

# Mental Health Interprofessional (IPE) event

## A guide to: Interprofessional Assessments in Mental Health

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### **Background**

Within mental health services team interprofessional working has been a core component of service delivery for many years. Supporting and treating individuals in the community with complex mental health needs requires a shared approach which needs to encompass medicine, with notions of patient assessment leading to diagnosis and treatment, nursing with concepts including recovery, support and therapy, and social work where the service user is seen in their social and cultural context.

Mental health has long championed a bio-psychosocial approach and community mental health teams routinely operate in a less hierarchical way than other NHS services. Aside from medics/psychiatrists, nurses and social workers, the team also includes psychologists, occupational therapists, (OTs), support workers and psychotherapists. Community mental health teams (CMHTs) also often operate in conjunction with non-statutory agencies to offer best practice holistic care. In this way mental health problems, housing, financial issues, relationship issues, childcare, drug and alcohol difficulties etc, can all be assessed and appropriate help and support offered and signposted.

Many CMHTs use interagency assessments which cover a wide variety of traditional clinical and social work issues, and look at the individual in a holistic way. Difficulty in a social domain can impact on an individuals' mental wellbeing and a person's mental health can impact on their social circumstances. To consider any domain in isolation risks offering treatment strategies that are ineffective.

We wanted to develop an interprofessional education event that would bring individual undergraduates and graduates together and give them an experience of working in teams in much the same way as a CMHT operates.

To maximise the breadth of the interprofessional mix of student, the University of Leicester and DeMontfort University have worked together collaboratively to ensure a good range of health and social work students are able to attend.

### **Forming a Working Party**

A group of professionals from academia and clinical practice were recruited to set up and develop the course. This was to ensure that the course met the needs of differing undergraduate and some post graduate curricula, both logistically and in terms of content.

## **The Original Curriculum Development Group**

Included:

- Two practicing psychiatrists (both with teaching experience; one specialising in adult psychiatry and the other in old age psychiatry)
- An adult nurse (full time lecturer)
- A social worker (full time lecturer)
- A public health advisor (full time post at the local city PCT)

## **The Additions to the Group**

More recently the curriculum team has added the expertise and input from:

- An occupational therapist (specialising in mental health)
- A midwife (part time lecturer)
- A pharmacist (a lecturer/practitioner specialising in mental health)
- A mental health nurse (full time lecturer)

## **Use of the Leicester Model**

The Leicester Model of IPE, (Lennox, A. & Anderson, ES, 2007) has been used to help develop a number of courses in Leicester for undergraduates and some post graduates. It involves:

1. Immersion into service users', carers and professional experiences
2. Analysing professional perspectives, theories and policies
3. Considering solutions to problems identified
4. Becoming change agents through feedback.

## **Core Principles for a Mental Health IPE Course Included**

- It should be community based to give a realistic view that most individuals with mental health problems are managed successfully in the community.
- Service users with a history of mental health problems share their narrative with the students within a non clinical setting.
- It was important to consider both statutory and non-statutory services.
- The facilitators should be from a variety of professional backgrounds.
- The importance of a deeper analysis of existing services, policy and attitudes.
- A need to work with students from medicine, nursing and social work as a minimum and that students should remain in their small interprofessional groups to complete all tasks.
- If the students were placed in groups to mirror community mental health teams, then the clinical activity should also align to practice and include a holistic assessment and development of a care plan.

## Course Summary

The course begins with classroom based sessions to look at issues, such as, stigma, mental health promotion and care planning. A paper case has been developed to generate discussion around interprofessional care planning for a service user; this scenario gives students an opportunity to rehearse the skills required to synthesise pieces of information and to compile a plan of care.

The students are then given a brief outline of a real service user who they will interview in their home environment. Students spend about 45 minutes working in their interprofessional groups to develop an interview schedule. The actual interview lasts up to one hour, during which time the service user is asked questions which the group hopes will enable them to put together an effective care plan.

