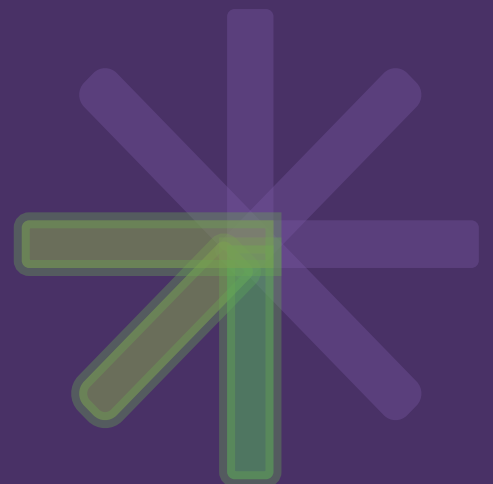

Conversational AI in Psychological Care Course: Suitability, Safeguards and Evidence

28 March – 1 April 2027
Doha





Conversational AI in Psychological Care Course: Suitability, Safeguards and Evidence

Ref: 678_33537 Date: 28 March – 1 April 2027 Location: Doha Fees: 4300 GBP

Programme Summary

Conversational AI in psychological care is the subject of this one-week training course for mental health service leaders and digital health officers, ending in a suitability dossier for one conversational tool. Chatbots that talk with service users about mood, stress and risk are being offered to services faster than evidence and safeguards are checked. The programme moves from suitability to evidence, safeguards, equity and monitoring, using cases from public mental health services, employee support and school counselling. Mars Training Centre UK delivers this programme on conversational AI in psychological care to mixed-organisation cohorts.

The Business Case

A conversational tool speaks to people at moments of distress, often outside service hours and without a clinician present. A service that adopts one without a shared method carries risks that surface only after harm: missed crisis signals, unequal access and unclear responsibility. A common method lets leaders set what a tool may do and decide when a person must reach a human.

- Service User Safety: Improves as crisis detection and escalation rules are tested before launch.
- Evidence Quality: Improves as vendor claims are appraised against stated outcome measures.
- Access and Equity: Improves as language and cultural fit are checked for each user group.

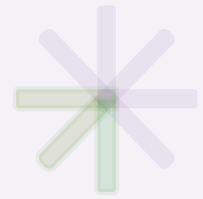
Principles and Evidence Base

- WHO Guidance on Ethics and Governance of Artificial Intelligence for Health: Frames the safety, transparency, accountability and equity checks applied in Sessions 3 and 4.
- Evidence Appraisal Principles: Guide how Session 2 judges whether a chatbot has been shown to be safe and effective.
- Safeguarding Principles: Set the duty of care and escalation routes designed in Session 3.

Intended Participants

- Mental health service directors who decide which digital tools enter the care pathway.
- Clinical leads who define the limits of support a tool may offer.
- Digital health officers who procure, configure and monitor conversational tools.
- Health ministry officials who set expectations for digital mental health across services.

Typical settings include public mental health services, employee assistance programmes, university counselling and telehealth providers.



Learning Outcomes

1. Participants will be able to prioritise service uses of conversational AI by user need, risk and available evidence.
2. Participants will be able to evaluate vendor claims about chatbot effectiveness against a structured appraisal grid.
3. Participants will be able to construct crisis detection and escalation rules for a conversational tool.
4. Participants will be able to diagnose access and bias problems affecting language, culture and age groups.
5. Participants will be able to justify human oversight and accountability arrangements for a conversational tool.
6. Participants will be able to design monitoring indicators with review triggers for a tool in use.

Programme Structure

Day 1: Conversational AI in Psychological Care and Suitability

Where can a conversational tool support a care pathway, and where must it not be used?

- Care Pathway Map
- Use Case Suitability Matrix
- Service User Risk Profile
- Conversational Tool Type Inventory
- Boundary of Support Statement

Day 2: Evidence and Vendor Claims

How strong is the evidence that a chatbot is safe and helps service users?

- Evidence Appraisal Grid
- Outcome Measure Review
- Vendor Claim Scoring Sheet
- Language Coverage and Training Data Check
- Trial Design Summary Table

Day 3: Safeguards and Crisis Response

What happens when a service user discloses risk to a tool?

- Crisis Detection Rule Set
- Escalation Pathway Chart
- Harmful Output Test Log
- Privacy and Data Handling Note
- Consent and Disclosure Script



Day 4: Equity, Accountability and Oversight

Who is responsible for what a tool says, and who can it fail?

- Access and Bias Review
- Cultural and Language Fit Check
- Clinical Accountability Statement
- Human Oversight Roster
- Incident Reporting Template

Day 5: Monitoring and the Suitability Dossier

Do the earlier records support a decision to adopt, pilot or decline one tool?

- Applying the Session 1 Use Case Suitability Matrix
- Testing the Session 2 Vendor Claim Scoring Sheet
- Reviewing the Session 3 Escalation Pathway Chart
- Monitoring Indicator and Review Trigger Table
- Completing the Conversational AI Suitability Dossier

Methodology

The programme uses a structured exercise method built on shared fictional service cases and anonymised chatbot transcripts. Participants test each safeguard on prepared material, then adapt it to a tool in their own organisation.

- Suggested activity: Scoring two competing vendor evidence packs against the same service need.
- Suggested activity: Reviewing a transcript to mark missed crisis signals and agree an escalation rule.
- Suggested activity: Presenting an accountability statement to a mock clinical governance panel.

Capstone Output

Each participant completes a conversational AI suitability dossier for one tool. It holds a suitability matrix, a vendor claim score, an escalation pathway, an accountability statement and a monitoring table. The dossier is used at work to brief a clinical governance panel and to set the conditions of a pilot.

Frequently Asked Questions

Is conversational AI in psychological care training suitable for leaders without a technical background?

Yes. Conversational AI in psychological care is taught through service cases and templates. It assumes experience of mental health service management or clinical leadership but no programming.



Which frameworks does conversational AI in psychological care training rest on?

Conversational AI in psychological care training rests on the WHO guidance on ethics and governance of artificial intelligence for health, evidence appraisal principles and safeguarding principles.

How is the dossier from conversational AI in psychological care training used at work?

You use the suitability dossier to brief a clinical governance panel, set the conditions of a pilot and record the indicators that trigger a review of the tool.

How does conversational AI in psychological care differ from general digital health training?

Conversational AI in psychological care centres on tools that talk with service users about mood and risk, while general digital health training covers records, remote consultation and device platforms.