



Care Services Improvement Partnership **CSIP**

West Midlands
Development Centre

Report on the 3-Day Training Programme for Carers and Staff to Prepare them to Deliver a Programme of Information Sharing, Coping Strategies and Support to Black and Minority Ethnic Carers

Birmingham, 23-25 January 2008

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August 2008

Executive Summary

1. The training was the second course commissioned by CSIP in order to develop skills for delivering Carers' Education and Support to BME groups in the West Midlands, the first course having ran in January of 2007.
2. The training followed the same format as the 2007 course, being delivered over three days by a team consisting of two Meriden Programme Clinical Specialists, a CPN and a carer. All team members were trained Meriden Family Work trainers.
3. Course content mirrored the 2007 course. Minor alterations were made in accordance with feedback from the 2007 programme.
4. There were twenty-two course participants, sixteen professionals and six carers
5. Course participants were relatively inexperienced in delivering training prior to the three-day Caring for Carers training course
6. Overall levels of reported knowledge and confidence in training across a variety of topic areas increased following the course. Participants also felt that they had developed a better understanding of carers' needs and the importance of sharing information and developing networks to support this
7. Knowledge levels on all twelve topic areas measured increased over the three-day course
8. Confidence levels on all twelve topic areas measured increased from prior to the course
9. Overall, the course rated very well in terms of meeting its objectives (with 32% of participants giving it the maximum score possible and an average rating given of 8.2 out of 10). Participants also commented very positively on course organisation, quality of trainers and event facilities
10. Course participants reported very positive feedback following the course commending the variety, relevance and appropriateness of topics covered and encouragement that they received from trainers
11. Overall, participants remarked that they valued the group-work and having the opportunity to develop their skills in a very practical way
12. Participants rated the Workbooks and course materials that they received as excellent, also noting that they were easy to use and a good guide for future training
13. Participants commented that they would value follow-up meetings/refresher days in order to share their knowledge and experiences of delivering local training courses
14. Demographic measures revealed that the majority of participants were staff members (73%); female (86%) and that the average age was 45 years (range 32–60 years). There was representation from a wide variety of ethnic groups

Introduction

The innovative “Caring for Carers: A Training Programme for Black and Minority Ethnic Carers of People Experiencing Mental Health Problems”, was developed by the Meriden Programme as a direct result of scoping work undertaken by the BME Sub Group of Carers in Partnership. The initial pilot programme was delivered in January of 2007 with the support of the West Midlands Care Services Improvement Partnership (CSIP). Following its successful evaluation, CSIP again provided support and funding for this second roll-out in 2008.

The BME ‘Caring for Carers’ training course detailed in this report aims to prepare staff and family members to deliver an eleven-week programme of information-sharing, coping strategies and support to carers of people experiencing mental health difficulties with a specific emphasis on the needs of Black and Minority Ethnic (BME) carers. The programme is designed to bring together small teams of staff and carers in order that they can develop their skills in training and supervising others in a highly collaborative, practical way over three-days. It is expected that by using this cascade model of training, participants on the three-day course will go on to deliver locally tailored carer support and education packages that specifically meet the needs of their local communities.

The aims of the course were achieved through experiential learning and the provision of an extensive range of written materials. A detailed manual was prepared detailing eleven modules covering the following topics:

- Introduction – the experience of mental health problems in a family
- Experiences of caring
- Education and information sharing – diagnosis and treatments
- Information on local mental health services
- Communication in families
- Communicating with professionals
- Problem solving
- Dealing with crisis and relapse management
- Recovery and hope
- Taking care of your own health
- Each of the modules detailed above contained information specifically relevant to BME carers

In terms of learning outcomes for the course, it was anticipated that by the end of the course, participants would:

- Develop a culturally sensitive knowledge base for sharing information with carers from diverse backgrounds
- Develop the practical skills to help carers develop a range of coping strategies
- Demonstrate the presentation skills required to share information with carers, including working with interpreters where appropriate
- Demonstrate ability in planning, organising and delivery of courses, delivery of presentations and facilitation of group learning
- Have an understanding of the resources available to support the planning and delivery of courses
- Develop an overview of the programme to be delivered to carers and consider how the programme may need to be adapted to meet the needs of specific BME carers and communities
- Consider the impact of race, culture and faith upon the service user and carer experience, and how these impact on care pathways and access to mental health services

The course was delivered through Meriden, the West Midlands Family Programme which is known both in the UK and worldwide as a programme that has expertise in relation to carers’ issues and the implementation of family work. The course was delivered by Paula Conneely (Clinical Specialist & Trainer, Meriden Programme), Yasmin Malik (Community Psychiatric Nurse and Meriden Trainer), Chris Mansell (Clinical Specialist & Trainer, Meriden Programme), and Peter

Woodhams (Carer and Meriden Trainer). It was considered essential to have a carer as a member of the training team who would act as a model for the carers on the course who were being trained as trainers. This concept was reinforced by the feedback received following the 2007 programme. The format of the course was that some didactic material was presented, but it was primarily skills-based training. Participants had to practice the skills that were introduced, receive feedback, then practice again, thereby developing their skills.

