MECC for Mental Health Training

Content Plan

Introduction

We welcome you to the content overview for MECC for Mental Health training programme. Here we have outlined in further detail the content for each of the three modules, comprised of the six learning outcomes. We are keen to ensure the framing of the programme is in line with the wider MECC content, and we are mindful to create realistic expectations of the limitations of this training in respect of wider Mental Health Awareness training available.

Overall, the training has been designed in a modular format, with the intention that each module could be 'standalone' **or** delivered sequentially to create a comprehensive learning package. Our rational for this approach was to allow STPs to select the modules that would provide the best fit for their workforce development needs and that would complement their existing MECC programmes.

All content in the core training programme has been considered and deemed appropriate for face-to-face and online virtual classroom delivery via a platform such as Zoom, to allow the roll out to progress in accordance with Covid-19 restrictions over the coming months.

Module One: Introduction to MECC for Mental Health

Suggested pre-course activities:

- Sign up for e-LforH – and complete MECC session 1,
- Check out MECC Community of practice on Facebook,
- Download every mind matters app and complete the quiz.
- Complete MECC for Mental Health online module one (30 minutes)

Learning Outcomes 1&2	Content	Suggested Activities
LO1: Identify what we mean by mental health, mental wellbeing and mental illness, including recognised definitions, models and frameworks	• Welcome and introductions. • Group agreement to include managing online safety • What is Mental Health, Mental Illness, and Mental Wellbeing? Definitions including the WHO. Share frameworks for national context, further reading. • Emphasise 'No Health Without Mental Health' Arguably This is the starting point for any MECC health conversation • How good are we at talking about mental health? • Dual Axis Continuum Model of Mental Health and impact of stigma on movement around the continuum/ accessing support. Focus on normalising mental health, not 'them and us' but 'all of us'. (Lack of) Parity of esteem between mental and physical health.	• Ice breaker. • Research task for definitions, feedback & group discussion on findings. • Interactive activity to highlight links between Mental and Physical Health • Short presentation and Q&A on evidence for early intervention and link with longer term health conditions • Watch time to change ask twice video and discuss: how do we usually talk about mental health? • Case studies to map onto dual axis – selection available to fit to context or trainers own

	• Stress container, stress signature, toxic/chronic stress & associated risk factors. Coping strategies, helpful and unhelpful.	• Group discussion and personal reflection exercise for stress container and coping strategies • Introduce concept of 5 ways to Wellbeing
LO2: Define the MECC, the MECC approach and explore how this can be applied in the health and care setting	• What is MECC and why is it important, exploring the rationale for using this approach and the evidence of effectiveness. • Examining the values that underpin a MECC approach • Equality, diversity, and inclusion. • Exploring the concept and principles of Asset Based approaches and how these align with underpinning MECC and personalised care principles • Introduction to 'risk' taking in health – the function of certain behaviours in managing stress and the short and longer term associated health risks and behaviour change underpinned by wellbeing • Identifying what a MECC conversation might look like in a variety of settings. • Using the 3 A's model (Ask, Assist, Act) and creating non-judgemental language around this framework. • Applying a Personalised Care approach to MECC.	• Group discussion - How often does the topic of 'health' come up in our day-to-day conversations? • HEE 'what is MECC?' video. What is a MECC conversation? • Group activity comparison of local or national health data to illustrate Health inequalities and community assets. • MECC definition. • Group activities exploring risk and functionality in health-related behaviour. • Analysing health related video examples. • Case studies to apply 3 A's. • Pair's skills practice using language prompts.

	• Identifying naturally occurring and additional opportunities to have a MECC for mental health conversation. How and when can I have a MECC conversation? • What's my role and what time do I have? Examining how to have MECC for MH conversations if I have: o 30sec – 1min o 3 mins o 3-10	• Personal reflection identifying my opportunities to have a MECC conversation. • Case study examples of time limited MECC for MH conversations • Highlight: • e-LforH - MECC programmes. • Action for Happiness GREAT DREAM.
Module One e-Learning	• Overview of national context. • Rationale and evidence base for the MECC interventions • Making the case for prevention / LTC management • Dual Axis Mental Health Continuum. • Risks of not talking about Mental Health & Stigma. • What is MECC, definitions and the rationale? • National and local health data and introduction to health, promoting conversations theory and practice.	• All Our Health video. • Downloadable aide memoire of time limited MECC for mental Health conversations starters. How to have MECC for MH conversations if you have: o 30 seconds – 1 minute o 3 minutes o 3-10 minutes This would include the three A's framework and a selection of language prompts

Module Two: Knowledge & Skills

Suggested pre-course activities:

- The Three Videos Challenge:
    - 1. Welsh ACE's video
    - 2. Open Doors Video
    - 3. Brene Brown empathy v's sympathy video.
- Complete MECC for Mental Health module two online learning (30 minutes)

Learning Outcomes 3&4	Content	Suggested Activities
LO3: Develop skills and confidence to engage with service users about their mental health and wellbeing	- What are the barriers to raising the issue? Consider some common language, which may add to the stigma around mental health. - The importance of engaging, creating connection and building rapport/ positive relationships to create a safe environment where people can share feelings, thoughts, and ideas. - Identifying what we mean by 'client centred' and what skills do we use if we are using a client centred approach. - Exploring the importance of first client contact – the first 30 seconds the 'golden moment'.	- Facilitated group discussion, How do we / do we not talk about mental health? - Activity around impact of language used. - Pairs activity - what does a good helper do? (Personal reflection) - Activity – If we were using a client centred approach, how would we want our client to be feeling? Analysing two scenarios and identifying which is more client centred and why? Labelling the skills used. - What skills would we have used to help influence their emotional state? 5 Ways to Wellbeing Activity

		• Video, Brene Brown empathy v's sympathy.

