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Strategy paper

For VET executives

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INTRODUCTION TO STRATEGY PAPER FOR VET EXECUTIVES

The Erasmus+ project AHEADinVET – mental HEalth AmbassaDors in VET institutions seeks to advance the European discourse on mental health within vocational education and training (VET). Its vision is to make conversations about mental health a natural part of educational life and to provide a strong basis for competence development among teachers and trainers.

In today's VET landscape, learners face growing pressure from performance demands, distance learning, digital overload, and social isolation — factors that were intensified by the COVID-19 pandemic. Educators, meanwhile, often find themselves acting as counsellors as well as teachers, yet most lack formal training, materials, or systemic support for managing mental health challenges in their classrooms. Many report emotional exhaustion and difficulty balancing course objectives with the need to stabilise learners first.

AHEADinVET responds to these realities by breaking the taboo surrounding mental health in education and by promoting informed, open dialogue. The project recognises that mental health is not only a personal issue but a societal and economic concern requiring coordinated institutional and policy action. To achieve its mission, AHEADinVET developed several results grouped around three primary outcomes: raising awareness, creating learning opportunities, and creating impact. The strategy paper is part of creating impact and an effort to support the change from the above. Although the project's primary target group comprises VET teachers, trainers, and institutions, the secondary target group includes adult education providers, policy makers, and educational associations, as any enduring change should be supported from above. Therefore, the strategy paper is primarily intended for VET executives and principals, as it is one thing to address the individual, but another thing to ensure that the organisation creates a cultural environment.

Through all of its activities, AHEADinVET tries to contribute to the long-term goal of creating mentally healthy, inclusive, and future-ready VET systems across Europe — systems where educators feel equipped and supported, and where every learner can thrive.

Methodology behind the strategy paper

The strategy paper is primarily (but not only) based on the analysis of good practices of European VET institutions tackling mental health, and on interviews with experts in the vocational field and in mental health. AHEADinVET consortium conducted interviews with VET experts from partners countries. Participants in the interview were teachers, trainers, psychologists and stakeholders, all with experience in VET. Having experts with diverse roles, professions, and levels of impact gave us a broader perspective on the challenges of incorporating mental health into VET. The AHEADinVET consortium also conducted an extensive search of existing good practices across European countries. Partners on the project were asked to identify examples of best practices in their countries, taking into account

language proficiency, national initiatives, familiarity with school programs, and other relevant factors. The result is the document Strategy paper - Examples and analysis of good practices, with an overview of good practices, a detailed description of selected ones, and a conclusion, i.e., an analysis of the features of selected good practices.

The strategy paper was also created bearing in mind all the other experience and knowledge that the consortium has built up during the course of the AHEADinVET project, such as numerous interviews with experts for the MOOC and learning course, a survey and policy paper, a Conference on mental health, and so on.

The strategy paper is intended to assist principals and VET executives in making their institutions better equipped to address mental health challenges at the cultural and operational levels. It is organised in five sections:

Part I. Why mental health matters in vocational education and training

Part II. The strategic framework for mentally healthy institutions

Part III. The organisational change handbook

Part IV. Sustaining the transformation

Part V. The organisational change toolkit.

PART I. WHY MENTAL HEALTH MATTERS IN VOCATIONAL EDUCATION AND TRAINING

1. The Changing Landscape of Vocational Education

Vocational education and training (VET) is undergoing a period of profound transformation across Europe. The world of work, learning, and wellbeing are increasingly interconnected, and VET institutions are at the heart of this change. They prepare young people and adults not only for employment but for meaningful participation in society. Yet the context in which VET operates has become more complex and demanding — for students, teachers, and institutions alike.

Shifting social and economic realities

Rapid technological change, digitalisation, the green transition, and demographic shifts are reshaping labour markets. Workers are expected to adapt continuously, retrain, and integrate new competencies. For many learners, particularly those from disadvantaged backgrounds, these pressures add to existing insecurities and anxieties. VET students are often more exposed to social vulnerability, financial instability, and lower self-efficacy compared to general education students. The combined effect is a growing risk of disengagement, stress, and mental health difficulties during their education and transition to work.

VET teachers and trainers face equally intense pressures. They must respond to diverse learning needs, integrate new teaching methods, and meet institutional performance demands — all while maintaining their own wellbeing. Chronic workload, emotional exhaustion, and unclear boundaries between professional and personal life are increasingly reported in the education sector. The result is a work environment where mental health challenges can silently accumulate, affecting both individual wellbeing and organisational effectiveness.

