

CONTINUING PROFESSIONAL DEVELOPMENT PORTFOLIO



**A Route to Enhanced Competence for Primary Care Mental Health Workers
in Relation to People with Mild to Moderate Mental Health Needs**

strategy

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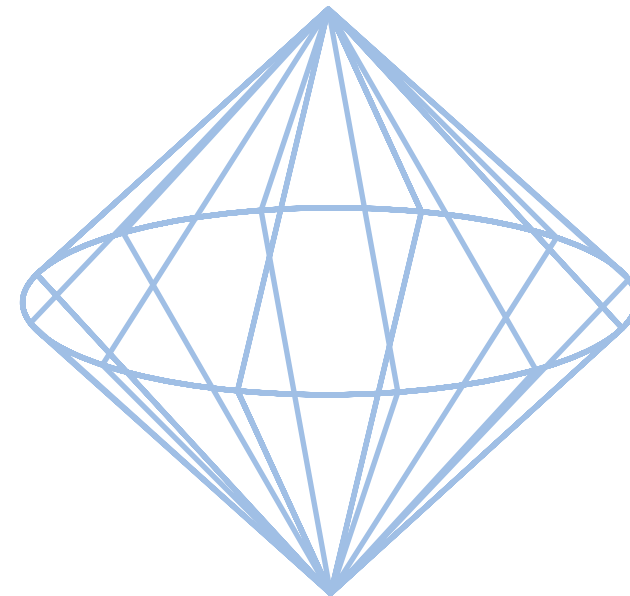
resources

outcomes



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The background of the slide is a light blue technical drawing or blueprint. It features a complex grid of white lines, including straight lines, circles, and arcs. There are also some faint, illegible text and numbers scattered throughout the drawing, which appears to be a technical specification or a set of plans for a mechanical or architectural component. The overall aesthetic is clean, professional, and technical.

**A Route to Enhanced Competence for Primary Care
Mental Health Workers in Relation to People with
Mild to Moderate Mental Health Needs**

Introduction

This framework developed from questions arising in primary care relating to the care and support of individuals with mild to moderate mental health needs, whose first point of contact is with practitioners in health centres, such as GPs, practice nurses, district nurses and health visitors.

The Framework for Mental Health Services (SEHD, 1997) states that 30% of general practice consultations involve individuals with mental health needs. There are long waiting times for referrals to specialist mental health services. Researchers from the Scottish Development Centre for Mental Health identified in a report on access to psychological services, the need for better assessment and referral in primary care (SDC, 2002).

While it is acknowledged that practitioners in primary care come into contact with and provide significant support to this group of clients on a day-to-day basis, they may not be confident about their competence, that is, the knowledge, skills and attitudes which they require to provide effective structured interventions to clients. In addition, practitioners may be unsure what statutory and voluntary services are available locally and how best to access them.

This document presents a framework to guide the development of appropriate roles in primary care. The framework describes the core knowledge, skills and attitudes necessary for the identification and support of individuals with mild to moderate mental health needs in primary care.

This work was guided by a multi-professional steering group. It comprised representatives from major stakeholders in mental health and primary care services: NHS Health Scotland; the Scottish Development Centre for Mental Health; practitioners and managers in primary care; educationalists and colleagues at NHS Education for Scotland.

The Policy Context

There is a very active and growing policy context in relation to both primary care and mental health, for example, the development of community health partnerships (CHPs) the work of the Centre for Change and Innovation (CCI) (www.cci.scot.nhs.uk) and the National Programme for Improving Mental Health and Wellbeing in Scotland (www.wellontheweb.org). The (CCI) has generated a number of projects, not least of which is Doing Well by People with Depression; in taking this forward a number of Primary Care providers have opted to develop roles for Primary Care Mental Health Workers as part of their strategy to enhance effective referral/assessment and interventions to this client group.

The National Programme has launched a range of projects designed to improve mental health and wellbeing in Scotland by raising awareness of people's mental health/wellbeing needs, as well as educating the public and non-mental health professionals about the needs and rights of people who suffer from mental ill health. In particular, the National Programme is supporting the delivery of training in Mental Health First Aid across Scotland. This programme is based on the concept of first aid training to increase people's awareness and understanding of mental health and mental illness (for further information on the programme check the National Programme for Improving Mental Health and Wellbeing in Scotland's website.

