

Bitesize Case Study: Mentor Toolkit to support Mental Health and Wellbeing

Development and Implementation of a Mentor Toolkit to provide practical guidance for mentors to support students in practice who may be experiencing emotional distress and/or issues relating to their mental wellbeing.

HEE Quality Standards met:

- 1 - Learning Environment and Culture
- 2 - Educational Governance and Leadership
- 5 - Developing and Implementing Curricula and Assessments

What was the issue or problem? What did you set out to do?

Practice Educators recognised that some of the students they were supporting were experiencing emotional distress, or mental ill-health, and may be in need of support. The team set out to create an accessible resource that could practically help practice educators better support these students, empowering both educators and students.

What did you do? What was the intervention or initiative?

The Mental Health Toolkit was an initiative developed as a practical and user friendly resource that helps practice educators when working with students who are experiencing emotional distress and/or mental ill-health and who may be in need of support. The resource's focus was to enable practice educators and mentors to feel more confident in supporting and signposting students appropriately through a challenging time.



It became apparent, following a student experience in placement, that accessible resources were needed within Central Manchester Foundation Trust (CMFT) to help educators supporting learners in relation to mental health and wellbeing. The development of the Toolkit utilises a proactive approach to address this gap and provides assurance that as an organisation, within the context of the Health Education England (HEE) Quality Standards, we are continually looking at innovative ways to ensure our educators feel supported and empowered.

There is a wealth of research to support the need for such a resource: The Royal College of Psychiatrists' Mental Health of Students in Higher Education Report (2011) indicated that as many as 29% of students may experience mental health difficulties at some point during their studies. Deasy et al. (2015) identified that nursing students are among those at highest risk of developing symptoms of psychological distress due to the emotional labour involved.

Additionally, the Nursing & Midwifery Council (NMC) and the Royal College of Nursing (RCN) recognise the potential for students to experience difficulties in their mental health and yet neither agency has provided any guidance for nurses or mentors to support them. The RCN Guidance for mentors of student nurses and midwives (2007) does make reference to students who might experience problems related to their mental health; however, it does not go beyond a statement of the point.

The Toolkit took approximately 12 months from inception of an idea to the launch in October 2016. This was to link with the national campaign of mental health awareness week. It was designed and implemented as a collaborative project between the Practice Education Facilitator and the Specialist Liaison Nurse for Mental Health & Addictions at CMFT. This ensured specialist knowledge and a relevant current evidence based underpinned the work.

The Toolkit needed to be easily accessed, particularly if a distressing situation arose and made available in different formats. A hard copy is in each clinical placement and a link for the electronic version was made available on the CMFT Student Support in Practice Website so that both educator and student can access the resources.

The Toolkit was designed to provide a menu of options with clear signposting of support available for the educator, and resources that may assist the student in distress. The options include: "Having the Conversation" which provides a "how to" element to beginning a conversation for a mentor. This includes structured guidance in a step by step approach in the form of flowcharts enabling educators to have confidence in what they are doing, and allowing them to access the appropriate support at the right time.

In addition, the Toolkit includes a service directory that signposts to agencies and networks that can provide further support and specialist help. There are 'Top Ten Tips for Good Mental Health' offering simple tips to help look after emotional and mental wellbeing and finally simple Mindfulness Exercises.

What were the Key Outcomes?

The Mental Health Toolkit has been rolled out across the organisation. A launch day within a central location in the Trust was organised and social media used to publicise the event including the Twitter campaign #icareforme that generated exceptional engagement across the professions during the day by encouraging people to tweet using the hashtag. The experience was so positive that a second event in the Division of Surgery, #icareformeonsurgery, encouraged staff and students to come up with their own tips for mental health wellbeing. This was facilitated with the support from our Student Quality Ambassador as part of our quality agenda in supporting and developing a Sustainable Workforce.

Following positive responses from both educators and students, our partner universities have asked that this resource be shared as demonstration of good practice which links with the HEE Quality Standard relating to Educational Governance and Leadership. Presentations sharing this initiative have taken place at the University of Manchester and there has been wider interest from other areas of the UK; emerging from professional discussions of the resource via Twitter as a resource of particular use if a student on placement is experiencing an emotional crisis or mental ill-health during late/night shifts or at the weekend, as this is when the usual avenues of support might not be available.

Subsequent auditing of this initiative has demonstrated that 98% of staff questioned (who had knowledge of the resource) found it to be practical and useful. However, knowledge of the Toolkit in all divisions is an area for improvement, as there are gaps of awareness within the wider organisation. This became evident at Divisional Awareness sessions to raise the profile of the Toolkit.

What were the lessons learned?

Lessons learned included an understanding of having a determined but patient spirit. Although the Toolkit was needed quickly, it was a significant piece of work that however tempting it was to implement speedily it would have affected the quality and content of the final Toolkit and ultimately its effectiveness.

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There were also times when the initiative could have lost momentum. On reflection by involving the Mental Health Liaison team right at the start of the process, this would have then minimised the time taken to complete the project.

A questionnaire is being developed to evaluate the effectiveness of the resource and to allow for further development when areas within the Toolkit are identified as needing improvement. This will be shared placement wide. Interestingly (but not surprisingly) there has also been a significant interest in the user-friendly Toolkit being a resource for staff and colleagues to utilise, which is being currently explored.

Auditing the awareness of the Toolkit is an area for on-going development, to ensure that all in the Trust are aware of this resource. This will take place in October 2017, following additional Divisional Awareness sessions with practice education links planned for spring 2017.

References

Deasy, C., Coughlan, B., Pironom, J., Jourdan, D. and Mannix-McNamara, P. (2015) *Psychological distress and coping amongst higher education students: a mixed method enquiry*. PLoS ONE. 9(12) e115193. doi:10.1371/journal.pone.0115193

Royal College of Nursing. (2007) *Guidance for mentors of nursing students and midwives*. [Online] [Accessed on 5th April 2017] https://www2.rcn.org.uk/_data/assets/pdf_file/0008/78677/002797.pdf

Royal College of Psychiatrists. (2011) *Mental health of students in higher education: College report CR166*. Royal College of Psychiatrists. [Online] [Accessed on 5th April 2017] <http://www.rcpsych.ac.uk/files/pdfversion/CR166.pdf>