The mental health crisis among young people

Across Europe, data consistently indicate rising levels of mental distress among adolescents and young adults. Symptoms of anxiety, depression, and burnout are becoming more common, while help-seeking behaviour remains limited. In Croatia and comparable European contexts, up to one in four young people experience significant mental health difficulties, yet only a fraction receives appropriate support. The COVID-19 pandemic accelerated these trends, but they reflect deeper structural issues, including social isolation, academic pressure, and uncertainty about the future. VET teachers and trainers also recognise the surge of mental health issues among their students, as it was evident from the results of the AHEADinVET survey. The online survey included 405 VET teachers and trainers from five European countries. Detailed results of the survey with analysis of expert's interviews can be found in

[Mental health in vocational education and training POLICY PAPER Appendix - Detailed Results of the pan-European survey on Mental Health in VET.](#)

For VET students, these risks are often magnified by contextual factors such as early school experiences, socioeconomic hardship, or stigma linked to vocational tracks. A mentally unwell student is not only a learner in difficulty but also a future worker at risk of marginalisation. Addressing mental health within VET, therefore, is not a matter of “added value”, it is an essential component of educational quality and social inclusion.

Institutional pressures and system-level expectations

VET institutions today operate under growing accountability demands. They are expected to demonstrate quality outcomes, high retention rates, and effective transitions to employment. Yet these indicators cannot be sustainably achieved without attention to the psychosocial conditions of learning and work. Mental health is the hidden infrastructure of institutional performance — the foundation upon which motivation, creativity, and learning thrive.

The European Education Area, the EU Strategic Framework for Education and Training (ET 2030), and multiple Erasmus+ projects now highlight wellbeing and inclusion as key policy priorities. Embedding mental health in VET, therefore, aligns not only with ethical responsibility but with European strategic directions. Executives who recognise this link position their institutions at the forefront of innovation, equity, and resilience.

2. Mental Health and the Mission of VET

VET as a space for human development

Vocational education has always carried a dual mission: to prepare students for specific occupations and to support their personal growth. In the 21st century, the second dimension is more crucial than ever. Employability is no longer guaranteed by technical skills alone; it depends on emotional intelligence, adaptability, and the capacity to work well with others — all of which are shaped by mental health.

A mentally healthy VET institution cultivates environments where students feel valued, capable, and safe to take learning risks. Such environments enhance not only academic engagement but also the social and emotional competencies that employers increasingly seek. Conversely, when mental health needs are neglected, learning becomes transactional and alienating, leading to absenteeism, dropout, and loss of potential.

The link between wellbeing, learning, and quality

Research across educational levels confirms that wellbeing and learning outcomes are interdependent. Students who experience belonging, emotional safety, and positive teacher–student relationships demonstrate stronger academic performance and persistence. Teachers who feel psychologically safe and supported are more innovative, collaborative, and effective. Thus, mental health is not a parallel agenda to “quality education” but a precondition for it.

For VET institutions, this insight invites a strategic reorientation. Instead of treating wellbeing as an individual concern or an occasional project, it must become a **core quality dimension**. The same systems that track competence acquisition and employability outcomes should also monitor psychosocial wellbeing, climate, and inclusion. Leadership decisions, staff management, and pedagogical design all influence this ecosystem.

The ethical and social dimension

Beyond measurable outcomes, there is a moral imperative. Education, in its most profound sense, is an act of care. When institutions attend to the mental health of students and staff, they affirm dignity and solidarity as organisational values. This perspective transforms the institutional mission from one of mere skill transmission to one of **human flourishing**. In societies where mental illness remains stigmatised, VET institutions can model empathy, inclusion, and social responsibility.

3. The Cost of Inaction

The hidden toll on learning and employment

Untreated mental health problems among students can have far-reaching consequences. They contribute to absenteeism, early school leaving, lower attainment, and decreased employability. The European Foundation for the Improvement of Living and Working Conditions estimates that mental health-related absenteeism and presenteeism cost billions annually in lost productivity. Within VET, this translates into disrupted learning pathways, reduced institutional reputation, and diminished economic contribution.

Staff wellbeing and institutional sustainability

Educators and trainers are the cornerstone of VET quality. Yet they operate in environments that often undervalue emotional labour. Chronic stress, administrative overload, and lack of recognition can lead to burnout and attrition. Replacing experienced staff is costly; losing their expertise erodes organisational memory and continuity. A culture of wellbeing, conversely, enhances retention, innovation, and collaboration.