In addition, the Scottish Executive is working to involve the public in discussions about the changing pattern of healthcare services. This means seeking the public's views from the earliest stages, defining issues clearly, exploring possible options and examining these in an open way with good evidence. The aim is to develop services in a way which takes account of the aspirations and concerns of patients and communities locally. This applies equally to mental health services as to other sectors of NHSScotland.

Primary Care Mental Health Worker

While the concept of Primary Care Mental Health Workers is widely shared, application of the role (or roles) may follow different models or approaches. Primary Care Mental Health Workers may come from a range of professional disciplines (for example, nursing, psychology, allied health professions, social work) but who have a relevant mental health professional background.

Three main potential roles have been identified for the Primary Care Mental Health Worker. These are:

- Level 1** The role at this level is to provide support and information to patients until they are seen by mental health practitioners.
- Level 2** Primary Care Mental Health Workers employing brief interventions and basic therapeutic skills.
- Level 3** Primary Care Mental Health Workers employing specialist interventions and advanced therapeutic skills.

The choice of role is influenced by the structure of existing or planned service provision as well as the needs of the local population.

Patients seen currently by practitioners operating in a Primary Care Mental Health Worker role tend to be those with mild to moderate mental health problems who do not fall under the remit of community psychiatric nurses (CPNs).

Level 1

District nurses, practice nurses and health visitors, and staff from other professional groups, already carry out mental health care functions in the course of their core activities, for example, active listening during a home visit. To strengthen and complement this activity Primary Care teams require training, perhaps similar to Mental Health First Aid training which is being piloted by the National Programme for Improving Mental Health and Wellbeing. This would enable Primary Care staff to recognise and make greater use of these significant but low visibility skills.

However, given that mental health and well-being may be perceived as difficult to prioritise amongst other demands such as chronic disease management, this role may require a specific worker; for example it may be possible to recruit non-clinicians, similar to the Graduate worker model in England, who might be able to provide a significant support role to clinicians, perhaps developing links with the voluntary sector and detailed information on the range of support services available locally. Alternatively, other primary care workers could take on aspects of the role to act as a focal point for the collection and collation of information on services available locally in the voluntary sector. They may also be involved in helping patients access appropriate self-help information/interventions.

Given, then, that the role at level 1 may be non-clinical and may be addressed within other initiatives, it is not addressed further in this document.

Level 2

The second level role, a Primary Care Mental Health Worker employing brief interventions and basic therapeutic interventions, involves face-to-face time with patients on a sessional basis offering brief interventions of between five and ten sessions. It also involves a teaching support role for other primary care staff, who might identify and refer patients/clients for detailed assessment of their mental health needs.

Level 3

The third role, that of the Primary Care Mental Health worker employing specialist/advanced therapeutic interventions, may be most useful where there are no existing specialist services in Primary Care. Where there is an integrated specialist psychological interventions (PI) team, a worker with basic therapeutic skills might refer on only more complex cases. It may well be that any Primary Care Mental Health Worker with advanced skills could be located within these teams. It may also be the case that the role at level 3 includes strategic and co-ordinating elements.

Key Issues in Implementation

Key issues exist, however, around the support and supervision of any new role, and in managing expectations and workload in relation to them. Primary Care Mental Health Workers should be an adjunct to, not a substitute for, broader based training for all Primary Care staff. Practitioners operating in such a role would require management, clinical and caseload supervision to ensure they are not working in isolation. This is important because:

- ◆ They should be given a caseload appropriate to their skills
- ◆ They should have referral routes to specialist services, the voluntary sector, and other Primary Care staff, depending on the specific needs of individual clients
- ◆ Consideration should be given to career progression.

Additional issues are outlined in Box 1.

Box 1. Implementing the role: issues in practice

- ◆ Clinical risk assessment and management including significant event/critical incident analysis, suicide risk assessment, out of hours and crisis management services, and responsibility for assessing, managing and acting upon perceived risk
- ◆ Adoption of a whole system approach
- ◆ Lines of management, responsibility and accountability
- ◆ Supervision and support from mental health colleagues/services
- ◆ Need to take account of, for example, the Joint Future agenda and joint structures
- ◆ Investment in training of other Primary Care workers
- ◆ Partnerships with voluntary services

Source: Focus Groups and NES Consultation.

