EMBEDDING SPACES FOR CHANGE

Final Evaluation Report
Part Two
Reflective Evaluation
Centre of Excellence in Interdisciplinary Mental Health
University of Birmingham
for
Higher Education Funding Council for England

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EMBEDDING SPACES FOR CHANGE

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Introduction

“The University’s Centre of Excellence in Interdisciplinary Mental Health contributes greatly to student support. The Centre has developed a range of teaching and learning resources addressing issues of mental health and student well-being on-campus. The audit team identified the University-wide activities of the Centre of Excellence in Interdisciplinary Mental Health in relation to student learning styles, and the well-being agenda, as a feature of good practice.”

The Quality Assurance Agency Institutional Audit of the University of Birmingham (2009) recognised the achievements of the Centre of Excellence in Interdisciplinary Mental Health (CEIMH). This, together with the commitment by the University and the College of Social Sciences to sustain key features of CEIMH’s work beyond October 2010 is evidence of the impact the Centre has made over the past five years.

This reflective evaluation demonstrates how change has been achieved as well as the challenges faced by the Centre. It follows the reporting guidance issued by HEFCE in November 2009 and is structured around the three core areas of CEIMH work:

- Informing policy and practice
- Promoting interdisciplinary mental health teaching and learning
- Embedding e-learning into the curriculum

It forms Part Two of ‘Embedding Spaces for Change’ the final evaluation report for the Centre of Excellence in Interdisciplinary Mental Health (CEIMH), University of Birmingham, prepared for the Higher Education Funding Council for England (HEFCE) as part of the overall evaluation of the Centres for Excellence in Teaching and Learning (CETL) initiative 2005-2010. The report is based on interviews with CEIMH staff, representatives from the University’s Colleges, mental health service user and carer groups as well as external statutory, voluntary and community organisation. The main focus of this report is on the period 2007 to 2010, following the submission of a formative evaluation to HEFCE in 2007.

Part One of the report provides statistical data on CEIMH, supplemented by additional more detailed, information on the Centre’s activities and outputs in the Appendices.

1. Rewarding excellence in teaching and learning

1.1 CEIMH’s commitment to rewarding practice that demonstrates excellent learning outcomes for students is core to the purpose of the CETL initiative as a whole and reflected in the above comments of the Quality Assurance Agency’s 2009 institutional audit of the University of Birmingham.

In working to achieve this goal the Centre has adopted a number of strategies:
• Providing **high quality learning spaces** for both University staff and external agencies. This includes state of the art teaching technologies such as a **live video capture system**, **video recording** and editing facilities.

• Funding innovation in teaching and learning through its **Teaching and Learning Development Fund**. To date CEIMH has supported 86 activities (including projects, support for individuals, and events) both within and beyond the academy (See Section (m) in Part One of this report for a list of ‘spin out’ projects, and Appendix 2 for further details of events held by CEIMH).

• Offering specialist advice, practical support and training for University staff, service users, carers, and representatives from external agencies in the use of new technologies, and supporting the development of skills in delivering **enquiry-based blended learning pedagogies**.

• Facilitating **events** and providing a **web-based platform** for University staff and external agencies to showcase exemplars of innovation in teaching and learning.

1.2 In terms of **enabling practitioners to lead and embed approaches that address the diversity of learners needs**, CEIMH has worked closely with University staff and external agencies at a range of educational levels. This has been underpinned by a commitment to ensure that the existing and new mental health learning opportunities are informed by the perspectives and experiences of mental health service users and carers. Initiatives have included:

• Introductory **User Involvement Training** for service users, and the **Helping Professionals Learn from Carers** programme aimed at carers.

• The **Collaborative Learning Initiative** between the Institute of Applied Social Studies (IASS) and the School of Nursing for social workers and nurses on professional qualifying programmes. Service users and carers made a considerable contribution to the design and delivery of this module.

• Continuing Professional Development with the Interdisciplinary Preceptorship Programme for newly qualified nurses, occupational therapists and physiotherapists.

• IASS (social work programmes) and the School of Psychology (clinical doctorate studies) now routinely involve service users in the process of student/trainee recruitment as well as teaching and assessment, supporting members of the **Suresearch** mental health service user network to deliver interdisciplinary teaching and learning both nationally and internationally (for example, the **International Exchange Project with Rotterdam School of Social Work**).

• The **Interdisciplinary Psychological Mindedness Project** between Birmingham and Solihull Mental Health Foundation Trust (BSMHFT) and **the Inpatient Care Forum** at CEIMH - a project specifically designed to ensure that the voices of service users inform the training and education of those working in inpatient services.

1.3 CEIMH has also **supported practice that encourages deeper understandings of the sector’s way of addressing student learning needs** through a range of external and partnership activities:

• Journal articles, conference and dissemination activity encouraging shared learning on enquiry based learning and promoting clear links between theory and practice in...
interdisciplinary mental health teaching (see Appendix 1a for CEIMH peer-reviewed outputs and Publications for a complete listing of articles and papers.)

- The development of web-based learning resources which are freely available to Higher Education and other learning providers
- Co-organising joint events - such as Showcasing User and Carer Involvement in Education and Practice with Middlesex University CETL, Towards a mental health promoting university: focus on student well-being with Mental Health in Higher Education (mhhe), and CETLs five years on: what have we learnt and what can we share?, co-facilitated with the Social Policy and Social Work subject centre of the Higher Education Academy (SWAP). Events and Events Archive list other dissemination activities
- Providing secondment opportunities for seven staff in the Faculty of Health and Social Care, at the Open University, where “the [CEIMH] emphasis on service user and carer inputs to teaching encouraged us to review our own approaches’ and develop a new distance learning reader in mental well-being.”

1.4 CEIMH has also aimed to develop clusters of excellence that are capable of influencing practice and raise the profile of teaching excellence through embedding service user networks in a range of learning programmes both within the University and external agencies. Key to this has been support for the expansion between 2007-10 of the SureSearch service user network, which now has some 200 members with key activists in this network involved in mental health teaching, learning and research regionally.

Within the University, the Centre has played a critical role in networking the diverse and fragmented community of academics working in mental health and related fields. This has resulted in a more collaborative approach to mental health teaching, publications and proposals for external research funding. See Sections 4 and 8 for further details.