Reputational and compliance risks

In many European contexts, education legislation increasingly references student welfare, inclusion, and psychological safety. Institutions that fail to meet these standards risk not only reputational damage but also regulatory consequences. More importantly, they risk losing the trust of students, parents, and partners. Embedding mental health in institutional strategy is thus both a compliance necessity and a reputational opportunity.

4. Mental Health as a Driver of Institutional Excellence

From reactive support to proactive design

Traditional approaches to mental health in education have often been reactive — addressing crises rather than preventing them. A strategic approach requires shifting from individual interventions to **systemic prevention and promotion**. This means designing policies, pedagogies, and environments that naturally support wellbeing, rather than relying solely on counsellors or external services.

This preventive orientation aligns with public health principles and with modern organisational psychology. It emphasises that every aspect of institutional functioning, from leadership communication to physical space design, has mental health implications. Institutions that adopt

this view gain a competitive advantage: they become places where people want to learn and work.

The leadership imperative

Leadership is the decisive factor in cultural transformation. Executives set the tone for how wellbeing is valued, resourced, and discussed. When leaders demonstrate openness about mental health, they normalise it as a legitimate topic of professional discourse. Conversely, when leaders remain silent, stigma persists. Strategic leadership for mental health involves both symbolic and operational actions: embedding wellbeing in mission statements, allocating resources, providing staff development, and modelling healthy behaviour.

Leadership commitment must also translate into governance structures. Establishing wellbeing committees, appointing mental health champions, and integrating wellbeing indicators into institutional dashboards are all ways to institutionalise commitment. The message to staff and students becomes clear: *wellbeing is part of how we define success*.

The organisational ecosystem of wellbeing

Mental health cannot be compartmentalised. It is shaped by the interplay of personal, relational, and organisational factors. In a VET context, this includes:

- Teaching methods that promote engagement and autonomy.
- Fair and transparent assessment practices.
- Supportive peer and teacher relationships.
- Reasonable workloads and recognition for staff.
- Inclusive policies and facilities that ensure accessibility and safety.

A mentally healthy institution manages this ecosystem intentionally, aligning its culture and operations with values of care, participation, and respect.

5. The European and Policy Context

Policy alignment and opportunities

At the European level, mental health in education is no longer peripheral. The European Commission's Communication on a Comprehensive Approach to Mental Health (2023) explicitly calls for integrating mental health across all policy areas, including education and employment. The European Pillar of Social Rights underscores wellbeing and inclusion as

foundations of social sustainability. Within education, frameworks such as ET 2030, EU Youth Strategy, and EU Key Competences for Lifelong Learning all reference wellbeing, resilience, and socio-emotional competence as essential outcomes.

For VET institutions, aligning with these frameworks provides legitimacy and access to funding opportunities. Erasmus+, ESF+, and national programmes increasingly prioritise projects that promote wellbeing and inclusion. Positioning mental health as a strategic objective is therefore both visionary and pragmatic.

National and local relevance

While European strategies provide a common framework, implementation occurs locally. Each VET institution operates within its national legislation, cultural context, and resource landscape. In Croatia, for example, recent education reforms emphasise inclusive practice and student-centred learning, but institutional capacity for addressing mental health remains uneven. The AHEADinVET project contributes to bridging this gap by offering evidence-based models and resources tailored to VET realities.

By situating mental health within their development strategies, VET institutions can influence national discourse, advocate for supportive policies, and demonstrate the feasibility of integrated approaches. Change often begins from the ground up — through institutions that model innovation and compassion.

6. Key Insights from AHEADinVET and Other European Initiatives

Emerging good practices

Across Europe, numerous projects and networks are experimenting with ways to integrate mental health in VET. Common success factors include:

- **Whole-institution approaches** that engage leadership, staff, and students.
- **Capacity building** for teachers to recognise and respond to mental health needs.
- **Partnerships** with local health and social services.
- **Peer support** and participatory initiatives that empower students.
- **Data-driven reflection** using wellbeing surveys and audits.

The AHEADinVET project synthesises these lessons, demonstrating that organisational transformation is possible when mental health is approached as a shared responsibility, not a specialist task.

Gaps and challenges

Despite progress, significant challenges persist:

- Mental health remains stigmatised and under-discussed.
- Staff lack confidence and training to address wellbeing issues.
- Institutional policies rarely include explicit wellbeing objectives.
- Evaluation systems focus on academic and employment outcomes, neglecting psychosocial indicators.
- Short-term project funding limits sustainability.