Following this the students interview one professional involved in the service user's care. It is important to ensure that a variety of professionals are invited to participate, as overall this will provide insight into the breadth of support and expertise available to mental health service users in the community. The students then prepare to present their care plans to the whole student group; as each small interprofessional team present what they have learnt, it enables all of the other groups, who are listening, to also share the experience and expand their learning. The facilitators and other invited academics and professionals also attend the presentations.

Following their experiences, if the students highlight any concerns about a service user, or a care package, these are fed back to the community team involved.

## Setting Up for the Course: Preparation and Considerations

The course is a two day event and setting up in advance is vital.

### Service User Involvement:

- Patients are identified by clinicians several weeks before the course is due to run.
- Patients must have the course explained to them and an opportunity to ask any questions. If they wish to participate they are consented. We use a standard consent form developed specifically for interprofessional courses which involve Service Users.
- In collaboration with the service user, a brief summary of this person's health and social circumstances is summarised, usually by the consenting professional.
- A specific appointment time is negotiated with the service user when the student group will visit them at home – this is usually in the afternoon of day 1.
- The service users are contacted, usually by phone, just before the event to remind them about the date and time.

### **Tips for selecting service users:**

- They must have full capacity and be able to give informed consent; or they must have a nearest relative or carer that would be able to consent on their behalf.
- They need to be currently in receipt of mental health services.
- As well as being under the care of a psychiatrist, they need to have at least one other specialist service e.g. attending a day centre, or contact with specialist professional e.g. an occupational therapist.
- They should be receiving their mental health care in the community. Occasionally, an in-patient can be used, but this should only involve a person who is imminently due to be discharged from hospital.
- The professional preparing and consenting the service user will risk assess the situation and judge that there is obvious risk to the students.
- Contact with a student group is felt to be a beneficial experience for the service user.
- The use of finite resource needs to be considered e.g. professional's time to explain and obtain consent; travelling time/costs (for staff or student groups) when visiting the person at home etc.

### **Resources and Equipment Required:**

- A resource box or cupboard needs to be developed. This will include a broad range of mental health relevant resources, such as, text books; medication guides (e.g. BNF); leaflets; Department of Health documents; summary legislation etc.
- Availability of laptops and the internet is desirable, but not essential. These may need to be booked in advance.
- Ensure a supply of student workbooks. These need to be printed well in advance of teaching and distributed before the course, as they include some useful background reading and activities to reflect on. Any other relevant hand-outs the facilitators wish to distribute must also be printed.
- Ensure the availability of general teaching resources for use by facilitators or students e.g. Powerpoint equipment, flip chart and pens, overhead transparencies and pens etc.

### **Selecting Students to attend the course**

- It is decided in advance by the IPE leads (i.e. lecturers responsible for the IPE component of the various students in training) which students best suit this activity. To be interprofessional, two or more professional groups need to be involved – this can be either from health, social work, or both. Attendance is influenced by factors such as, how places are allocated between the various departments, whether timetables permit certain groups to participate, and if an interested uni-professional department can provide an appropriately experienced IPE facilitator to cover teaching.

- There are a maximum number of students that can be invited to a workshop such as this. This is largely dictated by how many service users have been recruited. Ideally, the small interprofessional groups should be between 4-5 people. Therefore, an overall group size of 30 students would need 7 service users. It is very important these small sized groups are adhered to, as larger groups would affect the quality of the learning experience; also, it would not be fair to the service users if larger groups of students were sent to their home e.g. there may not be sufficient space, or home visits are less discreet if group sizes are too big.
- For those students who have a professional development portfolio, participation in this event will count as evidence to meet various essential competencies. The facilitators need to sign the portfolio at the end of the course to confirm attendance.
- Example of the professional groups included are:
  - medicine
  - social work (graduate)
  - mental health nursing
  - adult nursing
  - pharmacy
  - midwifery
  - social work (under-graduate)
  - OT's are currently not participating as they are not trained at either university
- Ensure announcements are made informing students of any special arrangements related to the environment in which they are being taught, if this is not their usual university e.g:
  - arrangements for parking
  - arrangements for obtaining refreshments and lunch
  - importance of car drivers bringing their transport
  - details about seeking business insurance for the car if they intend to car share, or give others a lift
  - details about the local regulations around whether students can claim travel expenses etc.

