January 2015

Of interest to eligible community learning providers, mental health organisations, NHS funded recovery colleges and other relevant partners.
Community Learning Mental Health Pilot: proposal requirements

Background

The Chief Executive of Skills Funding (Agency) is a statutory post and corporation solely established by the Apprenticeship Skills Children and Learning Act 2009. The Agency is responsible for securing adult Further Education and skills training in England to ensure that people and businesses can access the skills training they need to succeed in playing their part in society and in growing England’s economy.

The Government’s 2014 Autumn Statement announced an additional £5m in 2015-16 and £15m in 2016-17 for pilot community learning courses to help adults recover from mild to moderate mental health problems, such as depression, anxiety and sleep disorders.

This funding, across the two years, will help up to 80,000 learners as part of their recovery from common mental health problems, including depression, anxiety and sleep disorders. Around a quarter of British adults, experience a mental health problem in any one year. Anxiety and depression are the most common disorders, with around eight per cent of the population suffering from anxiety and eight per cent from depression, equivalent to more than eight million people in England alone.

Mental health problems are a major cost to the UK economy. The Centre for Mental Health estimated the wider economic costs of mental health problems in England at £105bn per year in 2009/10. Mental health problems affect people from all backgrounds. People who are disadvantaged socially, educationally and/or economically are particularly vulnerable.

Research undertaken by the London School of Economics and Institute of Education has identified a range of positive impacts on wellbeing resulting from participation in mainstream community learning courses. There is also evidence that educational approaches can benefit people who are experiencing mental health problems.

For example, Northamptonshire County Council, in collaboration with the Northamptonshire NHS Foundation Trust, has developed Learn2b, a programme of adult education courses to help people alleviate stress, manage anger, build self-confidence, improve sleep patterns and use creative skills to relax and re-focus. Evaluation by the Mental Health Foundation (MHF) found these courses both effective and cost effective.

This pilot is sponsored by the Department for Business Innovation and Skills (BIS) and supported by the Department of Health and National Health Service (NHS).

Purpose

The pilot is the development, delivery, evaluation and sharing of educational approaches to support recovery from mental health problems, in order to identify the potential for sustainability and wider dissemination.

Community Learning mental health courses in local settings across England will target people aged 19 and over who are experiencing mild to moderate mental health problems, such as depression, anxiety and sleep disorders (see definitions).

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1 Centre for Mental Health (2013) The economic and social costs of mental health problems in 2009/10
2 The relationship between adult learning and wellbeing: Evidence from the 1958 National Child Development Study (Institute of Education); Review and update of research into the wider benefits of learning, LSE, 2012
Service Requirements

The Agency invites proposals from applicants directly funded through the Community Learning budget setting out how, at a local level, they can support individuals with mild to moderate mental health needs by:

- developing and delivering educational approaches embracing non-formal courses to support adults aged 19+ to aid recovery from mental health problems
- developing and delivering workforce development to ensure the teachers, managers and volunteers involved in the pilot are trained to use these approaches effectively.

Pilot activity will also include:

- identifying and testing different approaches to outreach and referral of eligible individuals
- working with external evaluators to identify the impact and cost benefits of different types of course
- collecting data and evidence about the impact of using educational approaches to help people manage, and recover from, mild to moderate mental health problems.

Mental health partners will be keen to work with applicants to develop local training packages. We strongly encourage these joint arrangements, particularly if they involve *mutual, cross sector development* (i.e. mental health partners learning about educational approaches and vice versa). These local links will help raise awareness of educational approaches to improving mental health, increase referrals to applicants’ provision and make it more sustainable.

Applicants must list all partners, including other training providers (*not* subcontractors), health and mental health services such as General Practitioners, Improving Access to Psychological Therapies (IAPT)\(^4\), NHS funded Recovery Colleges, and other organisations such as MIND, Samaritans etc.

**Contracting**

The contract will cover the period April 2015 to March 2016. Learners must complete their learning by 31 March 2016.

We will only fund activity and outputs achieved within the contract period. All outputs, including the provision of accurate and complete monitoring data to the research contractor, must be completed by June 2016.

The Agency is seeking to award contracts based on Local Authority areas. We will award no more than one contract in any Local Authority area. The Local Authority areas have been divided into each of the six *Agency operational areas* of the North East, North West, South West, South East, Midlands and London. The Agency is seeking to award a minimum of five contracts in each of the six geographical areas. See Annex 1 for the list of Local Authority areas.

We encourage applicants to work with other learning providers, health and mental health service providers and other relevant organisations to maximise the potential for innovation, new ideas and geographical coverage.