Addressing these gaps requires leadership vision, cross-sector collaboration, and policy alignment. Most importantly, it requires a cultural shift, from seeing mental health as a risk to be managed, to recognising it as a strength to be cultivated.

The Way Forward

Part I of this Strategy Paper establishes the rationale: **mental health is fundamental to the mission, performance, and sustainability of VET institutions**. It is both a moral responsibility and a strategic opportunity. The next step is to articulate how institutions can translate this understanding into action.

Part II introduces the **Strategic Framework for Mentally Healthy VET Institutions** — outlining the vision, principles, and pillars that guide transformation. Together, these will form the foundation for the **Organisational Change Handbook**, providing practical pathways for implementation at cultural and operational levels.

PART II. THE STRATEGIC FRAMEWORK FOR MENTALLY HEALTHY INSTITUTIONS

7. Towards mentally healthy VET institutions

A mentally healthy vocational education and training (VET) institution is more than a place where individuals cope well; it is an environment that *actively promotes wellbeing, belonging, and purpose* for all members of its community. Such an institution integrates mental health promotion into its everyday operations, decision-making, and relationships. It recognises that wellbeing is a strategic resource that enhances learning, innovation, and institutional quality.

This vision is not limited to individual resilience or the provision of counselling services. It encompasses the cultural, structural, and relational dimensions of organisational life. A mentally healthy VET institution aligns its policies, pedagogy, and practices with a single principle: **people thrive when they feel safe, valued, and capable of growth.**

Strategic vision statement

“To create vocational education environments that enable students and staff to develop their full potential in mentally healthy, inclusive, and supportive learning and working communities.”

This vision implies:

- Wellbeing is embedded in all institutional processes.
- Leadership takes explicit responsibility for mental health.
- Staff and students are active agents, not passive recipients, of wellbeing culture.
- Partnerships with the wider community support a holistic approach.

Core principles

The core principles of mentally healthy institutions are:

1. **Inclusivity and equity** – Mental health promotion serves all members of the community, with attention to diversity, vulnerability, and accessibility.
2. **Participation and voice** – Students and staff are empowered to influence the wellbeing agenda.
3. **Whole-institution approach** – Mental health is integrated across all levels: policy, pedagogy, management, and daily practice.

4. **Prevention and promotion** – Emphasis on creating conditions for wellbeing rather than reacting to crises.
5. **Evidence-informed practice** – Strategies are guided by data, research, and reflection.
6. **Sustainability and continuity** – Mental health policies are embedded into long-term institutional development.
7. **Partnership and collaboration** – Cooperation with families, employers, and health services strengthens the support network.

These principles form the ethical and operational compass for institutional transformation.

8. The Four Pillars of Mental Health Integration

A sustainable strategy for mental health in VET rests on **four interdependent pillars**. Together, they form a comprehensive framework that connects leadership, pedagogy, workplace culture, and community partnerships.

Pillar I: Leadership and Governance

Leadership defines the strategic direction, legitimacy, and visibility of mental health initiatives. Executives must embed wellbeing into institutional governance rather than delegating it to individual projects or services.

AHEADinVET project created [Policy paper](#) that can help you define direction, legitimacy, and visibility of mental health.

Key strategic actions:

- **Mission and policy integration:** Include wellbeing and mental health in the institutional mission, development plan, and quality assurance framework.
- **Leadership training:** Build mental health literacy and emotional intelligence among leaders and managers.
- **Wellbeing governance:** Establish a wellbeing steering committee or working group reporting directly to the management board.
- **Data and accountability:** Incorporate wellbeing indicators into institutional dashboards and annual reports.
- **Symbolic leadership:** Leaders model openness, empathy, and balance in their behaviour and communication.

Expected outcomes:

- Mental health recognised as a strategic priority.
- Coherent policies guiding consistent practice.
- Organisational culture aligned with care and inclusion.

Pillar II: Teaching and Learning Environment

Learning is not only a cognitive process but also an emotional and social one. The teaching and learning environment shapes students' sense of belonging, motivation, and confidence. Mentally healthy pedagogy enhances engagement and prevents distress. AHEADinVET project was dedicated in creating several outcomes that provide support for Key strategic actions listed below.

Key strategic actions*:

- **Pedagogical design:** Promote active, cooperative, and strengths-based learning methods that build self-efficacy.
- **Teacher support:** Provide professional development on recognising signs of distress, supporting students, and managing their own stress.
- **Positive relationships:** Foster trustful teacher–student and peer relationships through mentoring and team-based learning.
- **Safe learning climate:** Ensure classrooms are emotionally safe, free from bullying, discrimination, or humiliation.
- **Curricular integration:** Include socio-emotional skills, resilience, and wellbeing topics within curricula where appropriate.
- **Student voice:** Involve learners in designing wellbeing initiatives and evaluating their impact.