1.5 In terms of collaboration and sharing good practice, CEIMH (as noted in paragraph 1.3) has again operated at a number of levels:

- Academic: the Centre has worked closely with the Open University and Middlesex University CETLs and has undertaken a wide range of dissemination activity (See Sections 8 and 10). This has also included the Centre Director making invited key note addresses at 14 conferences and five national and international seminars as well as undertaking professional mental health teaching duties at the Universities of Helsinki and Tampere, Finland, in 2007 and 2010 respectively (see Appendix 1b). Further, CEIMH has played an active part in a range of Higher Education networks which aim to promote high quality teaching and practice in mental health. These include Mental Health in Higher Education project (mhhe) whose project worker was based at CEIMH from 2006-2009. CEIMH has collaborated with the Higher Education Academy (HEA) Social Policy and Social Work subject centre (SWAP) in a variety of ways including hosting and participating in the delivery of TechTrain, an event which aimed to enable academics to extend the use of technology in teaching and learning at their own institutions (see also 1.3).
• **Professional practice:** CEIMH has also played an active role in embedding user and carer involvement in teaching and assessment in the West Midlands MRC Psychiatry programme and the development of the Interdisciplinary Preceptorship Programme (for Birmingham and Solihull Mental Health Foundation Trust). In addition the Centre has worked closely with network groups in the statutory and voluntary sectors to share learning across practice disciplines

• **Community and voluntary groups:** CEIMH has worked collaboratively with the Federation for Community Development Learning (FCDL), the Deaf Cultural Centre and the Chinese community. These collaborations have resulted, for example, in the *Common Grounds* conference report with FCDL

**The International Service User Research Network**

CEIMH has hosted a series of three international seminars held in 2007, 2008 and 2009 with academics and service users from Georgia, Scotland, Northern Ireland, Finland, Italy, Slovenia, Bosnia, Germany and England.

The aim of this network is to develop close and effective working partnerships between CEIMH, and institutions and groups across Europe who are interested in developing the role of service users in interdisciplinary mental health research. From its beginnings in 2007, when it explored transnational issues of stigma and discrimination, coercion in mental health services, employment, needs assessment and alternatives to current service models, the group has undertaken research projects and created the European Service User Research Network. International publications have already been produced and the Network has a forward work plan and is seeking funding beyond 2010.

• **Internationally:** CEIMH has been involved in collaborative teaching initiatives with a range of European Universities, including Ljubljana (Slovenia), Tampere (Finland), Tbilisi (Georgia) and Parma (Italy). CEIMH-funded work with international service user groups and European
Higher Education staff have resulted in the establishment of the European Service User Research Network.

1.6 CEIMH has not specifically sought to raise student understanding of effectiveness in teaching. Its major focus has been on enabling academics and trainers to develop new skills and opportunities in the delivery of interdisciplinary teaching and learning. In addition, the Centre has taken a broad definition of the term ‘student’. This includes informal learners, such as those taking part in the Suresearch Writers’ Group, and the arts-based Mural Project, as well as those engaged in professional qualifying and post qualifying programmes. Where courses, such as the Interdisciplinary Preceptorship Programme, have been evaluated, participants have commented on the quality of teaching spaces and resources at the Centre and their role in the enhancement of the learning experience.

2. CEIMH Aims and Objectives

2.1. The Centre has adopted a strategic approach to achieving its original aims. This has been evidenced by:

Aim 1 – Enhancing the quality of mental health teaching and learning has involved:

- An annual increase in the number of University and external learning programmes and organisations using Centre facilities. There has been a diversification of groups using Centre resources to include more Mental Health Trusts, voluntary and user lead organisations (see Appendix 3)
- Positive feedback from tutors and participants on the quality of CEIMH teaching space on the enhancement of the learning experience
- Promoting the engagement of service users more widely across health and social care programmes in the University in curriculum development, student recruitment and assessment. (See 1.2 for examples).
- Developing new interdisciplinary teaching resources freely available on CEIMH’s website.

Aim 2 – Providing opportunities for staff progression, development and reward has included:

- The Teaching and Learning Development Fund (TLDF) has been a key mechanism for increasing the number of staff (both within and beyond the University) with the skills and capacity to deliver innovative interdisciplinary teaching and ‘test’ new enquiry-based pedagogies. (See also Section (m) in Part One of this report for a list of ‘spin out’ projects, and Appendix 2 for further details of events held by CEIMH.) Evaluative feedback from those academics and practitioners in receipt of TLDF funding commented, particularly, on the quality of CEIMH ‘hands on’ support and advice and the availability of a ‘safe space’ in which to test new approaches to delivering learning before ‘going live’.
The Collaborative Learning Initiative

CEIMH’s Teaching and Learning Development Fund supported the development and delivery of a collaborative under-graduate module on interdisciplinary mental health between Social Work (Institute of Applied Social Studies) and Nursing students (School of Health Sciences). This initiative was designed over 2007 and delivered in early 2008. Following evaluation (McCabe & Chilton, 2008iii) the redesigned module was offered to a second cohort in 2009. The follow-up module was also evaluated (Moth, 2009iv). The key themes to emerge from the work were:

- User involvement from the early stages of curriculum design, through to delivery and review was resource intensive, but offered a range of perspectives which could contribute to “humanising professional conduct” in qualifying programmes.
- The module moved away from the traditional model of user involvement in teaching – which usually consists of one, short, narrative based input. By working with a core group of user/carer facilitators over an intensive (four day) period, students were able to develop a relationship with the facilitators and gain a greater understanding of mental distress and the barriers to effective interdisciplinary working. In turn, service users/carers gained an insight to the constraints placed on professionals working in mental health service agencies.
- In developing learning across professional disciplines, time to explore both language and theoretical constructs in a safe environment is crucial. Without this students “can retreat into their own comfort zone of professional silos.”

However, the crucial factor in positive outcomes for students was user and carer involvement throughout the module, which both Social Work and Nursing students highlighted in the evaluations as a key factor in changing attitudes and professional practice:

“Carers’ and service users’ input made the knowledge more real and applicable and was a refreshing change from just hearing the information solely from an academic point of view.”

“I feel that having service users and carers involved in our learning was invaluable as this provided me with a greater understanding of how mental distress impacts on the individual and those around them. This cannot be learnt from a book.”

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Developing a network of cross-disciplinary tutors delivering interdisciplinary mental health teaching. There has been a particular focus here on establishing a larger pool of service users, through Suresearch and the MIND facilitated User Involvement Training, to become employed to deliver learning opportunities in mental health at pre-qualifying levels through to continuing professional development both in the University and other settings.

There have been a number of opportunities within CEIMH for academic and administrative staff progression. By the end of the initiative, three staff will have completed (or be nearing completion of) doctoral studies. One will have completed a Foundation Degree programme with a counselling qualification and others have been enabled to advance their academic reputation through publications or gained vocational/practice qualifications – e.g. Apple Final Cut Pro video editor, Apple DVD Studio Pro Developer, Certified Membership of the Association for Learning Technology (CMALT), British Sign Language Level One Certification. New academics and mental health service users have also been enabled to gain confidence and raise their profile through co-presenting at national and international conferences (see Appendix 1a).