## Facilitators

- Staffing for such an event is agreed at the beginning of the academic year. Ideally, the facilitators working together on a course should not be from the same profession to ensure different perspectives are brought to the discussions.
- Staffing is calculated on an annualised basis if the course is being repeated to cover the needs of several cohorts. This needs to be worked out flexibly, as staff cover from a given department has to be broadly commensurate to how many students it intends to send on the course.
- Two facilitators are required during sections of the timetable involving large group teaching, or presentations. One facilitator must always remain

at the 'end of a telephone' when students are travelling, or undertaking their community interviews.

- Whilst the facilitators will inevitably be able to share their uni-professional expertise during the workshop, it is also important to emphasise an equally important part of their role is to encourage interprofessional discussion and debate.
- The University of Leicester offers a training course called 'Teaching for Learning' which prepares academics and practitioners for interprofessional facilitation.

### **Dates and Venues**

- A list of dates for the two day event need to be identified well in advance so that venues can be booked and facilitators/speakers sought. Several cohorts may be run throughout an academic year e.g. Cohort 1, Cohort 2, Cohort 3 etc.
- Where there is a choice of venues we always endeavour to book a teaching room that represents something about the services that a person with a mental health diagnosis may experience e.g. a teaching room in an out-patient setting. Whilst this is not essential, it does contribute to the climate setting and delivery of the Leicester Model (Lennox, A. & Anderson, ES 2007)
- Students need to receive the date and full address of the venue: this will appear in their course workbook and a reminder would usually be provided either on Blackboard, or the IPE notice-board, depending on what the usual agreed method of communication is between students and lecturers.
- A flat room is required with furniture that can be moved. The room needs to be arranged so that each student team (of 4-5 people) can work around their own table i.e. a cabaret style table lay-out.

### **Outside speakers**

- Any outside speakers must be booked well in advance to ensure their availability. Clarity over whether or not a payment will be made is vital to avoid any misunderstandings. This can vary depending on whether or not teaching is a legitimate component of the person's full time job.

### **Agency Visits**

- All student groups will additionally interview one professional directly linked to their Service User. This could be a doctor, psychiatric nurse, social worker, occupational therapist, or support worker/manager from a day hospital etc. Appointments with these workers must be confirmed and entered onto the timetable. As mentioned above there must be clarity over whether or not a payment is required.

### **Service User Payments**

- Service Users who participate are currently paid £20.00 for their time. Whilst these payments are dealt with after the course finishes, it is

important ensuring a payment mechanism has been set up e.g. the system and paperwork to generate a cheque. The finance department at the organisation will indicate what details they require in order to pay the Service User; this information would usually be collected at the same time as consent is being obtained.

## Contingency Plans

- In the event of a Service User not being available on the specified day for an interview several courses of action are possible:
  - To re-organise the interview at some other time during the 2 day course with the same Service User.
  - To arrange a short notice alternative interview. This is usually only possible on an established course when a 'bank' of Service Users has been built up – typically a person who has done the course several times before may agree to see a group with minimal preparation or notice.
  - If the proximity of teaching is closely linked to an in-patient ward, on occasions a ward based clinician may identify a stable patient who they believe is suitable and would enjoy the experience. On such occasions an explanation of the course and consent would be sought verbally, given the short notice.
  - To use alternative resources to experience the process of interprofessional care planning through simulated activities e.g. use of a 'paper case'; use of a relevant DVD etc. These will need to have been prepared or sourced in advance.

## On the day

- Ensure you have an up to date register. Allocate the students to the 7 groups, making sure there is a good interprofessional mix in each group.
- Arrive at the venue early to check the tables have been correctly arranged (e.g. 7 satellite tables). Put a number on each table, to assist students to know where to sit on arrival when they sign in.
- Ensure there is one extra table towards the front of the class for the facilitators to sit, to use for storing handouts and for setting up the projector for the Powerpoint presentations.
- As students arrive, it is worthwhile placing the pre course self assessment forms on the table beforehand – this is a useful thing to be doing whilst those who have arrived early wait for colleagues.
- As students arrive try to ensure you have at least one car driver in the group, as this ensures a lack of transport does not disadvantage any of the groups from getting through their visit in a timely manner.
- A list is handed around to all groups, where students are asked to share their mobile telephone numbers with each other, and the facilitators. This is important to ensure we can all communicate in case of last minute changes, cancellations, or any other 'crisis' e.g. a group gets lost on the way to a service user's home.