Expected outcomes:

- Increased student engagement, attendance, and retention.
- Strengthened teacher confidence and competence.
- Learning environments that promote both performance and wellbeing.

* Our results include a self-evaluation tool for assessment of teachers' current level of strengths, an e-learning course and MOOC for acquiring knowledge and skills, a presence training design for group learning, as well as a Podcast series available on [YouTube](#) and [Spotify](#). Also, a modular [curriculum](#) has been developed that can be adapted and implemented to fit a specific educational setting.

Pillar III: Workplace Wellbeing (Staff Focus)

Educators and staff are both role models and beneficiaries of institutional wellbeing. Their mental health has a direct impact on teaching quality, innovation, and institutional stability. Supporting staff wellbeing is therefore a strategic investment.

Key strategic actions:

- **Workload and autonomy:** Review work processes to ensure reasonable workloads and decision-making autonomy.
- **Peer support and collegiality:** Develop peer networks, mentoring schemes, and reflective practice groups.
- **Professional recognition:** Celebrate achievements and promote an appreciation culture.
- **Psychological safety:** Create an environment where staff can express concerns without fear of judgement.
- **Access to support:** Provide confidential counselling, employee assistance programmes, or referral pathways.
- **Work-life balance:** Encourage flexible arrangements and respect personal boundaries.

Expected outcomes:

- Reduced burnout and absenteeism.
- Improved job satisfaction and retention.
- Stronger sense of belonging and commitment among staff.

As with Pillar II: Teaching and Learning Environment, support for key strategic actions listed above can be found within project outcomes, such as [e-learning course](#).

Pillar IV: Partnerships and Community Engagement

Mental health promotion extends beyond institutional boundaries. Collaboration with external stakeholders ensures continuity of care and shared responsibility for wellbeing.

Key strategic actions:

- **Intersectoral collaboration:** Partner with mental health services, NGOs, employers, and social agencies.
- **Family involvement:** Engage parents and caregivers through communication and joint activities.
- **Community-based projects:** Encourage student participation in social and wellbeing initiatives.
- **Transition support:** Coordinate with employers to ensure healthy transitions into apprenticeships and work.
- **Public communication:** Promote the institution as a wellbeing-oriented organisation through outreach and campaigns.

Expected outcomes:

- Stronger safety net for students and staff.
- Enhanced institutional reputation and trust.
- Integration of wellbeing within broader community and labour market networks.

You can find support for key strategic actions listed above within project outcomes, such as [e-learning course](#).

9. Strategic Goals and Key Performance Areas

Translating vision into action

To operationalise the framework, VET institutions should define **strategic goals** and **key performance areas (KPA)s**. These provide measurable direction and accountability while allowing flexibility for local adaptation. Each goal should specify outcomes, indicators, responsible units, and timelines.

Example of strategic goals and KPAs

In the table below, you can find an example of strategic goals and KPAs.

Strategic Goal	Key Performance Area	Illustrative Indicators
1. Embed mental health in institutional policy and governance	Leadership and governance	<ul style="list-style-type: none"> - Mission statement includes wellbeing - Annual report features wellbeing data - Wellbeing committee established
2. Strengthen staff capacity for mental health promotion	Teaching and staff development	<ul style="list-style-type: none"> - % of staff trained in mental health literacy - Staff satisfaction scores - Peer support groups operating
3. Enhance student wellbeing and participation	Learning environment and student voice	<ul style="list-style-type: none"> - Student wellbeing survey results - Attendance and retention rates - Student participation in wellbeing projects
4. Promote a supportive and sustainable workplace	Staff wellbeing	<ul style="list-style-type: none"> - Staff wellbeing survey results - Reduced absenteeism - Positive feedback on workload management - Availability of counselling services
5. Build partnerships for holistic wellbeing	Community engagement	<ul style="list-style-type: none"> - Number and quality of external partnerships - Participation in local wellbeing events - Employer satisfaction with graduate resilience

Institutions may expand or adjust these goals based on their size, resources, and context. The key is to ensure **consistency between strategic intent and operational practice**.

10. Monitoring, Evaluation, and Learning

The role of data in transformation

Integrating mental health into institutional strategy requires systematic monitoring and evaluation. Data allow institutions to identify needs, measure progress, and adjust interventions. Evaluation should not be limited to quantitative indicators but include qualitative insights from students and staff.