LO4: Develop skills to support services users to understand their distressing feelings and experiences	• Introduction to Trauma Informed Practice and Adverse Childhood Experiences (ACE's). Broad context for later discussion about non-judgemental listening.
	
	• Enhancing our skills:
	  o Non-judgemental, active listening skills
	  o Putting these concepts into practice, starting the conversation.
	  o How do we raise the issue? What words can we use?
	  o How to ask open questions and when to ask closed questions.
	
	• Crisis response, what is a mental health crisis and how can we respond?
	
	• How do we have conversations about suicide?
		• Wales ACE's video.
		
		• Trauma/ACE's case study –map the ACE's of a young person and how they may impact at various life stages.
		
		• Non-judgemental listening exercise.
		
		• Group activity turning closed into open questions. Use examples and make reference to the Whooley questions
		
		• Group activity on paraphrasing with context specific scenarios.
		
		• Pair's activity 'What would you say next?' To practice active listening and reflecting skills.
		
		• Crisis response facilitated discussion and scenario's including support to raise the issue of suicidal feelings.

Module Two e-Learning	• What are ACE's and how can they affect long-term health outcomes. • What is helpful / unhelpful when having a conversation?	• Quiz or alternative asset. • Video of a MECC conversation with good / not so good elements that people can highlight and comment on. • Opening doors: trauma informed practice for the workforce - https://vimeo.com/274703693

• Crisis response will be considerate of job roles and the types of crisis they are likely to see in their role/ setting. • Messages will highlight that crisis takes a number of forms on the mental health continuum.	• Activity to match/select appropriate responses to case studies. This will feature a number of job roles and illustrate a range of mental health crises. • Two or three crisis situations – how to deal with, these could be video's which stop at certain points for the learner to make decisions on what happens next. • For more in depth Suicide prevention training - https://www.shiningalightonsuicide.org.uk/suicide-prevention-training/ • Suicide First Aid Training https://www.suicidefirstaid.uk/training-programmes/sfa-suicide-first-aid-through-understanding-suicide-intervention/ • Further reading on the Zero suicide policy https://www.england.nhs.uk/blog/david-fearnley/

Module Three: Signposting & Pathways

Suggested pre-course activities:

- Friday @ 4pm – a client is in need of immediate mental health support, research what your options are.
- MECC Link – create the shortcut on your mobile device.
- Look for your local mental health referral pathways
- Complete MECC for Mental Health module three online learning (30-minutes)

Learning Outcomes 5&6	Content	Suggested Activities

LO5: Awareness of local support services, and how to effectively signpost service users to the appropriate service	• How to signpost effectively
	  o e-LforH MECC session 3: signposting
	  o Local resources relevant to the discussion to which people can be signposted.
	
	• An introduction to the concept of Health Literacy, reading and numeracy skills, reading ages, images.
	
	• Why people may not be able to access services?
	
	• Introducing skills/strategies for client centred information giving:
	  o Asking permission
	  o Check Chunk Check
	  o Teach back
	
	• Pre course activity Review - The Friday at 4pm dilemma? "Scan" of the local area for provision / pathways or alternatives such as Hub of Hope, SHOUT, Samaritans
		• What is available in our patch?
		
		• MECC Link.
		
		• Presentation of local information.
		
		• Be a mystery shopper exercise.
		
		• Analysis of health information websites, apps, paper based resources.
		
		• The good the bad and the ugly.
		
		• Case studies to apply appropriate referral options.
		
		• Pair's skills-based activity to use Check Chunk Check and Teach Back strategies.
		
		• Review of signposting standards.

		• Applying the standards to the 'Friday at 4pm dilemma'

LO6: Develop confidence to understand and implement the appropriate signposting pathway	• e-LforH MECC session 3: signposting
	    ○ When and how to signpost a person onto more specialised, tailored or intensive sources of support.
	    ○ Local resources relevant to the discussion to which people can be signposted.
		• Use and practice of local signposting pathways.
		
		• Case studies to apply.
		
		• MECC Link.
		
		• MECC Gateway.
		
		• Hub of Hope app

Module Three e-Learning	• How to signpost effectively.
	
	• How to recognise when more specialist support is needed.
	
	• Strategies:
	    ○ Asking permission
	    ○ Check Chunk Check
	    ○ Teach Back
	
	• Background and rationale for Health Literacy.
	
	• How to use signposting pathways
	
	• Checklist for analysing health resources
		• e-LforH MECC session 3: signposting.
		
		• PHE Local action on health inequalities.
		
		• Improving health literacy to reduce health inequalities.
		
		• HEE Health Literacy 'how to' guide.
		
		• MECC Link.
		
		• Further reading https://www.bradfordvts.co.uk/communication-skills/teach-communication-skills/calgary-cambridge/
		
		• *Skills for Communicating with Patients*, book by Jonathan Silverman

Suggested Delivery Model

All learners will need to register for their course at least 48 hours before the start date. Registration may include completion of a short online form, access to eLearning, as well as pre-course learning activities for each session.

3 x 3 hour sessions over 3 weeks with individuals to identify their own eLearning time.

Week 1	Week 2	Week 3
Module one: • Three hour facilitated session • 30 minutes e-Learning/ pre-session learning in own time	Module two: • Three hour facilitated session • 30 minutes e-Learning/ pre-session learning in own time	Module three: • Three hour facilitated session • 30 minutes e-Learning/ pre-session learning in own time