- Teaching is started using the 'ice breaker' exercises in the workbook, this moves them forward to think about ground rules/group goals.
- Throughout the course the workbook continues to be used to structure the teaching as it contains a lot of relevant information e.g. mental health policy; it provides general information e.g. facilitator contact details; it reminds students about core considerations, like confidentiality and personal safety; it offers various aide memoirs to keep student on track; it contains blank pages to make notes during interviews; it prompts reflection on practice e.g. after each interview; and it contains some optional activities at the back.

### **Assessment (IPE Portfolio):**

All of the students training in our region have some assessment associated with the IPE events they attend. Depending on the requirements of their uni-professional curriculum all of the students maintain an IPE portfolio, where interprofessional learning is documented and reflected upon. In some instances this is a formative process, but in others the mental health interprofessional reflections constitute part of a summative assessment.

The IPE portfolio also has a section for facilitator comments. Therefore, if an individual student has been especially impressive in their team working, skills, or contributions during the course, it can be documented. Conversely, any areas of concern about a particular student can also be logged.

### **Discipline**

All of the students who attend this IPE event will have had clear guidance from their uni-professional lecturers about the importance of the professionalism, especially whilst in practice. The IPE facilitators continue to expect the highest standards of personal behaviour from the students whilst participating on this mental health experience.

Minor issues can be dealt with there and then e.g. poor punctuality, or inappropriate dress code, with facilitators using their professional judgement in how best to resolve the situation. If a serious incident occurs the facilitators have two courses of action:

- If a facilitator feels they have the knowledge and skills to deal with a critical incident, they are empowered to manage it during the course. Afterwards, they must inform the relevant authority at the university.
- If the facilitators feel unable to deal with an incident, they should immediately inform the student's uni-professional module leader who will take the matter up.

## **Evaluation**

All students complete a pre-course and post-course questionnaire. These are based on a 5 point Likert scale. The questions are loosely based on the learning outcomes and allow the students to bench-mark any changes in their knowledge, skills and values in relation to working in mental health.

The information collated is used to inform the on-going curriculum development of the course. The findings can contribute to the repository of regional interprofessional data that is used as evidence in research papers.

# APPENDIX 1: Learning Outcomes

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## Aims

- To explore the contribution of different disciplines in the mental health interdisciplinary working.
- To apply the social and medical models to holistic interagency care planning for service users.

## Learning Outcomes

### Knowledge

- Analyse the importance of the promotion of mental health and the prevention of psychiatric disorders.
- Appreciate the effects of stigma on service users and their families.

### Skills

- Reflect upon your own and society's attitudes towards service users with mental health difficulties.
- Generate a comprehensive interagency care plan for a service user and evaluate the role of the various statutory and non-statutory agencies in the delivery of this care plan.
- Analyse the care given to service users with mental health difficulties and critically appraise the current working practices.
- Demonstrate effective communication between agencies and individuals throughout.
- Reflect upon how you work in interagency groups.

### Attitude or values

- Value the importance of involving service users and their carer's in the generation of care plans and in identifying unmet physical, psychological and social needs.
- Value and respect the opinions and working practices of fellow students, including students from other disciplines.
- Be aware of the need to tolerate uncertainty in clinical practice and be more receptive about the views of others.
- Develop a positive attitude towards the challenges of working in mental health.