Course Participants

There were twenty-two participants on the course, sixteen staff (employed in a range of roles including: Nurse; Social Worker; Occupational Therapist; Carer Support Worker; Community Development Worker) and six family members. Of the twenty-two participants, nineteen were female (fourteen staff members and five family members) and three were male (two staff members and one family member) and the age range was 32-60 years with the mean age of participants being 45 years old.

As this course was aimed at training participants to deliver a programme of information-sharing, coping strategies and support to BME carers it seems pertinent to report a breakdown of participant by ethnic group.

Ethnic Group	Number of Participants Reporting Identification with Group
Asian Indian	7
Asian Pakistani	1
Asian Chinese	2
Asian Other	2
Black African	1
Black African Caribbean	5
Black Other	1
White British/European	1
White Irish	1
Other	1

A variety of both statutory and non-statutory organisations were represented: Alzheimer's Society, Sandwell; Axis (Birmingham City Council's team offering support for Black and Minority Ethnic people who are facing mental health difficulties); Care Services Improvement Partnership; Chinese Community Centre, Birmingham; Coventry and Warwickshire Partnership NHS Trust; Coventry Teaching Primary Care Trust; Future Health and Social Care; North Staffordshire Carers' Association; Stoke-on-Trent City Council; Tamarind Centre (Registered charity based in Coventry offering support to Black and minority Ethnic people who are facing mental health difficulties); Walsall Mental Health Carers Support Service; Worcester Mental Health Partnership NHS Trust; Worcestershire County Council. The rationale for recruiting participants from a range of organisations in this way stemmed from the Meriden Programme's experience of training carers in isolation which highlighted the need for supervision and support at a local level. In order to ensure that the carer education and support programmes could be successfully rolled-out, fully implemented and mainstreamed, collaboration between carers and service providers seemed advantageous. Again, this concept was reinforced through feedback received following the 2007 programme.

Course Evaluation Measures

In order that a course evaluation could be carried out participants were given a number of questionnaires both at the start and finish of the three-day course. These were as follows:

- 1) Background Questionnaire (Demographic Measure) – Appendix 1
- 2) Background Questionnaire on Previous Training Experience (pre-course) – Appendix 2
- 3) Knowledge and Confidence Questionnaire (pre- and post-course) – Appendix 3
- 4) General Feedback Questionnaire on three day course (post-course) – Appendix 4
- 5) General Evaluation of three day course (post-course) – Appendix 5

Results

Because we are dealing with small numbers, most of these results will be presented as figures rather than percentages.

a) Background Questionnaire on Previous Training Experience

This questionnaire dealt with participants' previous experience and training in running training courses, all twenty-two participants responded to this questionnaire. An even split of eleven participants (eight staff and three carers) reported that they had received some previous training in how to train others whilst eleven (again, eight staff and three carers) said they had not. When reporting experience of training others or running training courses the group was less evenly divided with sixteen participants reporting that they had had some experience of this and six reporting that they had not. Of those who reported having some experience in this area, thirteen were staff and three were carers. Of those who reported having no experience in this area there were three staff and three carers.

When asked if they currently offered training to others again, eleven reported that they did, eleven that they did not. Of the eleven that did (eight staff, three carers), reports of the frequency that they were required to do so ranged from once a month to once every three months. Ten participants (nine staff, one carer) had experience of training multidisciplinary professional groups. Fourteen participants (thirteen staff, one carer) had experience of training unqualified/care staff/ volunteers. Eleven participants (eight staff, three carers) reported having experience of training carers/family members which was an even split between those who had no experience of doing this. When asked to report the topic areas they most commonly presented on these included: psychoeducation/information sharing, health promotion, coping strategies, self-development, assertiveness/confidence training, mental /physical health, values and attitudes around diversity issues, mental health law, computing and information technology.

In summary, sixteen participants had some experience of training others/running training courses (thirteen staff and three carers) yet only eleven participants reported receiving training on how to be a trainer (eight staff and three carers).

