

DRE Response to SPN Article on RECC course

To: Social Perspectives Network

Thank you for giving right of reply regarding the article written by Peter Ferns concerning the newly re-vamped Delivering Race Equality (DRE) Programme's Race Equality Cultural Capability (RECC) course.

Before addressing some of the issues raised in the Peter Ferns article, it is important to say up front that the DRE programme absolutely stands by the new DRE-accredited Training the Trainer (TTT) Course.

It has been re-developed based on feedback from use of the original RECC training materials – taking account of the views of users and carers, commissioners and providers, and professionals in the field.

We are proud of it as a product. It is a good product which must necessarily respond to changing needs and environments. Its strength lies in the fact that it is a living – not a static initiative. We do not apologise for reflecting this in the current DRE-accredited RECC TTT course.

DRE National Training Team (NTT)

DRE has invested extensive resources in developing Race Equality Cultural Capability Training Resources and now a substantial roll out infrastructure for this work is in place.

Mental health organisations across the country have requested an accessible, high quality race equality training package. We have listened to our stakeholders and developed a positive, values based 12-hour race equality cultural capability course which is set out in four easy to use 3hour modules.

We have just completed (January 2009) training the first national cohort of 17 DRE- accredited trainers under the course. They are a group of highly competent individuals – from every strategic health authority region – who will act as a catalyst for rolling out this initiative. This is our national training team (NTT) who will all deliver at least two train the trainer courses for the 12 hour Race Equality Cultural Capability course in 2009/10. Ultimately, through this cascading process, the aim is to have a national cohort of 1300 DRE-accredited trainers.

Service user and carer involvement

Service user and carer involvement has been and will continue to be an integral part of how the course develops and evolves. In each region users and carers were asked to apply to become part of this first cohort. Three candidates applied and two went forward – the two are also DRE Ambassadors.

The next steps in this process are to work with the National DRE Ambassadors programme, the race equality leads (REs) and community development workers (CDWs) to roll out a national team of BME users and carer trainers working as part of the national team; and who will also be able to support regional survivor trainers.

Members of the NTT are already meeting with their regional REs to develop the regional RECC training and implementation programme. The implementation programme will be based on training up to 16 regional training cohorts. Each will aim to consist of BME users and carers as co-trainers, who will be supported by the National DRE Ambassadors programme and regional BME Champions programmes.

The West Midlands RECC trainers, e.g., held an RECC practice day on the 30th January 2009, attended by more than 15 people. They included CDWs, service users, practitioners, clinicians, and managers. The feedback and response to the new and improved course was extremely positive, with previous RECC trainers commenting that the new course was 'easier and more pragmatic to deliver;' and users commenting that they found it 'less academic and more realistic to deliver.'

To ensure continuous quality assurance we have partnered with the University of Lincoln who will collate all the evaluations for the new 12 hour DRE-accredited RECC courses run by trainers and provide quarterly reviews on the effectiveness of the course.

Background

The original DRE/RECC was piloted and training materials developed through work with the University of Lincoln's Centre for Clinical and Academic Workforce Innovation (CCAWI), on behalf of the NIMHE National Workforce programme. The first stage of the work was commissioned and piloted in four localities. The materials resulting from this work include:

- A participant's reader – a set of pre-course reading materials
- A practice development workbook – a series of work task templates; and

- Handouts – materials that support the teaching of the 12 DRE/RECC sessions.

The original DRE/RECC training consists of 12 modules which could be taught over a period of four months; and involving work based tasks.

The original RECC materials, including the full manual and related documents can be found on the following website

<http://visit.lincoln.ac.uk/C6/C12/CCAWI/default.aspx> .

The new 12 hour DRE-RECC was designed by an independent, person-centred psychotherapist, who is a freelance consultant for Mental Health First Aid and ASIST (Applied Suicide Intervention Skills Training) trainer. The new course utilizes all the materials that can be freely downloaded from the above website. We have taken the original RECC training manual and designed a more accessible 12 hour course; taking on board feedback from across the country to help shape it.

This feedback included:

- Re-affirmation of the principle of user and carer involvement in the work
- Acknowledgement that a consistent approach is needed to support users and carers to participate
- Service users are open to participate in the course
- It is necessary to ensure safety and boundaries for everyone who takes part – users and professionals alike

DRE-accredited trainers are now well-equipped to provide the training, with a training kit and supporting power point slides which are new and fit for purpose for the 12 hour course. All of these materials are given to participants on the course.

The new 12-hour RECC course has built in a degree of flexibility in using the materials, again on the basis that they will need to reflect local environments, circumstances and needs; and also in acknowledgement of the fact that we now have a cohort of experienced trainers who can enhance the materials based on their style, skills and expertise as trainers.

It is important to note that the original training materials were written in such a way that other facilitators can use the materials and develop their own roll out. The training the trainers course developed by Peter Ferns is one example of how the original materials can be used. However, it is equally important to note that it is not the only approach.

Where does all of this leave us?

As the person with national responsibility for the dissemination and use of the learning growing out of the DRE programme as a whole, it is my job to ensure that the work has an integrity which reflects the commitment and energy of everyone involved with it.

The new DRE-accredited training the trainer course is such a product. It is a national, publicly-owned resource which aims to promote equality across the board – not just on race, but to reflect the entirety of how people with mental health problems live their lives.

It is a quality assured, nationally cohesive programme, which we will maintain to the best of our abilities. Information about the new course, including the cohort of trainers, as well as materials which are already downloadable, will be available on the new mental health equalities website (www.mentalhealthequalities.org.uk) which will be launched on 12 March at the DRE Conference.

At the end of the day, however, there is choice. My money rests with the DRE-accredited course.

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