## APPENDIX 2: Pre & Post Course Evaluation Form

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### Pre-course self assessment on the course aims and learning outcomes

Please score (√) the following relating to your experience prior to the course, where 1 indicates little knowledge or ability and 5 a great deal.

	poor knowledge/or ability			excellent	
1) I understand the effects of stigma on service users with mental health difficulties.	1	2	3	4	5
2) I have reflected upon my own attitudes and service users with mental health difficulties	1	2	3	4	5
3) I am able to draw upon my own attitudes towards service users with mental health difficulties	1	2	3	4	5
4) I understand the importance of involving service users , their families and carers in drawing up care plans	1	2	3	4	5
5) I understand the roles that statutory and non-statutory agencies play in the delivery of care.	1	2	3	4	5
6) I am able to identify the gaps in service for service users	1	2	3	4	5
7) I am able to critically appraise the working practices of agencies and teams	1	2	3	4	5
8) I understand how I work within multi-professional teams	1	2	3	4	5
9) I am able to tolerate uncertainty in clinical practice	1	2	3	4	5
10) I understand the importance of mental health promotion to individuals and communities.	1	2	3	4	5

## **Pre-Course Comments**

*Have you previously experienced an IPE course?*

*If you have previously experienced an IPE course, what 3 things did you enjoy on that course?*

*What three things would you have changed to improve your previous experience?*

*What are you hoping to experience or benefit from on this course?*

## Post-Course Self Assessment on the course aim and learning outcomes

Please score (√) the following relating to your experience after the course, where 1 indicates little knowledge or ability and 5 a great deal:

	poor knowledge/or ability			excellent	
1) I understand the effects of stigma on service users with mental health difficulties.	1	2	3	4	5
2) I have reflected upon my own attitudes and service users with mental health difficulties	1	2	3	4	5
3) I am able to draw upon my own attitudes towards service users with mental health difficulties	1	2	3	4	5
4) I understand the importance of involving service users , their families and carers in drawing up care plans	1	2	3	4	5
5) I understand the roles that statutory and non-statutory agencies play in the delivery of care.	1	2	3	4	5
6) I am able to identify the gaps in service for service users	1	2	3	4	5
7) I am able to critically appraise the working practices of agencies and teams	1	2	3	4	5
8) I understand how I work within multi-professional teams	1	2	3	4	5
9) I am able to tolerate uncertainty in clinical practice	1	2	3	4	5
10) I understand the importance of mental health promotion to individuals and communities.	1	2	3	4	5

## **Post-Course Comments**

***What was the best thing about this course?***

***Are there any changes you would suggest?***

***From your perspective what's the most important learning you will take forward into practice?***

***Thank you for completing the evaluation form.***

## Appendix 3: Sample Programme for Two Day Course

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### Day 1

- 09:00 Welcome and Introductions - Group working exploring:
- Sharing past experience of mental health work
  - Understanding of professional roles
  - Medical / Social model
  - Devising group goals
- 10:00 Mental Health Promotion:
- What influences mental health and well-being
  - Stigma
  - Where and how are needs met
  - Benefits to the person
- 10:45 Coffee
- 11:00 Care Planning:
- Introduction to interagency care plan template
  - Discussion of sample care plan
  - Confidentiality issues
- 12:15 Lunch
- 13:00 Care Planning:
- Ongoing sample case
  - Mental Capacity Act / DOLS
  - Mental Health Act
  - Advocacy
  - Carers Support
- 14:00 Preparing for patient and agency Interviews:
- Setting relevant questions
  - Agreeing who will ask which question etc
- 15:30 Patient Visit
- 16:30 Review of patient interview:
- Each student identify 2 questions for Agency Visit
- 16:45 End of day 1

## Day 2

- 09:30 Agency Visit
- Must have interview questions ready to ask.
  - Must have pre-negotiated group roles beforehand.
  - Be mindful of time – you have one hour.
- 11:00 Return to venue to prepare presentation
- A lap top and projector is available if you want to use Powerpoint; also, flipcharts and OHTs.
  - Presentation guidelines are on page 24.
  - All presentations to last approximately 15 minutes.
- 12:00 Lunch
- 12:45 Complete presentations:
- The resource box is available with relevant text books, articles, legislation, BNF etc.
- 1.00 Presentations of interagency care plans to larger group:
- Each presentation should last 15 minutes (max).
  - Everyone in the group must contribute/attend.
  - As an audience member you are expected to think of questions to ask your peers; see student workbook
- 16:30 Feedback session:
- Reflection from students
  - Reflection from the facilitators
  - Completion of the evaluation forms
- 17:00 Close

# Appendix 4: Acknowledgements

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Dr Dan Kinnair, Consultant Psychiatrist, Leicestershire Partnership NHS Trust

Sandy Goodyer, Senior Academic Co-ordinator & IPE Lead for Social Work,  
University of Leicester

Erik Van Diepen, Consultant Psychiatrist, Leicestershire Partnership NHS Trust

Cath Poyser, Senior Occupational Therapist/Clinical Educator, Leicestershire  
Partnership NHS Trust

Carole Devaney, Public Health Advisor, Leicester City PCT.