These substantive opportunities for personal and professional development are not necessarily linked to financial rewards and progression – as these fall within the remit of University wide employment guidance and procedures. Further, as recent research by the Higher Education Academy and the University of Leicester (2010) has indicated, teaching excellence is less likely to be a systematically applied criterion for staff progression than research activity. This is a key message for CETLs as a movement rather than an issue which applies to CEIMH alone.

Aim 3 – Dissemination and collaboration with the wider Higher Education and mental health community has involved developing collaborative working practice

Within the University this has included cross-College events to promote mental health teaching and learning and co-work with Learning Development (LD) and Academic Practice and Organisational Development (APOD) to co-ordinate training in the use of enquiry-based blended learning and an active CEIMH presence on key Education Enhancement committees and working groups.

The Centre’s programme has been informed by partnership work with service user and carer groups – Suresearch, the Survivors’ History Network, Carers in Partnership and Users in Partnership. As noted (in 1.5 and Section 11) CEIMH at national and international levels has undertaken joint initiatives with Mental Health in Higher Education, the Mental Health Research Initiative Network, Middlesex University, the Open University and a range of European Higher Education institutions as well as the Alzheimer’s Association, Rethink and MIND.

Playing a lead role in the development of the University wellbeing policy

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1 CEIMH has acted as a host body for both Carers in Partnership and Users in Partnership as they work towards independent status.
• The CEIMH website has been the key vehicle for disseminating good practice and exemplars of innovation in teaching and learning alongside a diverse range of conference and related activity within the UK and beyond.

2.2 The richly diverse range of activities CEIMH has developed have been underpinned by the central principles of embedding both service user knowledge and innovative pedagogies in mental health teaching and learning.

3. Emerging CEIMH Objectives

3.1 New objectives have not emerged over the life of CEIMH. Rather the initial objectives outlined in Section 2 have been refined to ensure that CEIMH’s diverse activities retained a central coherence (see 2.2) through:

• Promoting the service user and carer body of knowledge to inform mental health teaching and learning in HE and related professional training settings
• Embedding technology in teaching and learning methodologies in the field
• Developing positive policy and practice within Higher Education on staff and student mental wellbeing.

3.2 One work stream which has emerged, and is part of the CEIMH succession strategy, is undertaking commissioned research where this has a direct relevance to the Centre’s objectives. Over 2008-2009, this involved supporting a successful research proposal to the Judith Trust, reviewing the West Midlands Strategic Health Authority Multi-Disciplinary Learning Programme (Littlechild et al., 2008vi), undertaking an older persons’ service user consultation on social care provision, evaluating community-based approaches to promoting mental health and wellbeing (Davis et al., 2009vii) and undertaking a health and mental health needs assessment to inform Sandwell’s sexual violence strategy (Garry et al., 2010viii). These projects have been undertaken in partnership with the Institute of Applied Social Studies, School of Psychology and the Business School University of Birmingham and Merida Associates.

4. The key achievements and benefits of CEIMH

4.1 The key achievements of CEIMH are closely allied to its core and emerging objectives outlined in Sections 2 and 3 of this report. In terms of enhancing the quality of mental health teaching within the University (Objective 1) the Centre provided high quality, technologically embedded spaces for learning and promoted new opportunities for students at a range of levels.
The Achievements and Benefits of CEIMH: University Management Perspectives

“As the Quality Assurance Agency’s 2009 audit of the University highlighted, the Centre has been crucial in promoting excellence in interdisciplinary mental health learning and teaching. This innovation has had an evident impact within the University as well as externally in mental health services.

The Centre has also played a key part in developing creative and collaborative approaches to designing learning and teaching across the University, and provides a purpose built high quality modern space for teaching which I have found particularly impressive in its ability to integrate technology with open and welcoming space.” (Vice Chancellor: University of Birmingham)

“The main outputs and benefits of CEIMH are concordant with my job here in the University, which is teaching and learning. I have seen a major impact not just in the way mental health teaching has progressed…but actually the exemplars which (CEIMH) has optimized and perfected are now being rolled out much more widely across the campus and we expect that this will continue.” (Pro-Vice Chancellor: Teaching, Learning and Quality: University of Birmingham)

“For me, a major benefit has been the work CEIMH has undertaken to ensure that mental health service user and carer perspectives are embedded into our social work programmes. What is innovative here is that involvement is at every stage of the curriculum, from recruitment through to teaching and the assessment of practice.” (Head: School of Social Policy)

4.2 Major gains in mental health related programmes which have been funded, facilitated and often hosted by CEIMH include:

- An interdisciplinary mental health module for final year Nursing and Social Work students (the Collaborative Learning Initiative) - CEIMH contributed to the development of this enquiry-based blended learning module, facilitated service user and carer input and created video teaching materials. From 2010 Clinical Psychology trainees have also attended parts of this module and the regional MRC psychiatry programme are planning to take part.
- A Masters programme in Mental Health and Deafness within the Institute of Applied Social Studies
- Department of Health funded Improving Access to Psychological Therapies training programme for the West Midlands won for the University through a joint bid by the School of Psychology and CEIMH
- An Interdisciplinary Preceptorship Programme supporting mental health staff through the transition from student to qualified practitioner for nurses, occupational therapists and physiotherapists. This is funded by the Birmingham and Solihull Mental Health Foundation Trust and has been developed and delivered by CEIMH.
4.3 In terms of opportunities for personal and professional development (Objective 2), The Centre has:

- Facilitated innovation in teaching and learning – and presented staff both within and beyond the academy with career development opportunities - through 47 ‘spin out’ projects funded by the Teaching and Learning Development Fund and 61 related events
- Supported staff to achieve to date 39 peer reviewed outputs and other publications
- Enabled Centre staff to gain higher level academic and vocational qualifications (see paragraph 2.2)

Further information on staff and professional development is available in Section 2.2 of this report.

4.4 With regard to dissemination and collaboration, CEIMH has hosted and/or facilitated 61 events, conferences and seminars and staff have some 27 peer reviewed conference presentations as a key outcome. Further dissemination activity is planned for 2010 – along with additional journal outputs (see Appendix 1a for full details to date).

4.5 In addition the Centre has developed a website with resources which are both freely available and provide teaching and learning materials which can be used in a range of Higher Education settings and disciplines. CEIMH has also been pro-active with partner network agencies in Higher Education to disseminate learning about models of interdisciplinary mental health more widely.
For details of these outputs see Part One: Statistical Information and the Appendices.

4.6 In terms its refined objectives, CEIMH has also, at a policy level, made a substantial contribution to the University’s mental health and wellbeing policy for students and staff. This has been recognised by the Quality Assurance Agency (2009) as a major benefit to institutional development and integrated working (See Section 1).