**Learner Eligibility**

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\(^4\) Improving Access to Psychological Therapies is an England-wide NHS programme offering mental health interventions approved by the National Institute of Health and Clinical Excellence (NICE)
Course participants:

- must be adults aged 19 and over
- must be experiencing mild to moderate mental health problems
- may self-refer if they are experiencing mild to moderate mental health problems
- may be referred by an IAPT team, a NHS funded Recovery College⁵, a housing association, GPs, Jobcentre Plus, the careers service or any other relevant local service.

It will be important that applicants approach their local IAPT team and/or other mental health partners to discuss and identify eligible individuals from harder to engage groups who may particularly benefit from the adult education approach to recovery from mental health problems.

Applicants will be expected, where necessary, to assess and provide support for eligible people with learning difficulties and/or disabilities. Within your proposal, your costs should take account of the fact that you are expected to meet the cost of reasonable adjustments as set out in the Equality Act 2010.

Workforce Development

Mental health courses must be designed, developed and delivered to a high quality standard. The funding will cover workforce development for teachers, managers and volunteers involved in this project. Applicants’ proposals should describe arrangements for local workforce training/activity which should include course design, the use of mental health and wellbeing assessment tools, and the development of relevant skills and teaching/learning approaches, including the use of co-production and co-delivery approaches.

Funding will only be provided for training staff directly involved in the design, development and/or delivery of these courses. It must not supplement an applicant’s day-to-day workforce development programme for other types of provision.

Development and Design

This pilot will provide for the development and design of Community Learning mental health courses. Applicants’ proposals should set out how course development and design work will be undertaken.

If you are already offering non-formal mental health courses, you should explain how your proposal will extend the range of these courses, pilot new approaches, reach additional learners and add to the evidence base.

Each proposal must:

- be developed in partnership with local health and mental health services, such as the IAPT team, Psychological Wellbeing and Work pilot, NHS-funded Recovery College and/or other local mental health partners
- show how the proposed adult learning courses complement other local mental health interventions, which are likely to vary from area to area
- not duplicate or compromise other local mental health activity.

Community Learning Mental Health Courses

⁵ NHS-funded Recovery Colleges: in England deliver courses to help people with moderate to severe mental health problems manage their recovery and stay well; courses are co-developed & co-facilitated by mental health professionals and people who have personal experience of mental disorders; Recovery Colleges have an ethos of local partnership working and some FE colleges and adult education services are already actively involved
There is no overall blueprint for the content of these courses. They may:

- tackle a mental health condition directly, for example through a ‘Manage your Stress’ course
- use activities, such as art, music, craft, dance etc. to enable people experiencing mental health problems to share, develop and practise strategies for recovering mental health.
- complement interventions such as IAPT, NHS-funded Recovery College courses or other activities commissioned by local mental health services.

However, the learning offer must include:

1. **Pre-course discussion - and 1:1 support** - individual support for each course participant, according to length of course, to help them select their course, discuss progress and plan for progression to employment, vocational/academic training and/or fulfilling family and community life.

2. **Short, part-time non-formal courses** to help eligible learners experiencing mild to moderate mental health problems to develop the tools, strategies and resilience to:
   - manage and aid recovery from, mental health problems
   - reduce their use of medical services
   - re-engage with their families and communities
   - progress to further learning/training and/or
   - progress to work, or return to work.

3. **Informal ‘top-up’ mental health workshops**, as required, for people who have progressed from courses but need subsequent support at stressful times.

Each of the elements above must be recorded in the learner’s learning plan.

Many people who are experiencing a period of mental ill health will prefer to learn in an educational or community venue. Proposals should reflect discussions with your mental health partner/s and take into account local facilities and the needs of learners.

**Learner attendance**

Learners participating in these courses are likely to be at a vulnerable time in their lives. Applicants must set out in their proposals how they plan to explore different approaches to supporting people who are experiencing difficulties or who leave the course early.

Some learners may be referred to an alternative intervention, such as one to one cognitive behavioural therapy offered by the local IAPT team. These learners will remain part of the evaluation and their anonymised details will be included in the evaluation dataset.

All learners must be recorded on the Individualised Learner Record (ILR) using the specific pilot codes (tbc) when enrolling and completing courses. Applicants will need to provide additional data and evidence for the external evaluation. Whilst multiple enrolments per learner are permitted, learners should only be enrolled on courses that will benefit their recovery.

**Progression**

Progression may take the form of improved anxiety/depression and wellbeing scores, reduced use of medical services, a return to employment, moving on to learning/training, re-engagement with family and/or active participation in community life.

These are short, part-time community learning courses. Progression may well take place after the course finishes. Applicants must include in their proposals how they will gather
evidence about the impact/s of courses and track participants’ onward journeys. All pilots will be required to:

- use standard tools to measure anxiety, depression and wellbeing likely to be GAD-7 (measures anxiety) and PHQ-9 (measures depression) and evaluate participants’ progress in recovering from mental ill health
- collect participants’ self-reported evidence of recovery, such as impacts on confidence, life satisfaction, social relationships, perceptions of self-worth and life goals
- record progression outcomes, including to employment, vocational / academic training, and family/ civic re-engagement

Applicants must share all relevant data, findings and assessment results with the external evaluator, for publication in the interim and final evaluation reports. All learner names will be anonymised.