Amanda Fitchett, MA Social Work: Course Director, University of Leicester

Jacqui Williams, Midwifery Lecturer & TIGER Lead, De Montfort University.

Helen Rooney, Senior Lecturer in Mental Health, De Montfort University.

All of the service users and in many cases their family members, who have kindly agreed to share their personal life story to help health and social care professionals of the future to learn and develop their practice skills.

All the students who have contributed and provided invaluable feedback about the workshops from De Montfort University and the University of Leicester.

All of the lecturers from both universities who have contributed to the facilitation at the workshops.

All of the local mental health professionals who have found time in their busy work schedules to willingly give of their time and expertise to speak with student groups.

All of the administrative staff at both universities, and the Leicestershire Partnership NHS Trust, who have contributed to the smooth running of the courses.

# Appendix 5: Sample Consent Form

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## ***Consent to participate in medical and social care education in the community***

	<b>Yes</b>	<b>No</b>
<i>I have received information about medical and social care education in the community</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>I agree to hold a small group interview with students in my home or another agreed place for one hour</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>I know that students will be provided with written information about my past health records, shared with me, before my interview</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>I am happy to talk with the students about my health problems and the role of health and community staff involved in my care</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>I am happy for the students to talk to my main carer if that individual is available</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>I am aware that students will talk about the care I have received with the main workers involved in my care</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>I am aware that my case will be discussed anonymously in a feedback presentation session</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>I am aware that all information will be treated strictly confidentially and medical records are not allowed to be removed from the medical centre</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>I understand that written information will be stored in accordance with the data protection act</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>I agree to participate in medical and social care education in the community</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>I am aware that I can withdraw from the programme at any time and I know whom to inform to do so</i>	<input type="checkbox"/>	<input type="checkbox"/>

	<b>Yes</b>	<b>No</b>
<i>I know how to contact the tutor if I have any queries or concerns</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>I am happy to talk with the students about my health problems and the role of health and community staff involved in my care</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>I am aware that students will provide written feedback to the GP about my care and suggestions for future management</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>I am aware that I may be contacted by Lucy Thorpe (Regional Evaluator for inter-professional education), from the University of Leicester regarding possible involvement in research</i>	<input type="checkbox"/>	<input type="checkbox"/>

Patient Signature.....

Patient name (please PRINT).....

Date:

Tutor Signature.....

Tutor name (please PRINT).....

Date:

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***For Office Use Only***

D.O.B. ....

National Insurance number.....

Address:

Is a cheque acceptable for payment?

## Contract to participate in medical and social care education in the community

<b>Patient Contract to the University</b>	<b>University / Trust Contract to the Patient</b>
<p style="text-align: center;"><b>I (<i>the patient</i>) agree to:</b></p> <ul style="list-style-type: none"> <li>• Host an interview with health and social care students</li> <li>• Sign a consent form</li> <li>• Be available on the date and time agreed with the tutor</li> <li>• Be in a stated venue or at home for the interview</li> <li>• Respond to the student questions, as I feel able</li> <li>• I am aware that I do not have to divulge personal details</li> <li>• To inform the tutor if there are any concerns about the interview</li> <li>• Where possible let the administrator know if I can no longer keep this agreement</li> <li>• I know how to withdraw from the programme</li> </ul> <p style="margin-top: 20px;">Date .....</p> <p style="margin-top: 20px;">Signature .....</p>	<p style="text-align: center;"><b>We (<i>the University and PCT</i>) agree to:</b></p> <ul style="list-style-type: none"> <li>• Support you in your teaching role</li> <li>• Identify suitable times and dates convenient to you for the interview</li> <li>• Enable you to write the students' brief</li> <li>• Ask you to identify the agencies that will be interviewed</li> <li>• Confirm to you how your confidentiality will be maintained</li> <li>• Ensure students do not have access to your professional records</li> <li>• Provide you with an information leaflet on the course</li> <li>• Brief agencies about not divulging your personal confidences</li> <li>• Where possible, provide access to the students, at the end of the course, to thank you and inform you about what they have learnt</li> <li>• Ensure you understand how to exit the course at any time should you so wish</li> </ul> <p style="margin-top: 20px;">Date .....</p> <p style="margin-top: 20px;">Signature .....</p>

