Psychiatric Disorders Overview Training Course for Healthcare Managers and Case Coordinators

16 – 20 August 2027
Barcelona

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Programme Summary

Psychiatric disorders overview is the focus of this one-week training course for healthcare managers and case coordinators at managerial, foundation level, ending with a capstone service needs profile for one patient group. Managers who plan beds, approve care packages or coordinate cases often lack a working picture of how the main mental illnesses present, progress and respond to treatment. The programme builds that picture in non-clinical language and links each disorder group to the care, staffing and coordination it demands. Mars Training Centre UK delivers this programme on psychiatric disorders for non-clinical leaders.

The Business Case

Decisions about mental health services are frequently taken by people without clinical training. When those decisions rest on myths or on a single diagnosis label, organisations commission the wrong mix of services, delay discharge and see repeated crisis admissions. Managers who can read a care plan, ask informed questions of clinicians and anticipate the course of an illness make better use of scarce specialist time.

- Length of stay: earlier, better-informed discharge planning reduces avoidable delays.
- Readmission rates: coordination matched to the expected course of an illness lowers repeat crisis episodes.
- Claims and package accuracy: care approvals better fit the level of need described by clinicians.

Principles and Evidence Base

- Biopsychosocial model: the programme uses it to explain how biological, psychological and social factors combine in each disorder group.
- International diagnostic classification systems: participants learn how disorders are grouped and coded, without performing diagnosis.
- Stepped care model: used to match intensity of service to severity and stage of illness.
- Recovery-oriented practice: applied to frame goals, functioning and social inclusion alongside symptom control.

Intended Participants

- Managers who plan or run inpatient, community or outpatient mental health services.
- Coordinators who arrange care packages, referrals and discharge for people with mental illness.
- Staff who review or approve treatment and care requests for funders and insurers.
- Leaders of employee health or occupational support services who handle psychiatric absence cases.

The programme suits hospital administration, health insurance, social care and occupational health functions.

Learning Outcomes

1. Participants will be able to distinguish the main groups of psychiatric disorders by typical presentation and course.
2. Participants will be able to interpret the key elements of a psychiatric care plan and treatment summary.
3. Participants will be able to match levels of service intensity to illness severity and stage.
4. Participants will be able to identify risk indicators that require urgent clinical escalation.
5. Participants will be able to challenge stigma and inaccurate assumptions in service and workplace decisions.
6. Participants will be able to construct a service needs profile for a defined patient group.

Programme Structure

Day 1: Foundations of Psychiatric Disorders

How are mental illnesses understood, grouped and described?

- Biopsychosocial Model of Mental Illness
- Diagnostic Classification Groupings
- Prevalence and Burden Indicators
- Stigma, Myths and Language
- Roles in the Mental Health Team

Day 2: Mood, Anxiety and Stress-Related Disorders

What do common disorders look like over time and what care do they need?

- Depression and Bipolar Disorder Profiles
- Anxiety and Obsessive-Compulsive Presentations
- Trauma and Stress-Related Conditions
- Psychological Therapies Overview
- Stepped Care Levels and Thresholds

Day 3: Psychosis, Substance Use and Neurodevelopmental Conditions

Which disorders bring the highest service demands and why?

- Schizophrenia and Psychotic Disorder Profiles
- Substance Use and Dual Diagnosis
- Eating and Personality Disorder Patterns
- Neurodevelopmental and Cognitive Conditions
- Medication Classes and Side-Effect Monitoring

Day 4: Risk, Crisis and Coordination

When must a manager escalate, and how is care joined up?

- Suicide and Self-Harm Risk Indicators
- Crisis Pathways and Escalation Routes
- Reading a Psychiatric Care Plan
- Discharge Planning and Relapse Signatures
- Physical Health in Severe Mental Illness

Day 5: Service Needs Profile

How does a manager turn disorder knowledge into a service decision?

- Patient Group Selection and Data Review
- Care Intensity Mapping by Disorder Group
- Workforce and Partner Requirements
- Recovery Goals and Outcome Measures
- Capstone Service Needs Profile Review

Methodology

The principal method is case analysis. Participants follow anonymised, composite patient journeys from first presentation through treatment, crisis and recovery, and decide at each point what the service should provide. Short clinical briefings in plain language precede each case, and group discussion tests assumptions against the evidence.

- Suggested activity: sort composite case summaries into disorder groups and justify the grouping.
- Suggested activity: annotate a sample care plan and list the questions a manager should ask the clinical team.
- Suggested activity: map a crisis pathway and mark the escalation points for non-clinical staff.

Capstone Output

Each participant produces a service needs profile for one patient group relevant to their organisation. It sets out the disorders involved, expected illness course, care intensity at each stage, risk escalation points, workforce and partner needs, and recovery measures. The profile supports commissioning, budgeting and case coordination discussions with clinical colleagues.

Frequently Asked Questions

Is the psychiatric disorders overview programme suitable for managers without clinical training?

Yes. It is written for non-clinical managers and coordinators at foundation level. No medical background is assumed, and participants do not learn to diagnose or treat.

Which models does the psychiatric disorders overview programme rest on?

It rests on the biopsychosocial model, international diagnostic classification groupings, the stepped care model and recovery-oriented practice, each explained in plain language for service decisions.

How is the service needs profile from the psychiatric disorders overview programme used at work?

You use it to brief commissioning and budget discussions and to agree with clinicians the care intensity, escalation points and partner services a patient group needs.

How does the psychiatric disorders overview programme differ from a clinical mental health assessment programme?

It explains disorders for managers who organise and fund care. A clinical assessment programme trains clinicians to interview, assess risk and reach a diagnosis.