The Competency Framework

This framework is a summary of the knowledge and skills which may be required by a mental health worker operating in primary care. The competencies were generated at 3 Regional focus groups, and subject to a consultation process with all key stakeholders in Scotland. Table 1 outlines two possible options in terms of job descriptions using the competency framework to take account of different existing or planned organisational structures. As it is presented here, the items in the list have been ordered by area of competence, but not by perceived degree of priority. This framework assumes an existing and contemporary knowledge of mental health/ill health.

It is underpinned by the core values of:

- ◆ Respect for and understanding of the individual's integrity and right to choice, as influenced by cultural and social values.
- ◆ The Principles underpinning the Mental Health (Care and Treatment) (Scotland) Act 2003.
- ◆ Respect for and understanding of the roles, knowledge and skill of others, both in the statutory and voluntary sectors.
- ◆ Commitment to reflection, appraisal and continuing professional development.

How to get started

This workbook is designed to be completed in association with **A Route to Enhanced Competence (NBS, 2000)**. It continues to utilise the framework of reflecting on past experience and learning in order to record continuous professional development to enhance clinical competence in meeting the needs of people with mild to moderate mental health issues, in primary care. It will help the individual practitioner to identify sources of learning and evidence of good practice which relate to providing high quality care in Primary Care settings in relation to mild to moderate mental health needs.

QACPD Portfolio CD

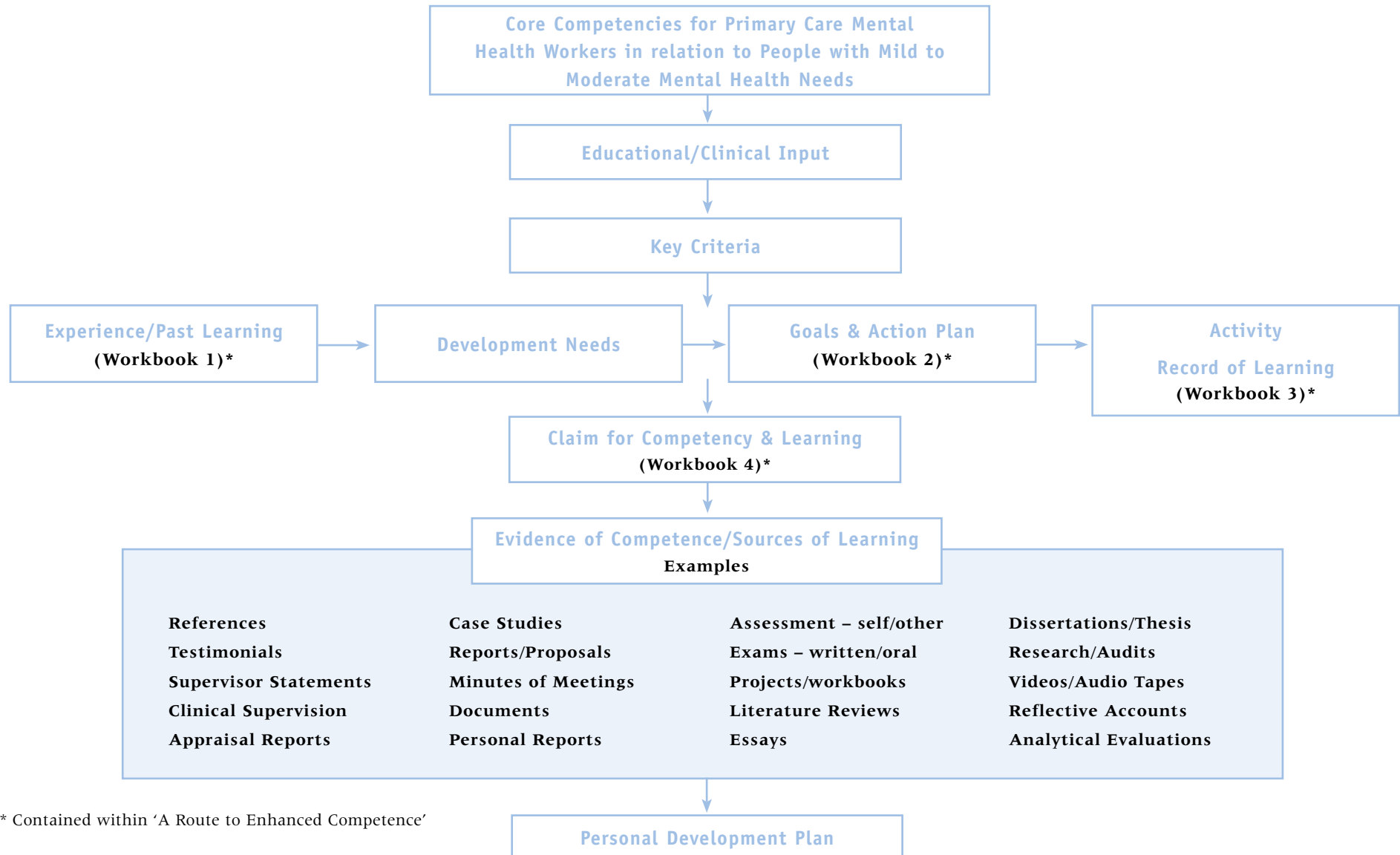
**A copy of the Continuing Professional Development Portfolio,
'A Route to Enhanced Competence for Primary Care Mental Health Workers
in relation to People with Mild to Moderate Mental Health Needs'
document is supplied on the enclosed CD in Acrobat PDF format.
It may be printed out for reference.**

