

Research in Brief

Understanding the conditions for successful mental health training for managers: long-term follow-up study
T1180





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Background and aims

Previous research by the Institute of Employment Studies (IES) explored the best way to support the rail industry in providing mental health (MH) training for line managers (LM). Using a randomised control trial (RCT it compared the effects of face to face training and e-learning (both delivered by the mental health charity Mind) with a no-training control group. The study showed sustained impacts on several learning outcomes regardless of training format.

Because some areas of improvement (those clustering around confidence to talk about mental health) showed skills fade over time, RSSB decided to offer refresher training to the same trainees and commissioned IES to evaluate the impact of this. The e-learning format of the original training was offered to all previous participants. The current study, conducted approximately one year after the first, allowed exploration of:

- whether refresher training can help embed learning from the original training and in what respects
- the extent to which participants have been able to apply lessons from the original training—long-term analysis of its impacts as well as enablers and barriers to this.

Survey data provided within the training group were compared against a control group who had not received any training.

Method

Project activities included:

- re-engagement with evaluation participants from train operating companies, freight operating companies, railway infrastructure and contractors
- 24 interviews with participants who received (or were offered) the refresher training to explore its impacts, and reflect on the longer term influence of the earlier training
- surveys to test the immediate impacts of the refresher training as well as a follow-up survey 4 to 6 weeks later to assess its impact over the longer term.

Findings

The timing of this study enabled the longer-term effects of the original training to be fully explored. Interview data evidenced the adoption of new habits consistent with taking a preventative approach to mental health. Managers reported paying more attention to mental health than they had done before and many felt they habitually 'took stock' of wellbeing within their team. Several managers reported an enhanced appreciation of the importance of everyday conversations in monitoring mental wellbeing.

After the refresher training there was significant improvement immediately after the training for three out of four self-reported outcome measures. However data gathered

from the small sample of participants to complete all data points showed these outcomes were not sustained.

This contrasts with interview findings which indicated that the refresher helped embed learning. Several participants reported that the training was useful in bringing messages from the original training 'back to life' that had become lost amid daily work pressures.

Conclusions and recommendations

- The research demonstrates the importance of systemic wraparound. Access to appropriate support and specialist advice from HR and Occupational Health is critical and line managers should not feel isolated when management challenges arise. There should also be a centralised point for resources (including relevant company policies) that LMs can refer to.
- The possibility of making training mandatory for all line managers should be considered.
 A suitable opportunity for this potentially arises when employees move into the role of LM for the first time.
- The preferred method of training differed according to individual needs, which include learning and logistical needs. However, having training materials that can be referenced after the training is important regardless of mode of delivery.
- More training is not the only way to embed training. Different methods of enabling peer learning should be explored such as facilitated workshops or webinars.
- Learning outcomes for training needs to be linked to behaviours delegates can practice straight after the training, specifically for preventative skills, as opposed to only when people are unwell.
- Training methods that allow role play could be useful in embedding behaviours that are needed less frequently, such as disclosures of poor mental health or absence situations, that require careful management.
- 'Small talk' should be seen as a valued part of the LM role by senior leadership. Small exchanges and interpersonal relationships provide a setting that facilitates supportive management and employee openness.
- An important determinant for success was a company's openness to making
 adjustments for individuals experiencing mental ill-health, and the support that is
 afforded to line managers to enact such adjustments. Companies should empower line
 managers to make appropriate adjustments.
- Organisations should use organisational tools to put knowledge into practice as well
 as embedding organisational processes for assessing and managing psychosocial risks.
 Tools such as the Wellness Action Plan could be embedded into standard company
 resources.

Where to find out more

Further information can be found in SPARK, search for T1180:

For any other technical questions please contact RSSB using our customer self-service portal.