything up to drive things forward and make sure they happen

2. When working with others check the viability of ideas as you go along – don’t automatically assume that you are always heading in the same direction

3. Build in active consultation with learners – their experience and thoughts about what you have done in the past, what you are doing now and what you plan for the future are essential

4. Give everyone regular updates so they stay involved

5. Use at least one other person as a mentor/sounding board to challenge what you are doing and why

To taste

May need “more blending, if there are still some chewy bits in there”.

This recipe is only a beginning. Getting it right so that the provision suits each learner is a long journey. Continue to explore/develop ideas by consulting with learners (is it working? do we have the right mixture?).

Keep up with what is happening elsewhere and use face to face and virtual networking to help develop your ideas further.
Ingredients

- **Core values** (PRIDE: Partnership, Respect, Innovation, Diversity, Ethical), You can get such values at any good FE provider usually in their strategic plan (e.g. Sunderland College)

- **College leads for mental health** (e.g. Disability Advisor/Specialist Tutor/Lead Learning Mentor)

- **Effective partnerships** – external/internal

- **Learner-centred approach**/ promoting the Learner Voice – survey, councils, learner forum

- **Learning support** (in adequate and sufficient quantities)

- **Raising awareness** – WMHD, tutorial packages, staff development, Equality and Diversity Week, wellbeing activity, etc.
Method

1. Publish and disseminate core values – ensure whole organisation is aware and on board with this major ingredient which, introduced to the mix carefully should create an environment which encourages disclosure, challenges discrimination and stigma.

2. Ensure college leads are included in the mix at an early stage – they can have the effect of pulling all of the ingredients together.

3. Add effective partnerships both internal and external – you can be quite liberal with this ingredient (e.g. Early Intervention in Psychosis team; CAMHS; Mind; tutorial; enrichment; governing body).

4. Carefully mix in a learner-centred approach/promotion of learner voice in equal quantities – you can improve both of these ingredients by considering targeted surveys/forums/councils/case studies and by giving the learners an active role in the mix.

5. Ensure you have adequate and appropriate quantities of additional support in the medley to give it a subtle but effective taste.

6. Finally add a large dash of awareness raising to give the recipe “bite” (don’t hold back on this ingredient as the dish can be spiced up throughout the year to appeal to all).

Tasting

Sample the mix and increase the ingredients as required.

Season with a good sprinkling of marketing (e.g. case studies/video clips/podcasts etc).

Serving/presentation

The Mental Health Medley can be kept on the boil throughout the year and served at all times of the day and can be an excellent centrepiece to celebrate such events as World Mental Health Day Equality and Diversity Week, etc.
‘One and all loaf’

**Ingredients**

- 4 cups lemony **listening**
- 2 large measures of ruby **realness**
- 2 large measures of **imple’mint’ation**
- ‘sugar – let’s get that right’ - as required
- Pinch **humour**
- Pint **kindness** (for serving)

**Method**

1. Take 2 cups of Lemony Listening and sift with 1 lge measure Ruby Realness

2. Thoroughly stir in half the Imple’mint’ation and save some for later as it might not all be required

3. Add ‘Sugar – Let’s Get That Right’ to taste, with the rest of the Lemony Listening and a pinch of humour

4. Add further Imple’mint’ation as required and leave to prove for half a month or term, depending on temperature

5. Finish off with a touch more Lemony Listening as needed before baking for half an hour in the Keyboard Bakery. The Baker should be present at all times.
To serve/ presentation
With a Pint of Kindness.
Allow the Baker to decide on the presentation e.g. thinly slice and share widely; or keep whole and allow to mature

Tasting
By the Baker, the Candlestick Maker and whoever else the Baker allows.

“Everyone in the team is friendly and approachable, so if problems arise when one isn’t here, others are... This is important for me, knowing the support is there - nothing can happen that is so huge that there isn’t someone who can help. The whole package has made college a safe place rather than a frightening one, somewhere I want to be. This stability enables me to lead a normal life.”
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<td>Making the links: learning and recovery</td>
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Conclusion
Conclusion

Data in relation to mental health usually means declaration rates – the number of people who declare a mental health problem when they enrol or during their course. Increasing declaration rates has often been seen as a potential benchmark to demonstrate the effectiveness of mental health services but is fraught with problems and as the ‘official’ declaration rates reported by the study colleges illustrate might suggest that very little has changed since the Mental Health and Social Exclusion report in 2004 cited an adult participation rate in learning of 0.25% for people with mental health problems.

If, for just a moment we assumed that the 0.25% declaration rate cited in 2004 was an accurate reflection of participation at the time, then some of the study colleges, like Highbury with a declaration rate of 1.2% in 2011/12, may have seen almost a four-fold increase in the number of adult learners with mental health difficulties in less than ten years.

All the colleges in this study continue to develop and improve the support they offer in spite of low declaration rates. They recognise the complex, personal nature of declaration means they need to look for other benchmarks to identify progress in supporting learners. Collecting quantitative data that helps to illustrate the quality and success of a mental health service in further education, might for example, include:

- Number of enrolments supported by the service;
- Retention and success rates of learners supported by the service and all students in college;
- Auditing your disciplinary (and grievance) records to check that learners with mental health difficulties are not over-represented among them; and
- Learner outcomes.
The learning and skills sector helps people to succeed in learning. Outcomes (and funding) are focused on achievement of a learning goal within a specified period of time.

Mental health services work with people to help them develop coping and self-management strategies to promote recovery.

What if?

- An individual chooses not to declare a mental health problem when they enrol on a learning programme and doing so may be empowering and help their recovery.

- A student does not declare until just before exams – is it their failure to declare at the beginning of their course or is it a positive self management strategy – in response to becoming aware of internal signs of stress and asking for help as part of their recovery?

- A person does not complete a learning programme but along the way they have developed coping skills essential to their recovery?

- There is an evidence-based curriculum that can improve the wellbeing and mental health of students who have mental health difficulties?

- There are simple validated tools that could be used to help measure this benefit to people’s wellbeing and mental health?
Partnership working is never the easy option, indeed if it is easy then its inherent strength in bringing together different perspectives may instead have become a weakness. Making the case for services for students with mental health difficulties has always been complex. It is influenced either by our society’s fears of mental illness and their fears of the resulting stigma and discrimination. For obvious reasons, the benefits of learning for mental health and wellbeing are less well-researched than for the benefits of work with the result that we don’t, for example, have a robust cost-benefit analysis to call on.

Prioritising support for people who experience mental health problems in challenging times (when the job market is shrinking, NHS mental health services are re-organising and there is evidence that public sector cuts are hitting hardest those who already experience the greatest inequalities) is even more complex and challenging.

Using historical data to inform future planning can be difficult when the sector confronts a changed landscape with few familiar features. But one of the challenges of the future is to align colleges more closely to economic and social renewal and make them more accountable to their local communities.

Encouraging more people with mental health problems into learning is one way to meet this challenge and, as Hackney’s Beacon Award 2010 for Widening Participation illustrates, there are rewards for individuals and their communities as well as organisations and their local partners for aspiring to do more, not less, in challenging times.
We would like to thank the following people who, by sharing their experiences and expertise so freely with us, enabled us to capture in a very short space of time a wealth of useful information about what is happening to develop effective practice in FE colleges to improve outcomes for people with a mental health condition.

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Resources about developing partnership working to support learners who have experience of mental health problems are available to download from the Skills Funding Agency/NIACE partnership project mental health in further education website at:

http://mhfe.org.uk