4.7 For staff involved in delivering CEIMH’s programme, the major achievement has been to make a substantive contribution to moving mental wellbeing and interdisciplinary approaches to mental health learning from the margins to the mainstream in policy, practice and educational development. This impact has been felt at three levels: within the academic sector, within the University and its teaching programmes and for individuals.

The Achievements and Benefits of CEIMH: Individual Perspectives

“[I have] a greater awareness of other disciplines’ perspectives.” (Physiotherapist)

“[I have] increased awareness of each other’s roles and responsibilities [and] different perspectives to service user care.” (Occupational Therapist)

“I have developed new knowledge about therapies, procedures and policies and have been inspired to undertake further reading.” (Nurse)

“It was useful to hear from service users - their experiences.” (Nurse)

Service user perspectives

“All of the opportunities at the CEIMH fortify the stages of recovery, especially hope.”

“Before CEIMH it was really difficult for me to get out of the house, never mind doing anything else. Now I’m thinking what we can do, what we can learn. It’s wonderful. It’s completely changed my whole life around.”

“It [CEIMH] gave me the courage to be self employed […] and gave me fabulous training to become truly engaged with the world again”

“I don’t think I would have got my degree without the Centre, so thank you very much.”

5. The key disappointments faced by CEIMH

5.1 There have been three key disappointments as CEIMH has developed. Substantial time, energy and resource were committed to developing an Interdisciplinary Masters Programme in Mental Health. Whilst an outline curriculum and assessment methods were developed, it proved impossible to progress this initiative due to the over-riding drivers of specific competency-based content in health-related professional education programmes and the requirements of professional
accrediting bodies and demand from (statutory) employers for skills in particular areas. Surmounting the differing professional perspectives on occupation-specific competencies represented the core barrier to implementing such a post-graduate interdisciplinary qualification.

5.2 Secondly, as the University has restructured, a number of vocational programmes that existed at the Centre’s inception (such as Masters programmes in Counselling and Solution Focussed Brief Therapy, and the HE Diploma in Intergrative Counselling) were transferred to other Higher Education institutions in the city (See Appendix 4 for further details). In addition, cuts in external agencies’ training budgets have resulted in the loss of some programmes (e.g. Tidal model) whilst others which have been in the advanced stages of development were unable to secure funding for delivery.

5.3 CEIMH’s website has been recognised as a unique resource in interdisciplinary mental health. However, use of the site has built more slowly than the team anticipated. Between 2007 and 2009, annual visits rose from 25,566 visits to 40,509. The Centre’s marketing strategy used newsletters and e-bulletins to promote awareness and access to the site, but usage figures for the final period of 2009 remain constant at just under 2,000 per month and the challenge remains to increase uptake over 2010. Full statistics on CEIMH web usage are available in Appendix 5 and a further discussion of the issue of promoting web resources is addressed in paragraph 6.6.

6. Communicating the CEIMH Message

“In terms of the programme, and following some of our informants, we wonder whether the main dissemination issue is one of coherence, of having agreed – or at least, clear – messages about the CETL programme as a whole, its trajectory, its relationships with other projects and organisations, and the interplay between the programme, individual CETLs and the self-organising CETL networks.”

6.1 A number of factors have both helped and hindered the initial development of CEIMH, delivering the Centre’s work programme and “getting its messages across.” The formative evaluation of the CETL programme noted the apparent confusion around, or at least complexity, of the CETL message. This has not been an issue for CEIMH as its focus has been on interdisciplinary learning in mental health.

6.2 The key barriers encountered (beyond the challenges of designing the teaching and learning spaces and spending initial HEFCE capital investment appropriately and on time2) have often related to rapidly changing external environments and issues that are beyond the direct control of the Centre.

6.3 For example, feedback on the role of the Teaching and Learning Development Fund (TLDF) in supporting the development of innovatory and new interdisciplinary learning initiatives has been

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2 Issues related to initial capital spend have been addressed in full in the first evaluation report to HEFCE: Creating Spaces for Change, 2007
positive. However, academic staff interviewed identified substantial barriers to CEIMH’s more ambitious mental health programme development plans:

“Multi-professional programmes are difficult – especially at a qualifying level. There is the sheer pressure of student numbers. Practical difficulties in finding adequate space and time in an already crowded curriculum. Then there are the requirements of the [professional] endorsing bodies which have very specific requirements and competencies which do not always lend themselves to joint learning. So I would say in terms of multi-professional CEIMH has had limited impact. Where it is making a difference is in interdisciplinary teaching. Service users are much more evident in the curriculum now – more so even than just a couple of years ago.” (Birmingham University Academic)

6.4 As noted in paragraph 5.2, not all the TLDF projects were seen through to completion. At one level, given the goal of the fund to promote and test innovation, this was inevitable. However, in evaluation questionnaires sent to recipients of TLDF funding an external stakeholder noted the “vulnerability of all projects to wide systemic and institutional factors and to NHS politics, change in management and other issues … can cut across or even undermine the viability of any project and the good work people do”. Workload pressures, changing policy agendas and budget reductions in externally funded programmes therefore meant that innovation in teaching and learning stimulated by CEIMH did not enter mainstream practice (e.g. Tidal model).

6.5 The Centre’s goal of promoting innovation and internal workload pressures have also played a part in the difficulties of conveying the CEIMH message to a wider audience. The interim evaluation report to HEFCE (2007) and subsequent review (2008) noted that the Centre’s particular strengths were in encouraging innovative ideas and providing the skills and support (over and above financial assistance) to bring these to fruition. Examples include the development of a pool of academics and external trainers able to use digital storytelling techniques to enhance learning.

6.6 However, the issues that constant innovation and development work have highlighted in terms of conveying the Centre’s message include:

- Insufficient time/resource was dedicated, particularly during the Centre’s early phases, to building and then maintaining a comprehensive database of academic and practitioner contacts with a particular interest in mental health teaching and learning. Whilst CEIMH did subsequently develop a marketing strategy with regular e-bulletins and briefings, the reach of these has been limited and segmenting the existing contact database to target marketing materials to specific, tailored, audiences has proved problematic
- Time has been allocated to creating high quality on-line materials. However the capacity to track the use of these free resources (other than the number/location of users) has meant there is no systematic means of identifying (other than feedback received directly from academics/trainers) whether the CEIMH website is being accessed by individuals or by institutions who are then employing them in teaching and learning settings
The Centre has been, and remains, reluctant to ‘close’ projects. Rather than seeing particular initiatives as having a finite life, CEIMH has sought to ‘spin out’ initiatives into further/new ventures. At one level this is a strength – at another it has resulted in a lack of consolidation and closure in areas of Centre activities.

CEIMH’s values and beliefs have also been a barrier on occasion. Marketing has been a tool for dissemination but, as one member of staff commented “I think we do good work. But we don’t sell that. We don’t blow our own trumpet because that’s embarrassing.”