Steps to Building a Portfolio

You may already have a personal professional profile which you may wish to incorporate into this NES portfolio, but you should continue to use the following steps:

- Step 1 Review your experience and practice to date identifying any knowledge and skills you have in relation to caring for people with mild to moderate mental health needs*
- Step 2 Appraise your level of competence and identify strengths and any areas that need to be developed;*
- Step 3 Agree with your senior manager, in-house CPD staff and/or Higher Education Institution a training programme that meets your learning needs;*
- Step 4 Set goals and devise an action plan to achieve the stated competencies in partnership with your named facilitator;*
- Step 5 Provide evidence of competence through your portfolio.*

A Route to Enhanced Competence for Primary Care Mental Health Workers in Relation to People with Mild to Moderate Mental Health Needs



* Contained within 'A Route to Enhanced Competence'

1. Planning and Delivery of Care

Area of Competence	Level 2: Specific Knowledge/Skill	Level 3: Specific Knowledge/Skill
<p>1.1 Assessment</p>	<ul style="list-style-type: none"> • Conducts formal mental health assessment, including the ability to develop a basic diagnostic and psychosocial formulation • Demonstrates and applies a knowledge of risk assessment strategies • Demonstrates and applies triage skills • Demonstrates and applies a knowledge of health and social care agenda and local networks including mental health services and voluntary sector organisations • Demonstrates and applies a knowledge of needs of local community (based on needs assessment) 	<ul style="list-style-type: none"> • Practises develops and evaluates formal mental health assessment strategies, including the ability to identify and tailor interventions to the needs of individual clients • Collaborates on/develops and evaluates risk assessment strategies • Demonstrates and applies triage skills • Demonstrates and applies a knowledge of health and social care agenda and local networks including mental health services and voluntary sector organisations • Demonstrates and applies a knowledge of needs of local community (based on needs assessment)
<p>1.2 Communication Skills</p>	<ul style="list-style-type: none"> • Demonstrates and applies active listening skills • Demonstrates and applies an understanding of the advocacy role • Demonstrates and applies a range of enabling and facilitation skills • Is able to communicate and collaborate effectively in a multi-agency context 	<ul style="list-style-type: none"> • Demonstrates and applies active listening skills • Actively promotes and supports the advocacy role • Demonstrates and applies a high level of enabling and facilitation skills with both patients/clients and staff groups • Is able to communicate and collaborate effectively in a multi-agency context