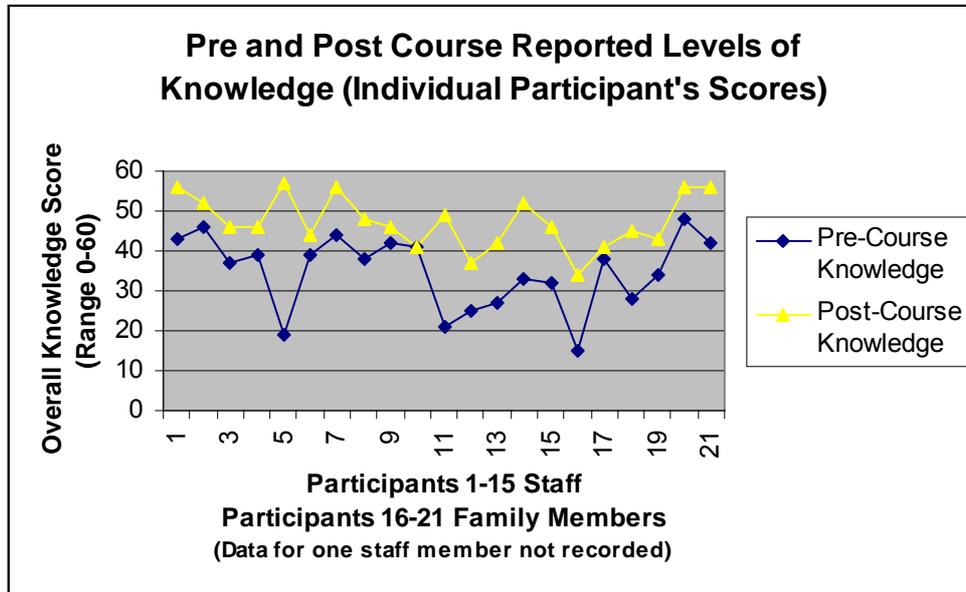
b) Knowledge and Confidence Questionnaire (Pre- and Post-course Measure)

A questionnaire (Appendix 3) assessing the participants' knowledge of and confidence in delivering training on the different relevant topic areas such as provision of information, problem-solving, communication skills etc. was distributed to participants on the first morning of the course, and at the end of the three day training. Participants' pre- and post-course self-ratings were compared. Twenty-one of the twenty-two participants completed each of the pre- and post-course measures, one participant was excluded from this section of the evaluation as they did not complete the pre-course measure therefore making comparison between their scores impossible.

Individual Participant's Knowledge and Confidence Ratings

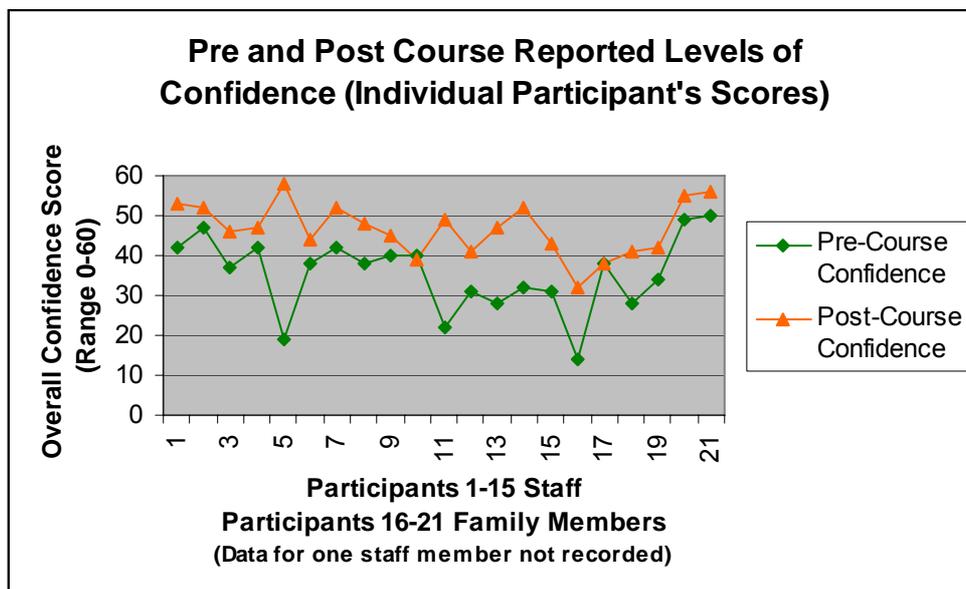
In terms of changes in knowledge from pre- to post-training, twenty participants reported increases in knowledge over the three days of training (one reported no change). Individual participants' knowledge ratings can be seen in Table 1 (the possible range of scores was from 0 to 60 for each construct - knowledge and confidence). In the case where knowledge appeared not to have increased (Participant 10) this might be explained by the fact that the training had highlighted perceived gaps in the participants' knowledge base and/or that he or she needed more time to assimilate the knowledge that he or she had gained on the course.