Suggested monitoring tools

- **Wellbeing climate surveys** (students and staff) conducted annually.
- **Focus groups** and interviews to capture lived experiences.
- **Audit tools** assessing policies, practices, and learning environment conditions.
- **Incident tracking** (absenteeism, early leaving, burnout).
- **Participatory evaluation** through reflective workshops or storytelling.

Feedback loops and learning culture

Data should inform reflection and learning, not merely compliance. A mentally healthy institution encourages open discussion of findings and collective sense-making. Regular reflection sessions, held for leadership teams, teaching staff, and students, transform monitoring into dialogue and foster continuous improvement. This approach builds organisational mindfulness and shared ownership of change.

11. Balancing Ambition and Feasibility

Gradual transformation

Embedding mental health in institutional culture is a long-term process. It requires commitment, but also realism. Institutions may begin with pilot initiatives, evaluate their impact, and expand gradually. Small, visible successes build momentum and credibility.

Leveraging existing structures

Rather than creating parallel systems, institutions can integrate wellbeing objectives into existing frameworks:

- Include wellbeing indicators in quality assurance.
- Align with existing inclusion, diversity, or student support policies.
- Use staff development days to build wellbeing capacity.
- Incorporate wellbeing themes in curriculum review processes.

Leadership continuity and alignment

Strategic transformation requires consistent leadership over multiple years and through management changes. Institutionalising wellbeing through policies, committees, and reporting systems ensures that initiatives outlive individual champions. Leadership succession planning should explicitly include wellbeing values.

The Strategic Framework in Practice

To visualise the framework, VET institutions can use the following model as a reference for planning and communication:

The Four-Pillar Model for Mentally Healthy VET Institutions



At the centre of this model lies the **institutional culture** — the shared values, norms, and relationships that shape daily life. The four pillars reinforce one another, producing a resilient and compassionate organisation.

From Framework to Transformation

Part II defines the structure and principles of mentally healthy VET institutions. The next step is operational: *how* can institutions move from understanding to implementation? What steps can leaders take to diagnose their current situation, mobilise staff, and manage cultural change?

Part III, **The Organisational Change Handbook**, will translate this strategic framework into practical tools, models, and processes for institutional transformation. It will guide executives through the change cycle, from assessment to sustainability, and provide templates, checklists, and real-world examples from VET practice. Before checking out The Organisational Change Handbook, the Executive summary of Part I and Part II follows.

12. Executive Summary Part I and Part II: Building Mentally Healthy VET Institutions

The Case for Action

Mental health is the foundation of learning, employability, and institutional quality. VET institutions are not only places of skill acquisition, they are communities where young people and staff develop confidence, belonging, and resilience. Without addressing wellbeing, no system can achieve excellence, inclusion, or sustainability.

Why Mental Health Matters in VET

Challenge	Impact
Rising mental health difficulties among students and staff	Lower engagement, early leaving, burnout
High workload and pressure in teaching	Reduced motivation and innovation
Stigma and lack of awareness	Silence, avoidance, fragmented responses
Fragmented support systems	Reactive crisis management instead of prevention
Institutional focus on performance over wellbeing	Erosion of trust and community

The goal: Shift from reactive support to proactive, systemic wellbeing culture.