6.7 This approach, conversely, has been a key strength of the Centre. Rather than ‘doing’, it has enabled others ‘to do’. This enabling culture is reflected in feedback from academics, practitioners, service users and carers (See Section 4):

“CEIMH has not preached interdisciplinary approaches to mental health practice and learning. The Centre has provided a model of how it works which is much more powerful.”

(External Academic)

Across these groupings one central theme emerges. That CEIMH provided a safe space to reflect, learn and develop confidence before adopting innovative methodologies into their teaching, learning and related activities. This has contributed to the Centre’s ability to enable others to embed CEIMH concepts, ideas and values in their own practice. For service users, the Centre has been important as a sanctuary or asylum (in the true sense of the word):

“All of the opportunities at the CEIMH fortify the stages of recovery, especially hope….I’ve seen others go on to do teaching sessions. The Centre is a tool for people’s recovery, it is integral”

6.8 Building this culture of facilitating personal and inter-group change has, in the views of service users, academics and practitioners, been facilitated by:

- The skills mix of CEIMH staff which draws together those with backgrounds in the service user movement, professional practice in social work, nursing, adult education, community development and the application of new learning technologies
- A continuity in the staff team over five years has also allowed for the building of strong interpersonal relationships and networks which can be sustained, though in different settings and configurations, beyond current HEFCE funding.

6.9 Through this approach to individual and group development, CEIMH has built clusters of activity, undertaken by others, in both academic and practice settings that can – and will continue to – embed the centre’s model of interdisciplinary mental health teaching and learning (see paragraph 11.2)

6.10 Finally, the reflective approach taken to the evaluation (See paragraph 7.6) has enabled the Centre to refocus its activities over the final months. During 2010, therefore, core activity will be on disseminating the messages from the Centre’s work through a series of conference presentations and articles in academic and practitioner journals.
CEIMH has gained valuable experience in supporting project partners in the creation of enquiry-based blended learning designs. Through its developmental work on the Collaborative Learning Initiative (supporting the creation and design of an interdisciplinary module for nursing and social work students) and its work with the School of Psychology in developing a teaching DVD exemplifying the range of psychological therapies available, it became clear that greater emphasis needed to be placed on incorporating technology into an overall learning design. The purpose of the DIBL event was to disseminate this learning across the University, offering participants the opportunity to learn how to create enquiry-based blended learning designs pertinent to their own areas of work.

CEIMH aimed to provide academics with the tools and concepts that underpin and inform the integration of technology within the teaching and learning environment, thus enabling the enhancement of the student learning experience through the appropriate use of technology. This meant going beyond teaching academics how to use a range of technologies but also involved their active engagement in thinking through the relevance of using such technologies in relation to their own teaching, harnessing the communication potential of technology to facilitate the flexible contribution and collaboration between service users, carers, students and academics.

CEIMH undertook a fundamental role in bringing together segments of the University responsible for e-based educational enhancement. As a consequence of this event, plans are currently underway to develop a Community of Practice within the institution. The aim is to create similar events to provide staff with opportunities for continuing professional development.
7. **Theories Underpinning CEIMH’s Work**

7.1 The development of CEIMH has been informed by specific learning theories and methodologies. These have been placed within a wider framework for, and approaches to, mental health and wellbeing.

7.2 The Centre’s teaching and learning development has been guided by adult learning theory informed by the work of Knowles (1984)\(^\text{xi}\) and Kolb (1984\(^\text{xii}\)). Knowles andragogy system locates the adult learner alongside the educator in a collaborative relationship, acknowledging the learners needs for self direction, their experience, their readiness to learn, the orientation or relevance of the learning and the motivation of the learner (Knowles, 1984). These dimensions, in conjunction with the process of experiential learning (Kolb, 1984), are particularly significant within health and social care education and training where the need to apply theory to practice is paramount. \(^\text{xiii}\)

7.3 Within this overarching theoretical framework, CEIMH has taken a lead in developing enquiry-based blended learning models and resources. A constructivist theory of learning (Mayes & De Freitas, 2006\(^\text{xiv}\); Prosser & Trigwell, 1999\(^\text{xv}\); Vygotsky & Cole, 1978\(^\text{xvi}\)) has been the main influence on the pedagogic approach to developing interdisciplinary mental health learning and teaching opportunities. To overcome some of the barriers of time and space that have prevented mental health disciplines from learning together in the past, the Centre has employed the Community of Enquiry Framework (Garrison & Anderson, 2003\(^\text{xvii}\); Garrison & Vaughan, 2008\(^\text{xviii}\)) to guide development of flexible blended learning designs. To ensure this approach would provide students with opportunities to experience and develop the skills required for interdisciplinary practice, enquiry-based learning (Hammick et al., 2007\(^\text{xix}\)) has been at the core of the development and delivery of CEIMH’s blended learning designs.

7.4 As a result of these theoretical underpinnings, much of the Centre’s contribution to teaching and learning has been to promote dialogue between academics, practitioners and service users on their different approaches to, and understandings of, mental distress – rather than imposing a single overarching theoretical framework. It has done this mindful of the social and wellbeing model of mental distress\(^\text{xx}\) and, through the ‘Conversations with’ series of seminars and other activities, consciously attempted to construct meaningful dialogue between this framework for understanding and the currently more dominant medical model of mental illness.

7.5 In terms of the evaluation of CEIMH, a ‘Theories of Change’ (ToC) \(^\text{xxi}\) approach has been adopted. This asks three core evaluative questions:

- What is the situation that needs to change?
- How are we going to change it?
- How do we know things are changing?
Throughout the life of the Centre, this has involved staff and external stakeholders meeting on a regular basis and reflecting on the changing context CEIMH has evolved in, the rationale for its activities and the Centre’s goals and impact. For further details of the Centre’s ToC model see the CEIMH Evaluation Framework.