Table 1



With regard to changes in confidence from pre- to post-training, twenty participants reported that this increased over the three days of training. Individual participants' confidence ratings can be seen in Table 2 (Participant 10 reported a decrease in confidence by 1 point and Participant 17 reported no change). Where confidence appeared to have decreased slightly (Participant 11) this is not an unusual finding in that the concept of a post-training confidence 'dip' is well documented. For some, exposure to all the material they will have to deliver, and the reality of making presentation results in a drop in confidence. This usually settles once people begin to deliver training, realise that they can do it, and begin to get feedback from those they train.

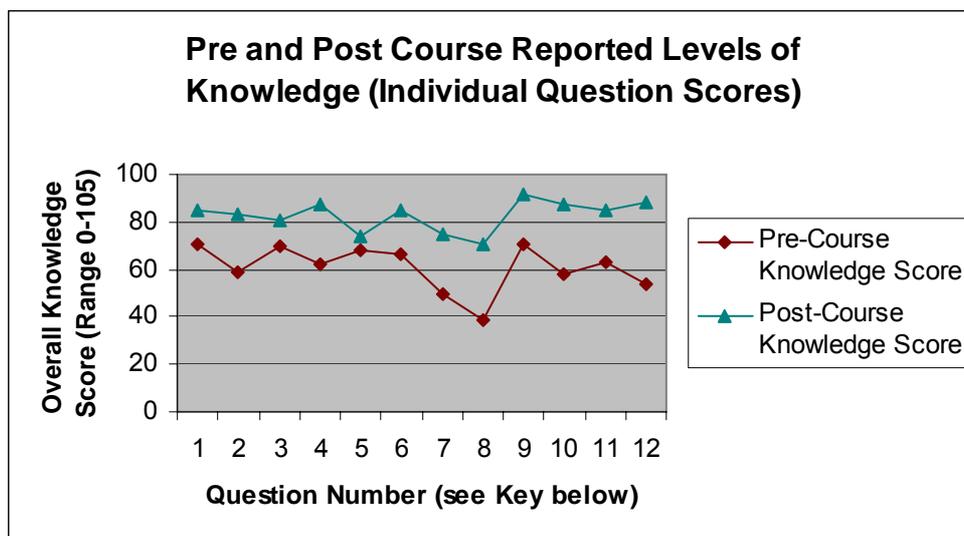
Table 2



Knowledge and Confidence Ratings Across Topic Areas

In terms of changes in knowledge from pre- to post-training across topic areas, there was an overall increase in the level of reported knowledge over the three days of training. Individual question knowledge ratings can be seen in Table 3.