1. Planning and Delivery of Care (continued)

Area of Competence	Level 2: Specific Knowledge/Skill	Level 3: Specific Knowledge/Skill
1.3 Basic therapeutic skills	<ul style="list-style-type: none"> • Is able to develop rapport and therapeutic alliances with patients • Demonstrates and applies a range of skills in anxiety/depression/ bereavement/stress management; assisted self-help methods (group and individual) • Demonstrates and applies knowledge of a range of cognitive approaches • Demonstrates and applies a range of mental health first aid skills • Demonstrates and applies an understanding of counselling approaches • Demonstrates and applies a sound knowledge base in relation to psychopharmacology: actions, side effects, concordance 	<ul style="list-style-type: none"> • Is able to develop rapport and therapeutic alliances with patients • Demonstrates and applies a range of skills in anxiety/depression/bereavement/stress management; assisted self-help methods (group and individual) • Applies and evaluates a range of cognitive approaches • Demonstrates and applies a range of mental health first aid skills • Demonstrates and applies a range of counselling approaches • Demonstrates and applies a sound knowledge in relation to psychopharmacology: actions, side effects, concordance
1.4 Referral skills	<ul style="list-style-type: none"> • Demonstrates and applies a detailed knowledge of local statutory and voluntary services • Demonstrates and applies an understanding of referral routes to relevant professional/service for further assessment/treatment • Demonstrates knowledge of a range of networking and brokering skills 	<ul style="list-style-type: none"> • Demonstrates and applies a detailed knowledge of local statutory and voluntary services and can assist in ongoing multi-agency evaluation • Refers patients/clients on to relevant professional/ service for further assessment/treatment • Leads development of referral pathways and networks • Applies a range of networking and brokering skills
1.5 Advanced therapeutic skills*	<ul style="list-style-type: none"> • Practises brief interventions. 	<ul style="list-style-type: none"> • Practises brief interventions; CBT and/or other psychosocial interventions; psychotherapies (group and individual)

NB The range of therapeutic interventions would be based on current evidence/needs assessment and/or local models of treatment provision. The post holder should have or be working towards accreditation of skills.

2. Supporting Colleagues

Area of Competence	Level 2: Specific Knowledge/Skill	Level 3: Specific Knowledge/Skill
2.1 Consultancy	<ul style="list-style-type: none">• Is able to offer advice to colleagues, patients and the public on a range of mental health issues	<ul style="list-style-type: none">• Promotes and develops appropriate systems of advice to colleagues, patients and the public on a range of mental health issues
2.2 Education and Training	<ul style="list-style-type: none">• Is able to help others assess their own training needs (training needs analysis)• Is able to support staff undertaking the Mental Health First Aid Kit programme	<ul style="list-style-type: none">• Develops and supports a systematic approach to training needs analysis• Is able to support staff undertaking the Mental Health First Aid Kit programme• Is able to assess, plan, implement and evaluate structured education/training
2.3 Support and supervision	<ul style="list-style-type: none">• Demonstrates support to colleagues, patients and the public in relation to developing their understanding of mental health and well being, and mild to moderate mental health problems• Actively engages in supervision and mentoring	<ul style="list-style-type: none">• Demonstrates support to colleagues, patients and the public in relation to developing their understanding of mental health and well being, and mild to moderate mental health problems• Actively engages in and facilitates supervision and mentoring• Promotes and develops appropriate models of supervision and support

3. Personal/Professional/Service Development

Area of Competence	Level 2: Specific Knowledge/Skill	Level 3: Specific Knowledge/Skill
<p>3.1 Leadership</p>	<ul style="list-style-type: none"> • Demonstrates an understanding of and positive engagement with change management • Demonstrates and applies a knowledge of critical appraisal skills • Applies an understanding of how to manage own and others' expectations of role/service • Demonstrates an understanding of and commitment to patient and public involvement in the planning and development of services • Inspires others to improve/enhance the quality of the service 	<ul style="list-style-type: none"> • Sensitively and effectively applies change management knowledge and skills • Leads ongoing development of services to improve patient care • Leads and actively engages in critical appraisal/evaluation of service developments, and development of programmes of audit and research • Leads the development of the service in a way which manages own and others' expectations • Promotes and collaborates on patient and public involvement in the planning and development of services • Inspires others to improve/enhance the quality of the service
<p>3.2 Personal and Professional development</p>	<ul style="list-style-type: none"> • Actively promotes and applies reflection skills • Demonstrates knowledge of own level of professional accountability and responsibility • Demonstrates a knowledge of standards relating to role • Applies coping skills (ability to deal with the pressures of the role away from the job) • Applies an understanding of significant event/critical incident analysis skills to effect quality enhancement 	<ul style="list-style-type: none"> • Actively promotes and applies reflection skills • Demonstrates knowledge of professional accountability and responsibility, and career progression • Demonstrates knowledge of role development within the context of service development • Applies coping skills (ability to deal with the pressures of the role away from the job) • Applies significant event/critical incident analysis skills to effect quality enhancement