**Course costs**

The majority of eligible adults aged 19 and over with mild to moderate mental health problems will not be expected to pay course fees.

However, some participants will be able to contribute to course costs according to their personal circumstances. Applicant’s proposals should describe arrangements for ensuring that people without the means to pay are not charged course fees, and those with the means to contribute pay an appropriate contribution.

Applicants should describe how they will use any income generated through their mental health courses, for example to widen their reach to disadvantaged people with mental health problems, and/or purchase resources and equipment to add value to their mental health work.

**Funding and payments**

The Agency intends to align as far as possible the funding principles and arrangements for the Community Learning Mental Health Pilots with our Community Learning funding arrangements. This means we will pay on profile and providers must complete a funding claim at the end of the 2014 to 2015 and 2015 to 2016 funding years (as this pilot spans two academic years). Any declared unspent funds will need to be returned to the Agency.

The funding (and payments) available for each local authority area is up to £80,000 including any irrecoverable VAT. Provider proposals should not exceed this amount and proposals should represent value for money in terms of development cost versus learner engagement over the pilot period.

The Agency will provide funding for the pilot to cover the costs of:

**Development** – to include:

- workforce design and development for teachers, managers and volunteers involved in the pilot (development costs)
- mental health course design and development, including co-production approaches where applicable (development costs)

Whilst there is no maximum limit being set for the proportion of funding that can used for development costs, the Agency is seeking to ensure that there is a balance between development and delivery costs so that learner volumes are sufficient to inform the evaluation.
We recognise that proposals from applicants starting a new suite of mental health courses may have a higher proportion of development costs than those building upon and/or extending an existing mental health offer.

**Delivery** – to include:
- workforce development delivery (delivery)
- individual pre-course assessment (delivery)
- mental health course delivery (delivery)
- 1:1 support for course participants (delivery)
- as required, informal ‘top-up’ mental health workshops (delivery).

The delivery funding will also need to cover necessary support costs for learners with learning difficulties and/or disabilities, costs of on-going liaison with local health and mental health services, meetings with and reports to the external evaluator, and liaison with the BIS-appointed co-ordinator. In addition, costs should include sharing good practice with other providers.

Applicants must complete the funding tables in the Funding Spreadsheet which include details of your proposed development and delivery costs, an indication of possible course and learner numbers and proposed high-level outline timetable.

**Funding Arrangements**

The following arrangements will apply to this pilot:
- development and delivery costs will be paid on profile over the period of the pilot
- development costs can be paid over the first four months if required; please state this in your bid
- applicants will sign a funding declaration at the end of pilot and any unspent funds will be returned
- learner enrolments must be recorded on the ILR.

**Monitoring**

The Agency will monitor the contracts let through this specification and will intervene to address issues of underperformance.

The provision set out in this specification will be subject to the Agency’s Performance Management arrangements.

**Provider Information Sessions**

The Agency will be holding three provider information sessions during the week commencing 12 January 2015.

This will give potential applicants the opportunity to ask questions and obtain further information on this pilot.

**External evaluation of the pilots**

Evaluation will be undertaken by BIS appointed external evaluators with a sound understanding of educational approaches to recovery from mental health problems and credibility in both the adult education and mental health sectors.

The evaluation will compare the effectiveness of different approaches to workforce training, outreach, referral and mental health course delivery. These approaches may be new, or
already in use. It will also seek to evaluate the comparative outcomes of educational approaches and other interventions, though this may prove complex if participants take part in multiple interventions.

Applicants must work with external evaluators to collect data and evidence about the impact of using educational approaches to help people manage mild to moderate mental health problems, including the testing / assessment of different approaches to outreach and referral, and workforce development. To note, provider tender documents will be shared with the evaluator.

BIS will work with NHS health and mental health services at departmental level. Individual local projects will work with their IAPT teams, Psychological Wellbeing and Work pilots, NHS Recovery Colleges at the local level.

**Definitions**

The following definitions apply to this pilot:

a) **mild to moderate mental health problems**: includes depression, anxiety and sleep disorders.

b) **non-formal learning**: is structured learning, embedded in planned activities; and is intentional from the learner’s point of view.

c) **co-production and co-delivery**: describe involvement of service users, in this case people with personal experience of mental health problems, in the design and delivery of public services, in this case adult education courses.

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DWP pilots to find the best ways to improve employment and health outcomes for benefit claimants of working age who have mental well-being needs, so they can find - or move closer to - work
## ANNEX 1

### SKILLS FUNDING AGENCY AREAS – LOCAL AUTHORITIES

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