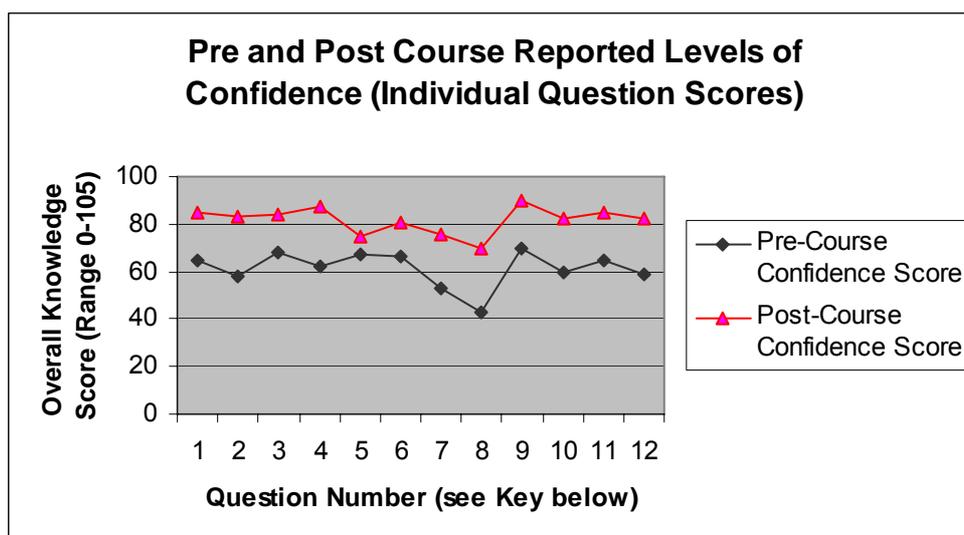
Table 3



Key - Rate both your knowledge and confidence in the topic areas below: **1.** The experience of carers who have a relative with mental health difficulties; **2.** The specific issues facing BME carers; **3.** Information about mental health problems; **4.** Communication skills in families; **5.** Knowledge of local services; **6.** Problem-solving skills; **7.** Relapse prevention strategies; **8.** Hope and the Recovery Model; **9.** The importance of carers looking after themselves; **10.** Skills for making presentations to carers; **11.** Skills for facilitating group activities with carers; **12.** How to plan a carers support programme

With regard to changes in confidence from pre- to post-training across topic areas, there was an overall increase in the level of reported confidence over the three days of training. Individual question confidence ratings can be seen in Table 4.

Table 4



Key - Rate both your knowledge and confidence in the topic areas below: **1.** The experience of carers who have a relative with mental health difficulties; **2.** The specific issues facing BME carers; **3.** Information about mental health problems; **4.** Communication skills in families; **5.** Knowledge of local services; **6.** Problem-solving skills; **7.** Relapse prevention strategies; **8.** Hope and the Recovery Model; **9.** The importance of carers looking after themselves; **10.** Skills for making presentations to carers; **11.** Skills for facilitating group activities with carers; **12.** How to plan a carers support programme

c) General Feedback Questionnaire

A general feedback questionnaire was distributed to participants at the end of the three-day training course (Appendix 4; results Appendix 6). On a scale from 0 (very poor) to 4 (excellent), the mean rating of the content of the course was 3.7, with positive comments made about the relevance, and comprehensiveness of material covered. The mean rating for the presentation of the course was 3.7, with participants noting the interactive nature, clarity and encouragement from trainers as being particularly beneficial. The mean rating for the content of the written materials and workbooks was 3.8 with comments that they were easy to use and a valuable resource for future training. A couple of participants also expressed the desire to have a copy of the Manual in an electronic format.

Participants noted a great many gains from attending the course including enhanced knowledge and confidence across a range of topics. Participants also noted that they felt better able to organize and deliver training courses and that their group facilitation skills had improved. The opportunity for networking was also valued.

Comments included,

"I have gained confidence in working within groups. Knowledge gained has been great. Feel valued as a carer, which makes a change!"

"The quality of training was excellent. It was interactive and enabled me to use and learn skills as a carer and professional. It will enhance my quality of life as a carer"

"I learnt a lot of practical skills which you never think about in your daily life generally"

d) General Evaluation Form

An evaluation form was also distributed to participants at the end of the three-day training course (Appendix 5). Firstly participants were asked to rate the extent to which they felt the course met its objectives on a scale from 0 (not at all) to 10 (completely) for which the mean rating was 8.2. On a scale of 0 (poor) to 3 (excellent) participants were asked to rate: Pre-event notification and administration (mean 2.4); Quality of trainers (mean 2.9); Event facilities (mean 2.2) and Information packs (mean 2.8).

The practical elements of both the content of the course and the way in which it was delivered really appealed to participants with many stating that they valued having the opportunity to practice skills through role-play, and developing their abilities to be able to both give and receive feedback in a positive, supportive way. Participants remarked on the emphasis on recovery and hope as being particularly useful with regard to this training.

With regard to follow-up, most participants said that they would value follow-up meetings/workshops/refresher days whereby the group could come back together to share knowledge and experience. Maintaining contact with other trainees and Meriden trainers and developing networks also appeared to be important to participants.

"I found the content very informative. Great framework to work with"

"The 3 days was a very positive experience for me. First time I have attended a training where positive feedback was given"

"I have enjoyed the 3 days and learnt new skills to deliver courses in the community, to make a difference to mine and other lives who are carers like me"

Summary of Results

This report focuses on the second roll-out of “Caring for Carers: A Training Programme for Black and Minority Ethnic Carers of People Experiencing Mental Health Problems”. The programme evaluation demonstrates that this training was well received by participants and was effective in increasing reported knowledge and confidence ratings.

The Way Forward

In addition to the delivery of the two 3-day training courses in 2007 and 2008, a number of other initiatives and support networks have been established. Following the first “Caring for Carers” course, a follow-on day for participants was facilitated by the Meriden Programme. Following training of the second cohort, a further day was organised which brought together participants from both courses and enabled feedback from trainers who had already rolled-out carer education programmes within their own communities.