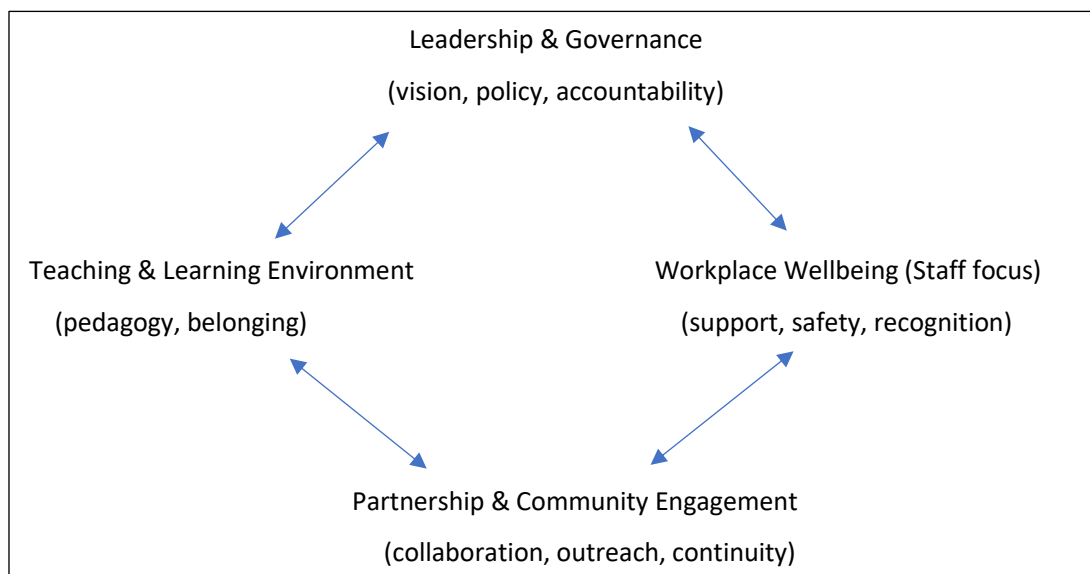
Strategic Vision

“To create vocational education environments that enable students and staff to develop their full potential in mentally healthy, inclusive, and supportive learning and working communities.”

Core Principles

1. **Inclusivity and equity** – wellbeing for all
2. **Participation and voice** – shared ownership of change
3. **Whole-institution approach** – mental health embedded in all functions
4. **Prevention and promotion** – proactive rather than reactive
5. **Evidence-informed action** – guided by data and reflection
6. **Sustainability** – embedded in long-term planning
1. **Partnership** – collaboration beyond institutional walls

The Four Pillars of Mentally Healthy VET Institutions



At the heart of the model lies the **institutional culture** — the shared values, relationships, and everyday practices that make mental health everyone’s responsibility.

Strategic Goals

Goal	Outcome
1. Embed wellbeing in policy and governance	Visible commitment from leadership
2. Build capacity and literacy among staff	Confident, supportive educators
3. Create safe, engaging learning environments	Student belonging and motivation
4. Promote healthy, sustainable workplaces	Reduced burnout, stronger teams
5. Strengthen partnerships and transitions	Continuity of care and community trust

From Vision to Action

The path towards mentally healthy VET institutions is a **transformational journey**, not a one-time project. It requires leadership courage, collective reflection, and sustained commitment.

Part III THE ORGANISATIONAL CHANGE HANDBOOK

13. Understanding Organisational Culture and Change

Why culture matters

Every institution has a distinct **culture**, the shared values, beliefs, and habits that guide how people behave and make decisions. Culture determines how staff respond to new ideas, how students are treated, and how challenges are addressed. When it comes to mental health, culture is the decisive factor: it can either nurture openness, empathy, and collaboration or sustain silence, stigma, and burnout.

A mentally healthy VET institution cultivates a culture where:

- Wellbeing is valued as much as performance.
- Leaders are approachable and empathetic.
- Staff feel psychologically safe to express vulnerability or raise concerns.
- Students experience belonging, respect, and support.

Transforming this culture requires time, trust, and leadership. The process is less about introducing new rules and more about **aligning everyday behaviours with shared values**.

The psychology of organisational change

Changes in educational settings are complex because they affect professional identity, relationships, and emotions. People rarely resist change itself, they resist *uncertainty* and *loss of control*.

Successful change management, therefore, depends on:

- **Involvement:** people support what they help to create.
- **Clarity:** a shared understanding of the “why” and “how.”
- **Trust:** confidence that leaders will listen, not impose.
- **Recognition:** visible progress and celebration of small wins.

Educational psychologist Michael Fullan (2007) describes change as “learning in motion.” Institutions must learn collectively — reflecting, experimenting, and adapting. Mental health culture change is precisely this kind of collective learning journey.

Common barriers to change in VET

Barrier	Description	How to Address It
Stigma and silence	Staff or students feel unsafe discussing mental health.	Promote open dialogue; use awareness campaigns and leadership modelling.
Fragmentation	Mental health initiatives exist but are disconnected.	Create a coordinating structure (wellbeing team).
Overload	Staff feel “one more initiative” adds pressure.	Integrate wellbeing into existing processes; simplify.
Limited resources	Lack of funding or time.	Start small; prioritise low-cost actions (communication, peer support).
Short-term thinking	Focus on projects, not long-term systems.	Embed wellbeing into strategy, policy, and evaluation cycles.

14. The Change Process Model: The five-phase model

To support leaders in managing transformation, the AHEADinVET Strategy proposes a **five-phase model**. This model can be implemented across 12–24 months, adapted to each institution’s size and readiness. Templates for tools proposed for each of the phases can be found in the appendices.