3. Personal/Professional/Service Development (continued)

Area of Competence	Level 2: Specific Knowledge/Skill	Level 3: Specific Knowledge/Skill
3.3 Mental health promotion	<ul style="list-style-type: none">• Has an understanding of consultation on and advocacy for clients/services with other professionals• Is able to raise awareness of mild to moderate mental health issues with patients and the public in a way that promotes mental health and wellbeing• Recognises opportunities for and applies skills in a range of mental health promotion strategies	<ul style="list-style-type: none">• Is proactive in consulting and advocating for clients/services with other professionals/agencies• Establishes creative opportunities to promote mental health and well being, and raise awareness of mild and moderate mental health problems• Develops and influences mental health promotion strategies in relation to mild and moderate mental health issues

Next Steps

It is important to ensure consistency in educational preparation, support and career progression for practitioners. Several agencies and organisations, therefore, have a role to play, including higher education institutions, and professional and regulatory bodies, employers, and government agencies, for example the National Programme for Improving Mental Health and Well-being.

Three key players in this work are NHS Education for Scotland, NHS Health Scotland and the Centre for Change and Innovation. These organisations are currently exploring how appropriate support can be given to Primary Care mental health workers, to enable the service to progress and develop. It is anticipated that a support network for practitioners and managers will be established to aid the development of an integrated and managed approach to mental health in Primary Care.

A number of educational resources are already available from providers such as NHS Health Scotland (see Appendix 3 for further information and contact details). It is also anticipated that additional educational resources will be commissioned at national, regional and local level.

References

Sainsbury Centre for Mental Health (2001) *The Capable Practitioner*. London, SCMH.

Scottish Development Centre for Mental Health (2002). *Identifying the Development Needs of Primary Care Workers caring for People with Mild to Moderate Mental Illness*. Edinburgh, SDC.

Scottish Executive Health Department (1997). *The Framework for Mental Health Services*. Edinburgh, SEHD.

Acknowledgements

To all participants in focus groups, the SDC, NHS Health Scotland, Dr Fiona Lang at the CCI and the Doing Well with Depression team for their support and advice.

Appendix 1

List of Steering Group Members

Mr Ian Murray, Associate Head of Department, Department of Nursing & Midwifery, University of Stirling

Mr John Porter, Nursing Services Manager, Rehabilitation & Care Directorate, Scottish Prison Service

Dr Allyson McCollam, Director, Scottish Development Centre for Mental Health Services

Ms Alana Atkinson, Service Development & Training Manager, Scottish Development Centre for Mental Health Services

Dr Diane Kelly, Assistant Director (CPD), NHS Education for Scotland

Ms Fiona Kemp, Health Visitor, Fife Primary Care NHS Trust

Ms Allison Fannin, Planning & Development Manager – Acting, Dundee LHCC

Ms Kate Danskin, Practice Nurse Advisor, Dundee LHCC

Ms Ann Kerr, Programme Manager – Health Service, NHS Health Scotland

Ms Pauline Craig, Public Health Project Manager, NHS Health Scotland

Ms Emma Hogg, Research Specialist (Mental Health), NHS Health Scotland

Ms Lorraine Dodds, Community Psychiatric Nurse, Community Mental Health Team, Seafield Base, Ayr

Mr Steven Black, External Consultant

Ms Jane Cantrell, Professional Officer, NHS Education for Scotland

Ms Carol Watson, Associate Director Nursing & Midwifery, NHS Education for Scotland

Appendix 2

Responses received in relation to Innovative Projects being undertaken within Primary Care