Feedback from trainers indicated a number of successful roll-outs had already been undertaken, including programmes delivered in Mandarin and Hindi. A number of participants reported that they had altered their practice following the course; delivering existing carer education packages in a different way, adapting existing generic groups, and delivering entirely new support programmes based on the Meriden model. This verbal feedback was found to be useful, but highlighted a need to establish outcomes in a more structured and systematic manner. As such, a regional evaluation form was devised which will be sent out on a regular basis to participants to ascertain the specific attributes/frequency of rolled-out BME carer education packages. These data will be monitored jointly through both the Meriden Programme and CSIP West Midlands.

Further issues highlighted through the follow-on workshops were general support and supervision, and the benefits of networking with others trained in delivering family and carer interventions. As a result, the Meriden “Transcultural Family Work Forum” was suggested as a venue where participants could gain support and guidance. This bi-monthly special interest group was originally established as a forum for family workers with an interest in working with BME families and will be extended to meet the needs of “Caring for Carer” participants from September 2008.

As referred to earlier within this evaluation, both the 2007 and 2008 BME “Caring for Carers” courses were commissioned through CSIP West Midlands. A further training course is now scheduled for January 2009 under the same funding arrangements. Due to each cohort’s successful evaluation, the next 3-day programme will remain similar in format - with additional materials added in line with feedback received from course participants and the funding body.

**Family Interventions Training Programme
Background Questionnaire
Caring for BME Carers**

Name: _____ **Trust:** _____

Age: _____ **Sex:** Female 1
Male 2

Ethnic Group:

- Asian - Indian
- Asian - Pakistani
- Asian - Chinese
- Asian - Other
- Black - African
- Black – African Caribbean
- Black - Other
- White British / European
- White Irish
- Other

1
2
3
4
5
6
7
8
9
10

Designation:

- Nurse
- Social Worker
- Occupational Therapist
- Clinical Psychologist
- Psychiatrist
- Counsellor
- Substance Misuse Worker
- Social Worker
- Support / Project Worker / Care Assistant
- Carer Support Worker
- Community Development Worker
- Carer
- Service User
- Other (Please State)

1
2
3
4
5
6
7
8
9
10
11
12
13
14

1. **Do you have a clinical or professional qualification? If yes, please give details (eg. type and length of time held):**

2. **Please list any relevant health/care-related training you have received (if different to above):**

3. **Have you personal experience of being in a caring role for someone who is unwell? If so, how long have you been in this role?**

4. Have you had any specific training in working with families? **Yes**

1
2

No

If yes, please describe below:

5. Are you currently involved in working with families? **Yes**

1
2

No

If yes, in what capacity?:

6. Do you currently work with those with severe and enduring mental health problems?

Yes

1
2

No

If yes, is your job specifically focused on this client group? **Yes**

1
2

No

8. What motivated you to participate in the training?

THANK YOU VERY MUCH FOR YOUR CO-OPERATION

Please return this questionnaire to: Your Course Trainer or

The Meriden Programme
 Birmingham & Solihull Mental Health NHS Trust
 Tall Trees, Uffculme Centre
 Queensbridge Road
 Moseley
 Birmingham
 B13 8QY

PRE-TRAINING COURSE QUESTIONNAIRE ON
PREVIOUS TRAINING AND SUPERVISION EXPERIENCE
(Caring for BME Carers January 2007)

Name:

Date:

- 1. Have you attended any courses/received any previous training on YES/NO how to be a trainer?**

If yes, please describe

- 2. Have you had any experience of training others/running training YES/NO courses?**

If yes, please describe

- 3. Does you currently offer training to others? YES/NO**

If so, how frequently? (please tick one)

a) Once a month

b) Once every 3 months

c) Once every 6 months

d) Once a year

4. If you have had training experience has it involved the following:
(please tick all that are relevant)

	YES	NO
a) Training multi-disciplinary professional groups	<input type="checkbox"/>	<input type="checkbox"/>
b) Training unqualified/care staff/volunteers	<input type="checkbox"/>	<input type="checkbox"/>
c) Training carers and family members	<input type="checkbox"/>	<input type="checkbox"/>

5. List the top 3 topic areas you most commonly present on:

i)

ii)

iii)

