

Guidelines for training providers:

Developing online training for GPs in mental health skills training (MHST) and focussed psychological strategies skills training (FPS ST) for general practitioners

Increasingly, general practitioners (GPs) are turning to online education and training to meet their professional development needs including the area of mental healthcare.

As with any form of education, there are key educational principles supporting quality continuing professional development delivered online through electronic media. This document aims to provide prospective providers of online training guidance on the key aspects the GPMHSC considers as the underpinnings of high quality mental health education and training programs for GPs delivered online (also applicable to other distance based learning activities).

These guidelines supplement the GPMHSC's standards for mental health training, as outlined in the document A framework for professional development in mental health for GPs, and should be considered in conjunction with these broader standards. References for these guidelines, resources and case examples are available on the GPMHSC website: www.gpmhsc.org.au.

Program design

- online training providers must ensure the length of training meets the same requirement as face-to-face training
- GPs, mental health professionals, consumers and carers are each involved at all stages of the program design and development
- a thorough learning needs analysis specific to general practice is undertaken
- clear goals and program objectives are specified and needs to be addressed with MHST and FPS ST as outlined in the framework document A framework for professional development in mental health for GPs
- the appropriate use of multimedia, hyperlinks and online communication tools is planned
- suboptimal broadband access outside metropolitan areas is taken into account during program design
- there is a high level of collaboration among information technology specialists, educators and the target audience (GPs)
- the GPMHSC may require training providers to submit learning management system logs of the time participants take to complete training, and
- the training must block premature access to the final screen, ie. there should be sufficient blocks to prevent rapid transit through the program.

Educational methods

Active learning is encouraged through:

- participant self assessment
- participant reflection
- self directed learning
- material based on realistic cases and problems presenting in general practice
- participant interaction, and
- feedback to participants.

Higher order thinking is promoted through learning tasks requiring:

- application of knowledge and skills
- problem solving, and
- analysis.

Program support

- online communication is monitored
- IT help is available to users of the service, and
- content is regularly checked and updated.

Quality improvement and patient outcomes

Translation of learning into improved patient outcomes is supported through:

- addressing the implementation of learning into general practice
- addressing the implications of learning for systems and organisation of general practice, and
- the program has appropriate assessment, evaluation and improvement processes.

FPS ST for GPs must be delivered for a minimum of 20 hours inline with the GPMHSC framework.

The training must incorporate 12 hours of supervised interactive learning, with the balance made up of structured learning activities. Ideally, the interactive component of the training would be delivered in a face-to-face format. However, where appropriate, training providers can utilise electronic formats for the interactive component of the training.

Educational methods

Active learning for FPS ST via electronic media is encouraged through methods such as:

- opportunities for participants to discuss course material in a moderated peer forum
- ensuring education material is based on realistic cases and problems presenting in general practice
- critical observation of expert demonstration of techniques by participants
- performance of techniques in role play
- peer formative feedback
- participant self assessment, reflection and interaction, and
- feedback to participants.

Higher order thinking is promoted through learning tasks such as:

- application of knowledge and skills in authentic case review or practice audit
- analysis of significant aspects of practice population, history, organisation and culture, and
- application of the learning in the participant's clinical practice.

Quality improvement and patient outcomes

Translation of learning into improved patient outcomes is supported through:

- the use of participants' clinical examples
- addressing the implementation of learning into general practice
- addressing the implications of learning for systems and organisation of general practice, and
- the program must have appropriate assessment, evaluation and improvement processes, including criteria for successful completion and participant satisfaction measures.

Program support and technical requirements

- online communication is monitored
- two way or multiuser communication is enabled
- ongoing IT support is available to participants
- ensure participants have access to sufficient technology
- continually review the training program to adjust content and technology when required, and
- programs should be flexible to allow further development of the online/electronic training medium.

The core educational objectives expected in FPS ST, and how these might translate in an electronically mediated environment:

- participants are introduced to the knowledge required in the course
- participants clarify their understanding of course content
- participants discuss relevant cases in a peer setting with an opportunity for expert feedback
- participants observe a demonstration of a technique by an expert
- participants can practice a given technique with peer feedback
- participants can demonstrate their mastery of a technique with expert formative feedback
- self directed written materials with encouragement to reflect and discuss material in an appropriate forum
- pre-recorded educational material (eg. demonstrations, DVDs)
- participants ask the expert questions in a discussion forum peer discussion is encouraged
- participants discuss cases and ask questions of the expert verbally, by text (in a discussion forum) or via other methods of e-communication in a large or small group setting. Peer discussion is encouraged
- facilitators role play the desired technique using computer mediated techniques (eg. audio, video or text), with the opportunity for participants to comment or discuss the process
- facilitators can use a pre-recorded demonstration of the desired technique, with the opportunity for participants to comment on or discuss the process
- participants role play the desired technique using video (preferred), audio or text media, with the opportunity for participants to comment on or discuss the process, and
- participants role play the desired technique using video (preferred), audio or text media, with the opportunity for experts to comment. Note that formal summative assessment is not required as this course is not designed to certify competency.

Seeking GPMHSC accreditation

Prospective providers who anticipate seeking GPMHSC accreditation for mental health online education and training programs, are strongly encouraged to submit a proposal to the GPMHSC outlining their program for comment and feedback before committing substantial resources that are often required to develop online/distance based training programs.

Contacting the GPMHSC

For further information on the work of the GPMHSC, please contact the GPMHSC Secretariat at:
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