8. **CEIMH: Key Messages and Learning**

8.1 **What, then, are the important messages from CEIMH’s work over the past five years?**

Perhaps the most important is the value of creating safe spaces in which to learn, innovate and develop. This, as previous evaluation reports have noted, has not simply been a matter of capital investment in technologically enhanced teaching and learning facilities. Rather, it has involved creating space in terms of time, a supportive environment in which to learn and personal/professional confidence building.
8.2 Three key themes from across evaluation interviews, whether with academics, representatives from external practitioner and training agencies or service users and carers have been:

- **Time: to experiment, build confidence and develop new skills**

  “I have been allowed to learn at my own pace.” (Student interview)

  “The Teaching and Learning Fund (TDLF) bought me out of a pressured teaching environment. In that (setting) I was not going to try new teaching methods with large groups of students and risking looking foolish. Here (CEIMH) I was able to try technology out, get it wrong and practice till I had the confidence to use the technology in front of students.” (Academic interview)

- **Accessible support: ‘hands on’ learning**

  “I will be learning about web design. I do a lot of things on my own, but we have an expert here who can help you out with learning things like that.” (Service User interview)

  “I came with an idea (for the Teaching and Learning Development Fund)...but after lengthy discussions (with CEIMH) I gradually refined and developed that idea, so the project changes but the end product is substantially better as a result.” (Academic Interview)

- **Opportunities for dialogue to develop interdisciplinary theory and practice**

  Teaching and learning in mental health involves a wide range of competing perspectives and meaningful opportunities for dialogue between disciplines are relatively rare:

  “I think [CEIMH] has really empowered mental health service users to have a voice. It’s really been a focal point for people to come together and share their ideas and promote positive practice and progressive ways of bringing about change. I think it has been a catalyst for change in many ways. It’s been quite a radical force in the world of mental health.” (Practitioner Interview)

8.3 Linked to this key message of creating space for innovation has been learning about what works in introducing e-learning methodologies. The Centre’s approach has been to enable academics and trainers to meld content, presentation of pedagogic theory and practice by concentrating on learning designs that encourage active learner involvement. CEIMH’s project work experiences helped inform the development of institution-wide events such as Designing for Inquiry-based Blended Learning (DIBL), which encouraged academics to explore technology-enhanced learning design from the learner’s perspective. This has been part of a conscious strategy to overcome some of the resistance that can be encountered in implementing e-assisted learning strategies in Higher Education where changing approaches to learning and the use of new technologies can be seen as an additional burden rather than a resource for enhancing the student experience:

  “It’s a slow process...academics talk about podcasts and the like...but there seems to be a reluctance to embrace e-learning opportunities in some quarters [...] [CEIMH] has been really useful in giving us
exemplars...we can then show these to academics, show them what is possible and hopefully convert them” (University Staff Interview)

8.4 CEIMH has, therefore, spent considerable time with individuals, groups of academics and practitioner trainers to develop their technological skills. However, a key learning point for the Centre in the last two years is that this level of working needs to be placed within a clear – and supportive – strategic environment if the adoption of technology in teaching and its innovative use is to be fostered across the institution and in other Higher Education settings. This work is being rolled out:

- Nationally, with the Centre now involved in the Social Care Institute of Excellence (SCIE) eLearning Materials Advisory Group (SELMAG)
- Internationally, with colleagues in other British HE institutions:

“I (names University) used the DIBL resources in a workshop with representatives from these (European) Universities who are involved in curriculum development for this new programme (Masters in European Social Work). The participants, for whom English was an additional language, found the materials accessible and engaging ... Your (CEIMH) materials have now had exposure in Spain, Germany, Netherlands, Finland, Bulgaria and Lithuania! ... I’d like to encourage you to disseminate the existence of this material more widely as there is little material that explores both the ‘why’ and the ‘how’ of blended learning within a clear pedagogic framework.”
(Senior Social Work Lecturer: UK University)

8.5 A similar message applies specifically to mental health within the academy. The Centre has devoted considerable time to supporting individual students, independent service user and carer groups and academics. At one level this has facilitated the building of ‘clusters of excellence’ (See paragraph 2.2) although these can feel dissipated and fragmented. It is CEIMH’s contribution to developing the University’s student and staff wellbeing that has ‘made mental health visible’ across the institution.

8.6 Again in terms of mental health teaching and learning, the Centre has demonstrated – through, for example, the Collaborative Learning Initiate (see paragraph 1.2) the value of fully integrating service user and carer perspectives into teaching and learning. Students on a range of programmes (including those on the Preceptorship Programme) have commented on the extent to which this has enriched their learning and informed their practice. What has been learned is that service user knowledge is integral to the promotion and delivery of effective interdisciplinary teaching in Higher Education. This may have long term benefits both in terms of the quality of outcomes for service users and for service delivery. However, the resource implications of “involving service users at each stage of the curriculum should not be underestimated rather than ‘wheeling them in’ for the occasional session. In the current (economic) climate there is a real risk that long term gains will be sacrificed because of short term costs.” (Academic Interview)

8.7 A final lesson from the work of CEIMH is the importance of networking. The University of Birmingham and other academic institutions are going through a period of rapid change. Changes in
organisational structures and personnel can make implementing and sustaining change problematic. However, the evidence at this stage, from the experience of the Centre is that investing in network development is a powerful tool for embedding change within and beyond the institution.

**CEIMH: Key Lessons and Messages: Summary**

“Stimulating change in large institutions takes time. Embedding change takes even longer.”

(University Staff Interview)

Strategic directives on innovation and change in teaching and learning need to be supported by practical and accessible advice, training and guidance – and vice versa.

Creating safe spaces for reflection, personal and group development and dialogue are crucial for implementing effective innovation and interdisciplinary teaching and learning.

At times of rapid institutional change, networking is a useful tool for developing and sustaining clusters of excellence across academic disciplines.

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9. **CEIMH as part of a wider Centres for Excellence in Teaching and Learning Movement**

“There is evidence that senior managers and the CETL teams themselves might appreciate a more central strategy associated with cross-CETL themes, external visibility and wider dissemination.”

9.1 CEIMH has played a limited role in the wider networks of Centres of Excellence in Teaching and Learning (CETL). In the early stages of the programme’s development, staff were active in the CETL Internal Pedagogic Research and Evaluation Network (IPREN) - both attending network meetings and contributing occasional short papers. CETL-IPREN has fallen into abeyance over the last two years and CEIMH has not been active in sustaining contacts established over 2007-8.

9.2 The major contact with other CETLs has, therefore, been predominantly with those with a shared focus on mental health. This has involved the joint organising and hosting of events with Middlesex University, supporting a secondment from the Open University and co-hosting a workshop with the HEA Social Work and Social Policy Subject Centre for seven CETLs and three Subject Centres involved with Health and Social Care education. Further details of these activities and links are provided in Section 4.

9.3 CEIMH has co-operated with other CETLs focusing on pedagogic methodologies and innovation in teaching and learning techniques. For example, the tools created by the Reusable Learning Objects CETL (Cambridge, Nottingham and London Metropolitan Universities) provided an impetus for the creation of the DIBL resources. The techniques for digital story development have been adopted by Middlesex and Coventry CETLs. Contributions to the University of Hertfordshire CETL’s annual Blended Learning Conferences has enabled dissemination of CEIMH techniques and resulted in 2009 with a digital story poster presentation by Centre staff being awarded first prize.
9.4 This limited inter-connectedness with other CETLs has in part been an issue of capacity, with the Centre focusing on affecting change within the host institution and the wider academic and practitioner communities engaged in teaching and learning around mental health. It also reflects the diversity of CETLs and, in operational terms, their tendency to cluster around particular themes and interests – rather than coming together as a movement within and across Higher Education.