CARING FOR BME CARERS

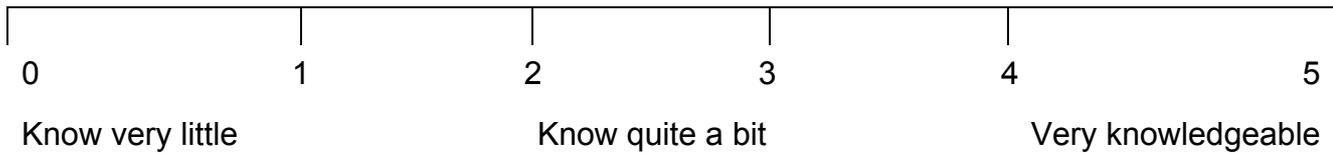
PRE-TRAINING EVALUATION OF KNOWLEDGE AND CONFIDENCE

Name:

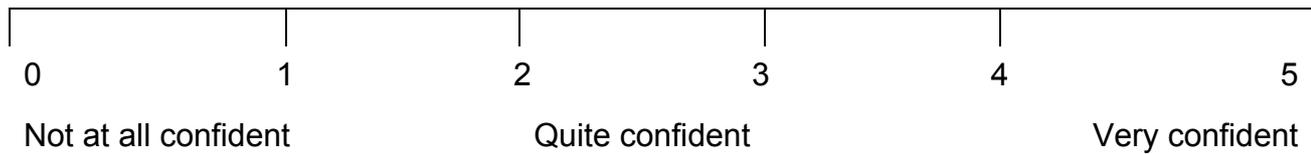
Date:

Please note both your knowledge of the topic areas below, and your confidence in training others on the following scale

Knowledge



Confidence in Training Others



1. The experience of carers who have a relative with mental health difficulties

Knowledge:

Confidence:

2. The specific issues facing BME carers

Knowledge:

Confidence:

3. Information about mental health problems

Knowledge:

Confidence:

4. Communication skills in families

Knowledge:

Confidence:

5. Knowledge of local services

Knowledge:

Confidence:

6. Problem-solving skills

Knowledge:

Confidence:

7. Relapse prevention strategies

Knowledge:

Confidence:

8. Hope and the Recovery model

Knowledge:

Confidence:

9. The importance of carers looking after themselves

Knowledge:

Confidence:

10. Skills for making presentation to carers

Knowledge:

Confidence:

11. Skills for facilitating group activities with carers

Knowledge:

Confidence:

12. How to plan a carers support programme

Knowledge:

Confidence:

Caring for BME Carers Feedback on 3 Day Training

24-26 January 2007, Birmingham

RATING SCALE

0 Very Poor/ Inadequate	1 Poor	2 Average/ Acceptable	3 Good	4 Excellent
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Please use the above rating scale to rate the content and presentation of the training.

A **CONTENT** - irrespective of presentation, to what extent was the content relevant, appropriate and useful? Rate (0-4):
Comments:

B **PRESENTATION** - irrespective of content, to what extent was the material appropriately and clearly presented? Rate (0-4):
Comments:

C **WRITTEN MATERIALS, WORKBOOKS ETC**
Please rate the quality of the material you were provided with on the course.
Rate (0-4)
Comments:

D List 3 key things you gained from being on the course. This can include knowledge, skills or changes in attitude.

E Is there anything else you would have liked to have covered on the course?

F Any other general comments

Remarks

Which parts of the Training did you find most useful?

Which parts of the Training did you find least useful?

What follow up do you think would be useful to build on this Training Event?

Any other comments:

Thank You

Feedback Evaluation for BME 3- Day Training Event 23rd, 24th, 25th January 2008

Content	Comments	Presentat-ion	Comments	Written materials, workbooks etc	Comments	List 3 key things you gained from being on the course.	Is there anything else you would have liked to have covered on the course?	General Comments/Suggestions for Improvement	
4	Reminder, further refined my skills	3	Good, what would help people with sight issues - not to use green pen on flip chart, unable to see		4	Clear and simple and sectioned	Contact with other carers, professionals caring for carers in the region. Use of tools to use in communication and problem solving	I am sure there is something, I cannot think at present	Good course with support. Friendly participants
4	Found the content very informative. Great framework to work with	4	Great visual aids - good idea to have copy of all the slides that were used so we could add notes next to		4	Valuable resource	I have gained confidence in working within groups. Knowledge gained has been great. Feel valued as a carer, which makes a change!		Really enjoyed the course. Thanks to all facilitators
3		3			3		Clarity on effective use of course	Dealing with external stigma and stigma from extended families	Specific BME issues
4	I have enjoyed the 3 days and learnt new skills to deliver courses in the community to make difference to mine and other lives who are carers like me	4	The quality of training was excellent. It was interactive and enabled me to use and learn skills as a carer and professional. It will enhance my quality of life as a carer		4	Workbook is an excellent framework for me to go and deliver it in my city	Positive feedback. (Idea of how I will do differently was new one). Communication skills was excellent (dealing with difficult feelings). I am confident that I can deliver training - practice in group helped		A suggestion only - please have fruit if possible for break times and for morning times. If possible try to have different menu for 3 days
4		4			4		Feel more confidence in carrying out group work. Doing presentations in a more confident manner. The need to carry out carer education programme	More time for role play	The 3 days was a very positive experience for me. First time I have attended a training where positive feedback was given.