# Appendix 6: Information Sheet for Participants

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You are being invited to take part in a project. Before you decide it is important for you to understand why the project is being done and what it will involve. Please read the following information carefully and discuss it with others if you wish. Ask us if there is anything that is not clear or you would like more information. Take time to decide whether or not you wish to take part.

## **What is the purpose of the project?**

It is important that different professionals in the NHS work together to develop appropriate care plans. However, students from medical, nursing and social work backgrounds are often taught separately. We feel it is important that students learn to work as part of a team. We have organised the students into groups of 4. We are asking the students to work together to write a care plan for you.

## **Why have I been chosen?**

Your psychiatrist has identified you as some one who might be willing to have a small number of students visit you at home to help with this project.

## **Do I have to take part?**

It is up to you to decide whether or not to take part. If you do decide to take part you will be given this information sheet to keep and be asked to sign a consent form. If you decide to take part you are still free to withdraw at any time and without giving a reason. A decision to withdraw at any time, or a decision not to take part, will not affect the standard of care you receive.

## **What will happen to me if I take part?**

A group of 4 students will visit you at home on one occasion. They will be provided with a brief summary of your mental health difficulties. You will be shown a copy of the summary if you wish to by your psychiatrist. During the interview you will be asked questions about your mental and physical health and the impact of this on your day to day life. You may be asked questions about the professionals you see, and about your family and social supports. If you enjoy the visit you may be asked to participate again in the future.

The interview will take approximately 60 minutes, and can take place in your own home. If it is possible the students might also want to speak to your carer. This is usually a next of kin such as a partner, spouse, son or daughter. Therefore we will also be seeking your consent to speak with your next of kin. If you are not happy for us to contact your next of kin the students would still like to interview you. Following this the students will also speak to a professional involved in your care, e.g. your community nurse, social worker, psychiatrist, etc. The students will then work

together to produce a care plan. They will present this care plan to a small group of professionals and students in a way that respects your confidentiality.

### **What are possible benefits of taking part?**

We do not anticipate any specific benefits for those who take part in the project. However, if during the interview anything new is discovered that may benefit your treatment, then this will be communicated to your treating team. We believe it will benefit the doctors, nurses and social workers of the future to provide better care.

### **What if I have a complaint about the project?**

If you wish to complain, or have any concerns about any aspect of the way you have been approached or treated during the course of this study, the normal NHS complaints mechanisms should be available to you.

### **Will my taking part in this study be kept confidential?**

All information which is collected about you during the course of the project will be kept strictly confidential. Your GP will be notified of your participation in the project.

### **What will happen to the results of the project?**

The results will be reported to appropriate colleagues locally, and will be published in the relevant educational journals. Findings from the study will be presented in a way that will not identify individual participants in any way. We hope to develop a new course for students from these pilots.

### **Who is organising the project?**

This research has been organised by the **(add own details/institution's title)**

### **Will I receive payment for my time?**

You will receive a cheque for (at time of writing £20) from **( add own institution's name)** to thank you for the time you spend helping to educate the students.

Thank you for taking the time to read this information sheet.

### **Contact for further information:**

Please keep this sheet for your information. If you have any questions, please do not hesitate to contact the following:

Dr **(add own details)**

Or

Dr **(add own details)**

For independent advice regarding participating in research you can contact the local Patient Advice and Liaison Service (PALS) on **(add local number)**