Health Board/Primary Care	Contact Name	Project Title
Ayrshire & Arran	Catherine Kyle, Consultant Clinical Psychologist	Previously was “National Waiting Times for Psychological Interventions Project” – now is “Implementation of Tiered Model of Psychological Interventions”
	Gail Ramsay, Patient Services Manager	Depression Awareness Training
	Gail Ramsay, Patient Services Manager	Protected Time Training – LHCC East Ayrshire
	Mary Young, CPN	Post Natal Support Group
	Lynne Murray, CPN	Primary Care Referral Screening Pilot
	Janet McCarlie, Primary Care Clinical Governance Office	Primary Care Management of Depression
	Frank Reilly, MHSD Co-ordinator	The Working Together Group: shared database of services
Borders	Karen Grieve, Public Health Nurse	ICP on Post-natal Depression

Appendix 2 (continued)

Responses received in relation to Innovative Projects being undertaken within Primary Care

Health Board/Primary Care	Contact Name	Project Title
Forth Valley	Graham McLaren, Project Manager Theresa McGoldrick, Head of Service, Ruth Salter, Psychologist	Developing a Tiered Model for Psychological Therapies
	Carol Miller, CPN	CPN based in primary care, remit – caring for people with mild to moderate psychological difficulties
	Carole Simpson/Caroline Bunting	Depression Drop-in Clinic – pilot
	Susan Ramsay	Controlling Depression Group
	Neil Rothwell	Mindfulness Group for Patients and NHS Professionals
	Alisdair Gormly	Anger Control Group
	Neil Rothwell	Self Help Literature Distribution for Problem Solving by GPs
	Carole Simpson	Clinical Psychology and Behavioural Psychotherapy Clinics
	Ivor Smith, Behavioural Psychotherapist	Psycho-social interventions in schizophrenia
	Therese McGoldrick, Head of Service, Behavioural Psychotherapy Service Brodie Paterson, Lecturer, University of Stirling	Introduction to the principles and practice of CBT
	Neil Rothwell, Consultant Clinical Psychologist, Royal Scottish National Hospital	Locality Based Controlling Stress Courses
	Carole Simpson, Clinical Psychologist	Alternative model for use of one session weekly of clinical psychologist (funded by MWLHCC)

Appendix 2 (continued)

Responses received in relation to Innovative Projects being undertaken within Primary Care

Health Board/Primary Care	Contact Name	Project Title
Grampian	Gordon Murdoch, Locality Manager	Primary Care Mental Health Worker
	Derek Mcleod-Petrie, Education Facilitator	Enhancing Mental Health Literacy in General Nurses (3 projects)
Greater Glasgow	Colin McCormack, Project Manager	Primary Care Mental Health in Greater Glasgow
Lomond & Argyll	Audrey Galloway	Cowal Stress Management Project
	Audrey Galloway	Dunoon Baby Massage
Highland	Sally Nowell, Clinical Nurse Specialist, Raigmore Hospital	Development of Primary Mental Health Worker Service attached to CAMHS Highland

Appendix 2 (continued)

Responses received in relation to Innovative Projects being undertaken within Primary Care

Health Board/Primary Care	Contact Name	Project Title
Lanarkshire	Veronica Braunton and John Coffey	Anger Management Attendance at Psychiatric Day Hospital
	Yvonne Bronski, Midwifery Janice Longford, PCT	Prenatal mental health guidelines
	Rose Ann Skern, CPN	Nurse led psychiatric assessment clinics
	Margaret Ann Rowley, Senior Charge Nurse	Adult survivors of childhood sexual abuse
	Margaret Ann Rowley, Senior Charge Nurse Liz Lawson, Occupational Therapist	Anxiety disorders
	Liz Troy, Deputy Charge Nurse	Post natal depression group
	Margaret Ann Rowley, Senior Charge Nurse	CBT group
	Margaret Ann Rowley, Senior Charge Nurse	Integrated Care Pathways
	Mary McIntosh, CPN, in collaboration with Dr Sheyahan	Relationship between the Motherwell/Clydesdale resource network services and emergency on-call psychiatric duty doctors at Wishaw General Hospital
	Mary McIntosh, CPN	Clinic default audit
	Mary McIntosh, CPN, in collaboration with Dr Sheyahan	Focused intervention team database
	Sandra McInnes, PHP, Motherwell LHCC Marion Findlay, Senior Charge Nurse, Torrance House	MOT service to clients with severe and enduring mental health problems

Appendix 2 (continued)