Content	Comments	Presentat-ion	Comments	Written materials, workbooks etc	Comments	List 3 key things you gained from being on the course.	Is there anything else you would have liked to have covered on the course?	General Comments/Suggestions for Improvement
4		4		4		The level of knowledge people bring to group. Met people that I will keep contact with. Built my confidence level	More time for role play	I have enjoyed the 3 days
4		4		4	Very easy and useful to use. Could adapt for others to use. Clear and precise	The importance of pre-planning. SMART reinforced past learning. Confidence to take the knowledge to groups		
3		4		3		Knowledge in planning sessions. Need to look at how I use my head in talking. Improved skills	Stigmas and African Caribbean issues	
3		3		3		Confidence in my ability to facilitate. Increased my facilitation skills	Specific BME issues and examples	
4	Every topic covered was extremely relevant	4	Very well presented and extremely well organised and delivered	4	Recycled pencils from CD cases? Brilliant!	Knowledge of problem solving. Attitude - use of positive feedback. Skills - listening + role play etc	More BME culture for those not from BME communities	Extremely good course very informative
4		4		4		How to organise a carers group. Improve presentation skills. A bigger insight into the dynamics of carers	More work on presentation skills	Very welcomed
4	Practical/relevant and set in the lives and experience of carers	4	Clear, well organised	4	Everything in more detail - very useful as a resource	Re-visiting areas of communication. Recovery hope for carers/loss - gave me skill and confidence to take forward	It was all covered	I really enjoyed the course and I have come away feeling I have learned how to take on the tasks ascribed. Thank you
4	Content of course was relevant, precise and extensive	4	Facilitators were very professional, approachable and very encouraging	4		Confidence in ability to facilitate. Acknowledging your own strengths. Ability to be honest about things you are not sure of		

Content	Comments	Presentat-ion	Comments	Written materials, workbooks etc	Comments	List 3 key things you gained from being on the course.	Is there anything else you would have liked to have covered on the course?	General Comments/Suggestions for Improvement	
4		4			4	Sharing experiences. How to put knowledge into practice. Sensitive issues in group work and how to address	Government funding - how to apply?	Enjoyable and informative	
4		4			4	Good knowledge. Practical skill. Positive attitude	Skill to relax		
4	A lot was covered	4	Enjoyed all the people who presented but Peter was somebody I enjoyed listening to a lot		4	Very easy language easy to understand	Knowledge. Confidence. Skills	For me as somebody who had never been on any courses, it seemed that a lot was covered	I learnt a lot of practical skills which you never think about in your daily life generally
3	Could have a little more on BME specific issues	4	Clear presentation		4	Very impressed with materials very thorough. Would like an electronic version	Specific skills on family work intervention. It's hard work! Loads of knowledge gained		
2		2			3		Trainers role. Networking. Flexible	More time for role play practice	Group was too big - limited to no more than 18
4		4			3	Knowledge and skills on delivering a BME Carers training. More confidence on facilitating carers training	Information on other BME specific carers training provided around the country		
4		4			4	Maybe an idea to put it on a cd format. Would like to have group work recorded on a cd as a learning tool	Skills on facilitated groups. Dealing with difficult situations. Knowledge recovery		
3		3			4		Knowledge and experience from others. Presentation skills. Role play / skills practice	Local contacts. Invite medical professionals. Invite previous trainees	

Content	Comments	Presentat-ion	Comments	Written materials, workbooks etc	Comments	List 3 key things you gained from being on the course.	Is there anything else you would have liked to have covered on the course?	General Comments/Suggestions for Improvement
4		4		4		Improved outlook on carers. Enhanced knowledge on communication. Enhanced problem solving skills.	More knowledge on improving the wellbeing of carers	Excellent facilitators very enjoyable 3 days
Total - 81		Total - 82		Total - 83				
Average 3.69		Average - 3.72		Average - 3.77				

0 = Very Poor/Inadequate

1 = Poor

2 = Average/Acceptable

3 = Good

4 = Excellent