

# Achievements

## What has worked well

1. Effective assessment. This includes agreement with the learner as to what relevant information will be passed to the tutor.
2. Offering the most appropriate service to meet individual need.
3. Offering a service to ensure best opportunity for success. If a high level of distress is being experienced this may be a less structured informal open door social support service, followed by a confidence building course before leading onto a more structured learning course. It is more successful to discuss and limit the number of courses, to get one established and then introduce a second. Often the learner will start one and decide it is enough.
4. By remaining in regular contact via phone and e-mail when a learner experiences a set back in their mental health we maintain the learner's confidence. This makes it easier for the learner to return.
5. To re-allocate places within groups if a learner does not attend 3 sessions. When they are well they are re-allocated as soon as we can. This means we are able to offer services to more learners.
6. When a learner who has been unwell starts to recover we arrange a review meeting and encourage the learner to take small achievable steps. Often learners start to feel better, take on too much, are unable to cope and a message of failure is re-enforced.
7. To place individually targeted trained volunteers to work alongside learners working on a 1-1 basis when needed.
8. To place volunteers linked to the individual needs in each group. This means some groups have up to 4 volunteers, plus staff, for 8-10 learners, other groups only need one volunteer plus staff.
9. By encouraging and supporting service users to apply to become Mind volunteers they can offer a unique support to all other learners and increase their own self worth.
10. Learners have experiences of negative feedback around their distress and this creates a negative perception and a low expectation of their own ability. With low self-confidence we set learners up to achieve and not fail. We aim for a successful experience of learning.
11. No automatic re-enrollment each term for repeat learners. This helps manage dependency issues.
12. All places are confirmed in writing with full details.



# Achievements

## What has worked well

13. Success can mean that some learners may be reluctant to 'move on' and can become stuck and dependent. This can become a negative experience and we work with a recovery model, enabling progression to build confidence and success.
14. The introduction of the 3D group, Discover, Direction, Develop. The next step for learners to move into other learning, training, volunteering, employment pursuit of personal goals.
15. When learners want to discuss personal issues within the lesson we offer a short discussion with a member of the team with the offer of a 1-1 appointment at a later time. This is less disruptive for the rest of the group. The 1-1 is arranged and offered quickly. This will often hold the learner in the group.
16. To be flexible, especially around timings of courses, with support, relationship building and humour. Courses need to be fun and humour is very therapeutic.
17. Finding activities to encourage integration and participation for learners who are finding social interaction difficult.
18. Providing transport for the most anxious for courses held in the community.
19. Offering an allocated place and early start date.
20. For the staff team to have supervision time to explore their own reactions to individual learners. Everyone has prejudices and understanding these enables us to manage better in the room.
21. Regular meetings with tutors and support staff to ensure good communication.
22. Clear procedures for emergencies if someone is unwell and is presenting in distress and or challenging behaviours.
23. Staff are recruited for their mental health knowledge as well as their teaching experiences.
24. Support structure. All services working together to enable learners to move between the services as needed from 1-1 Befriending, open door social support groups, confidence building to education and learning, 3D. This is a key point as it enables learners to move between services to support their needs and leads to integrated services.

**To be service user led, innovative and maintain hope for recovery leads to inclusion and empowerment.**