Responses received in relation to Innovative Projects being undertaken within Primary Care

Health Board/Primary Care	Contact Name	Project Title
Lanarkshire (Continued)	Marion Findlay, Senior Charge Nurse, Torrance House	Improving access to assertive outreach service
	S Sherry and A McKirdie	Pilot with GPs on integrate care pathway – linked mental health worker
	Margaret Wardrop	Postnatal depression group, antenatal information at parent craft evenings
	Anne McKirdie	Assessment clinic
	Anne McKirdie	Focus intervention database
Renfrewshire & Inverclyde	Katie Stewart, Inverclyde LHCC	Primary Care Mental Health Workers
	Mr A Dickson, Head of Nursing (Mental Health)	CPNs working in primary care
Tayside	Rhona Guild, Project Co-ordinator/Chair	Angus LHCC Personal Medical Services (PMS) Chronic Disease Management
West Lothian	Jean Campbell, Redesign Project Manager	Redesign of Management of Anxiety and Depression
Scottish Prison Service	Kenneth McGeachie, Mental Health Services Co-ordinator	Towards a Standardised Approach to Multidisciplinary Mental Health Team Working
NHS Education for Scotland	Diane Kelly, Assistant Director (CPD)	Mental Health Needs Assessment Tool

Appendix 3

Other Resources

National Programme for Improving Mental Health and Wellbeing

(www.wellontheweb.org) is supporting the Mental Health First Aid Programme and a range of other initiatives.

NHS Education for Scotland has a range of competency frameworks (both generic and mental health specific) which can be accessed through the QACPD website (www.nes.scot.nhs.uk/docs/publications/qacpd/home.html).

NHS Health Scotland (www.hebs.com and www.hebs.com/learningcentre) have a range of existing education/training packages including - Becoming a Trainer, the MHFA Instructor Course, Mental Health Promotion training, Facilitation Skills for Partnership Working, Health Issues in the Community, Psycho-social Interventions in Cardiac Rehab, Health Behaviour Change Training, Leap for Health and Health Promoting Health Service Framework.

NB there are many more NHS Health Scotland publications which could be relevant (both generic and specific to mental health).

Centre for Change and Innovation (www.cci.scot.nhs.uk) Doing Well by People with Depression.

Primary Care Mental Health Education (www.primhe.org/resources)

a 'Resource Pack for promoting mental health, nurturing social inclusion and managing mental health problems in primary care in the UK' and An Implementation Toolkit for Primary Care.

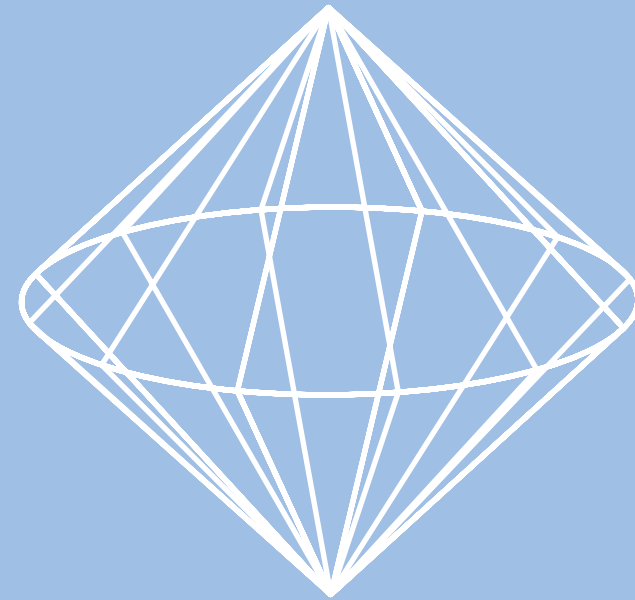
NHS Ayrshire & Arran, Local Guideline and Implementation Pack for Primary Care Management of Depression for the Ayrshire & Arran Health Board area.

A range of resources can be sourced from the following organisations via their websites:

MindOUT	www.mindout.org.uk
The Mental Health Foundation	www.mentalhealth.org.uk
Mentality	www.mentality.org.uk
SAMH	www.samh.org.uk
Depression Alliance	www.show.scot.nhs.uk

www.qacpd.org.uk





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