10. Transferring the learning from CEIMH

10.1 Over the past two years, CEIMH has struggled with the remit of, and desire to, continue innovation whilst embedding and disseminating learning within the University and beyond. Transferring the Centre’s messages to other academic disciplines, practitioners and the wider service user and carer networks has involved the adoption of a range of strategies.

10.2 Much of the discussion on transferability and impact is already covered in Sections 4, 6 and 8 of this report. However in summary:

- The CEIMH website provides a wide range of mental health teaching and learning materials which can be used across Higher Education programmes and in practice settings. This will continue to be a resource beyond current funding. Further, the website includes a range of exemplars (e.g. digital stories) and introductions to new technologies (e.g. lecture capture) which can be adapted to other academic disciplines and settings.

- The Centre has supported the development, through Suresearch, of a network of service users who are now active in delivering interdisciplinary mental health teaching in a range of Higher Education and related professional settings, thereby transferring the interdisciplinary models established at the University of Birmingham to the wider academy.

- The University’s mental health and wellbeing guidance, which CEIMH has driven, is innovative in that it addresses staff as well as student mental health. The approach adopted for developing this guidance and its subsequent implementation (over 2010) provides a model for other educational institutions, one which mhhe has adopted.

10.3 The personnel arrangements adopted to deliver the Centre’s objectives may also be useful learning for others – particularly in the development of relatively short-life, externally funded, initiatives. CETLs have taken different approaches to staffing – from employing new recruits on temporary contracts through to adding CETL roles to existing staff job descriptions on a fractional basis. Wherever possible, CEIMH has drawn together a team of existing staff on full-time or substantive part-time contracts and enabled them to dedicate that time to Centre development and programme delivery. This has had a particular added value in that CEIMH was able to:

- Build on the pre-established reputations and networks of key academics
- Establish a uniquely independent presence from which to work across Colleges
- Allow time for the professional development – and therefore motivation – of all staff
Focus on the delivery of core business, rather than staff having to adopt multiple roles and address conflicting/external demands on their time.

Building continuity into the Centre – from inception to succession - is, therefore, a critical message in managing ring-fenced, initiative specific/time limited, funding initiatives if innovation and learning are to be embedded in practice.

**Digital Stories**

CEIMH has worked alongside service users, practitioners and academics to support the development, production and use of digital stories. CEIMH views digital stories as an innovative way of strengthening service user voice within mental health teaching and learning.

CEIMH’s website hosts a number of exemplar digital stories that have been developed with service users on a range of projects. These are currently being used within undergraduate, postgraduate and post-qualifying health and social care programmes, both within the University of Birmingham and by other higher education institutions.

Through running a series of workshops with practitioner educators from the Birmingham and Solihull Mental Health Foundation Trust, CEIMH has provided Trust staff with the initial impetus and skills to develop digital stories with the practitioners and service users with whom they work. CEIMH has similarly contributed to the continuing staff development programme of the Mental Health and Social Work CETL at Middlesex University, seeding the development and use of digital stories within their teaching and learning environment. Workshops held at the Showcasing Service User and Carer Involvement events have also succeeded in promoting digital stories as a method for ensuring that the service user voice is embedded within mental health curriculum design.

- **Older People’s Experience of Mental Health Services**
  Older adult service users share their experience of mental health difficulties and their journey towards recovery.

- **Experiences of Inpatient Care**
  Service users’ experiences of inpatient care.

- **A mother’s emotional journey (Autism)**
  A mother tells of her struggle to accept her daughter’s diagnosis as severely autistic and describes the support she feels she needs to adjust and cope with her daughter’s level of disability.

- **Relapse Prevention**
  Two service users created these stories as part of their Relapse Prevention Plan.

- **Impact of Medication Project**
  Service users’ experiences of taking medication.
10.4 Other important aspects of learning which are transferrable include:

- The creation of safe spaces in which to allow academics, practitioners and service users to innovate and test pedagogic methodologies and technology before rolling new approaches out into teaching (See paragraph 8.2)
- Delivering hands on/practical support is crucial to building the confidence to deliver innovation at an individual level and is central to Higher Education establishments implementing institution wide e-learning strategies (See paragraph 8.2)
- Integrating the pedagogic expertise of academics with e-assisted learning technologies can overcome the traditional divide between teaching and new technology based approaches. Hands on support, training and advice are crucial tools to overcoming resistance to innovation and implementing e-enhanced learning opportunities.
- Investing time in developing the skills of service users to contribute to Higher Education programmes enhances the quality of the student experience and can influence practice outcomes. However, it is crucial given the resource implications of the models developed through CEIMH, that there is an institutional commitment to providing an appropriate level of resource to ensure that enhanced engagement in HE is sustainable in the longer term (See paragraph 8.6).

10.5 A key focus for the Centre’s work in the remaining months of 2010 will be disseminating the key learning from CEIMH’s work through conference activity and articles in academic and practitioner journals. In addition, the Centre has been commissioned to produce a resource pack for adult educators and mental health professionals which is provisionally due for publication in 2011.

11. CEIMH beyond 2010

11.1 In sustaining the work of CEIMH beyond current Higher Education Funding, CEIMH has adopted a range of strategies. Following the submission of a draft business case to the University over 2009, this has involved:

- Extending the use and transferability of the innovative approaches to e-enhanced learning developed within CEIMH across the institution. This is being driven forward by the active presence of CEIMH team members on the relevant education enhancement and learning and teaching committees and working groups; initiating cross-College/University training events (e.g. DIBL) and co-working with Learning Development and Academic Practice and Organisational Development to enhance University wide e-learning strategies, training and support
- Taking forward mental health issues within the University to develop an institutional mental health and wellbeing strategy
- Extending the learning from CEIMH is being undertaken in partnership with a range of academic institutions, for example, Open University/Middlesex University, Higher Education network groups (Mental Health in Higher Education and Developers of User and Carer
involvement in Education) and the appropriate Higher Education Subject Centres (SWAP, Escalate, Medical Education and Health Sciences).

- Working to ensure the continued active involvement of users and carers in qualifying programmes and Continuing Professional Development through supporting current groups hosted or supported by CEIMH to become independent, externally funded, organisations (Suresearch, Users in Partnership, Carers in Partnership) with strong links with the University of Birmingham and other Higher Education establishments in the region.

11.2 In addition to strategic level work:

- CEIMH will continue to have a presence beyond 2010 as part of the College of Social Sciences
- The Centre’s website will be maintained as an open access resource beyond 2010.
- Key members of the Centre’s staff will remain as a human resource whose technical and pedagogic expertise will be available across the Colleges and University.
- There is a larger pool of academic and related staff in the Social Sciences, Medicine and Dentistry and Life Sciences Colleges able to deliver interdisciplinary teaching and learning
- Negotiations on the use of the Centre’s physical base as a venue for mental health teaching and learning and a hub for e-learning development are ongoing
- CEIMH is actively seeking external funding to sustain training activity (Interdisciplinary Preceptorship) and develop research capacity.

11.3 At an international level, formal structures are now in place to continue the work of the European Service User Research Network.

11.4 As noted in paragraph 8.7, the key to sustaining the Centre’s work and inheritance beyond 2010 has been its investment in networks and developing alliances which can drive forward CEIMH’s vision for interdisciplinary learning and user involvement in the coming years.

12. Future directions

12.1 There are two aspects of CEIMH’s work that are likely to have an increasing importance in the coming years.

12.2 Firstly, the recently published Cross-Governmental mental health strategy places a much greater emphasis on mental health awareness, prevention and early interventions. Further, it places considerable emphasis on mental health training for a much wider range of professionals and practitioners: from primary care staff through to those working in children’s services and community justice settings. This emphasis on promoting wellbeing and interdisciplinary learning in partnership with service user and carer groups has been core to the Centre’s work for the past five years. The learning involved and resources developed could therefore be the basis for the University, and its Colleges, taking forward an educational agenda which responds effectively to changing work-force
needs in mental health services and health promotion. More immediately, the Centre’s work on the staff and student wellbeing policy places the institution itself in a strong position to respond to the future direction on mental health strategies on promoting wellbeing and early interventions in the workplace.

CEIMH Futures and Legacies

“The physical space at the Centre will continue to be a widely used and valued resource – both within the University and by diverse external agencies and groups.

Furthermore, as the QAA Institutional Audit demonstrated, the University-wide activities of the Centre of Excellence in Interdisciplinary Mental Health exemplify good practice in relation to impact on student learning styles, and the mental health and wellbeing agenda for students and staff. We are committed to building on this in the future.” (Vice Chancellor: University of Birmingham)

“We hope, we expect, to take forward the legacy of CEIMH will be to build on (its) practice. The ways in which CEIMH has approached, in particular, enquiry-based blended learning and building that into our institutional provision both in the teaching of new academics but also much more widely across disciplinary practice within the University.” (Pro-Vice Chancellor: Teaching, Learning and Quality: University of Birmingham)

“We intend to continue using the quality learning spaces provided by the Centre. Key staff will also be returning to the College which provides a great opportunity to mainstream the innovation stimulated by CEIMH in terms of flexible technically-enhanced learning opportunities.

The experiences of interdisciplinary teaching and learning within the Centre places the Institute and indeed the College in a strong position to attract students at all levels from undergraduate, professional qualifying and continuing professional development programmes, in what is an increasingly competitive environment in higher education.” (Head: School of Social Policy)

12.3 Secondly, the growth of e-assisted learning is a phenomenon which cuts across academia and other teaching and training settings – from pre-vocational through to qualifying programmes and continuing professional development. The Centre’s work in:

- Developing exemplars of enquiry-based blended learning
- Providing support and training for academics and practitioners in adopting e-learning methodologies
- Promoting, in partnership with Learning Development (LD) and Academic Practice and Organisational Development (APOD) at the University, coherent strategies for the implementation of e-learning pedagogies

place the institution in a strong position to both anticipate, and respond to, the rapidly changing technological context of Higher Education.
12.4 The Government’s Mental Health Strategy notes that:

“Mental health governs our quality of life, our relationships and our aspirations. Good mental health is fundamental to the resilience of individuals, families, communities and businesses. It decides, in short, whether a society is flourishing or floundering.”

This belief has underpinned the values and work programmes of CEIMH. What was innovative in approaches to mental health teaching and learning five years ago, at the start of the CETL initiative, has, therefore, entered mainstream policy and educational thinking. Current cuts both within Higher Education and mental health services may make this achievement fragile, but it represents a considerable contribution to changing attitudes to, and ways of learning about, mental distress which are rooted in a service user body of knowledge.


This final section has been provided by CEIMH’s external validators who were asked to comment on the work of the Centre, the evaluation process and strength of the evidence-base for this final report. The validators are Emeritus Professor Diane Waller OBE (Goldsmiths University of London) and Dr Val Harris (Independent Consultant).

We agree strongly with the content of the Report, which is fair, honest and accurate and reflects the work of the Centre over the period in which we have been involved. We had the opportunity to visit in March and found the same commitment and enthusiasm as on our earlier visit.

Several elements of the Report deserve special mention: that is the demonstration of how the Centre has met its original aims and objectives but moreover how others have emerged as a result of continued careful reflection in the staff team and incorporation of feedback from those using its services (see 3.1). The impression is of steady, thoughtful progress, realistic aims and ability to be flexible when needed. The staff have obviously listened to a wide range of professional and other colleagues and learned from them.

The Centre is innovative, able to respond to the demands of a rapidly changing social and political context. It has made a strong impact on the University and on its staff, policies and approach to teaching as evidenced by the comments from staff who have engaged in the Centre’s training and projects. The Report contains some lively extracts from these staff as well as from service users and other stakeholders and the illustrative vignettes bring the work to life in a commendable manner.

There is an emphasis on the fact that the Centre is a safe space for all who use it – a most important point as many of the service users lack confidence as a result of previous learning environments. The design and delivery of teaching sessions has been of a very high standard, yet has been adaptable to groups with sometimes very different core skills and learning styles. The Centre has made full use of the facilities available, demonstrating creativity and once again, flexibility and responsiveness to the needs of its users. We noted that the Centre has embedded service user networks in a range of projects and ensured that they will be able to pass on their knowledge to others, thus creating an
even wider network of persons with shared values. Some of the projects are described and show a sensitivity to the needs of people with mental health problems. One such project, the ‘Survivor Art Project’, is an excellent example of people from many different walks of life coming together to make art, to exhibit it, to photograph it and produce a stunning book with the help of colleagues from a sister project.

We agree with the authors of the Report that the Centre has made a strong impact on mental health services in the local region. This has been achieved, as stated above, by focussing on creating networks of expertise, but also by presentations and publications from the staff team. The Centre is unusual within the UK (in our view) and certainly within a higher education setting and certainly it is a model for development within the European context as well as in the UK.

Concerning use of the website, mentioned as a disappointment, we suggest a more proactive approach in signalling the existence of the website to, for example, professional bodies, health and social services regulators, other universities and service user networks. It is a valuable resource which others can benefit from.

In conclusion, we remain extremely impressed by the work of the Centre and would like to congratulate its staff and all who have contributed to it, and to the Report. The commitment to excellence in the field of mental health education is something greatly to be valued and cherished.
References/Endnotes


ii Reynolds, J. (2008) Final report from the PBPL funded project: Mental Health Secondment. Open University, Milton Keynes. (p2)


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