Phase 1: Diagnosis – Understanding the Starting Point

Before planning a change, institutions must first understand their **current state**. Diagnosis provides a shared, evidence-based picture of strengths, needs, and opportunities.

Key actions:

- Conduct a **Wellbeing Audit** (survey staff and students on mental health perceptions, stressors, and resources).
- Review existing policies, procedures, and practices related to wellbeing.
- Map available internal and external supports.
- Hold focus groups with staff and students to identify challenges and priorities.
- Analyse data (attendance, dropout, absenteeism, complaints, etc.) through a wellbeing lens.

✓ **Tools:**

[Institutional Wellbeing Self-Assessment Tool](#)

[Wellbeing survey for Students and Staff](#)

[Focus Group Guide for Students and Staff](#)

[Data Dashboard Template](#)

Outcome:

A clear baseline report identifying strengths, gaps, and areas for action.

Phase 2: Vision Building – Co-Creating the Future

Change is most effective when people help shape it. Co-creating the vision ensures ownership and collective energy.

Key actions:

- Hold a **vision workshop** with leadership, staff, and student representatives.
- Use participatory techniques (World Café, Appreciative Inquiry) to define what a “mentally healthy institution” looks like.
- Draft a **Wellbeing Vision Statement** aligned with institutional values and strategy.
- Identify 3–5 guiding principles to steer future action.
- Communicate the vision widely — through posters, newsletters, and meetings.

✓ **Tools:**

[Vision Workshop Facilitation Guide](#)

[Template for Wellbeing Vision Statement](#)

[Reflection tool on culture](#)

Outcome:

A concise, inspiring vision for mental health integration, endorsed by the whole community.

Phase 3: Planning and Prioritisation – Setting Goals and Actions

With the vision defined, the next step is to translate it into a **strategic action plan**.

Key actions:

- Establish a **Wellbeing Steering Committee** (including leadership, teachers, administrative staff, students, and counsellors).
- Prioritise 3–4 **strategic goals** using the Four Pillars Framework (leadership, pedagogy, staff, partnerships).
- For each goal, define:

- Specific objectives and activities.
- Responsible persons or teams.
- Timeframes and resources.
- Indicators of success.
- Align the plan with institutional development strategy and quality assurance cycles.

✓ **Tools:**

[*Wellbeing action plan \(template\)*](#)

[*SMART Goals Matrix*](#)

Outcome:

A 12–24-month Action Plan linking wellbeing objectives to measurable outcomes.

Phase 4: Implementation – From Plan to Practice

Implementation is the most dynamic stage, where policies become everyday behaviour. The focus should be on communication, participation, and visible results.

Key actions:

- **Launch phase:** Present the action plan to the institution, highlighting leadership commitment.
- **Pilot projects:** Start with 2–3 small initiatives (e.g. peer support programme, staff reflection sessions, stress management workshops).
- **Capacity building:** Train key staff (teachers, mentors, counsellors) in mental health literacy.
- **Communication strategy:** Keep stakeholders informed through newsletters, bulletin boards, and internal campaigns.
- **Monitoring:** Collect quick feedback and adjust as needed.

✓ **Tools:**

[*Implementation Tracker*](#)

[*Communication Plan Template*](#)

Pilot Project Evaluation Form

Outcome:

Visible progress, stronger engagement, and growing confidence in the process.

Phase 5: Sustainability – Embedding and Evolving

Sustainability means ensuring wellbeing remains integral to how the institution functions, even after leadership or funding changes.

Key actions:

- Integrate wellbeing goals into annual reports, quality frameworks, and staff performance discussions.
- Maintain the wellbeing committee as a standing structure.
- Document success stories and lessons learned.
- Offer continuous professional development opportunities on wellbeing.
- Link wellbeing indicators with accreditation and inspection processes.
- Periodically update the action plan based on new data.

✓ Tools:

[*Institutional Wellbeing Policy Template*](#)

[*Annual Review Framework*](#)

Sustainability Self-Assessment Tool

Outcome:

Mental health embedded in organisational DNA — part of “how we do things here.”

15. Organisational Change

This section provides a selection of **practical tools** that VET institutions can adapt and use.

Self-assessment of wellbeing framework

To ensure lasting change, regular self-assessment is necessary. To do so, it is preferable to use a structured tool to assess how far mental health and wellbeing are embedded within the institution. Regular check-up allows for support, reflection, benchmarking, and continuous improvement using the Four Pillars model and maturity levels.

Domains to assess:

1. **Leadership and Governance:** Is wellbeing part of mission, policy, and planning?
2. **Teaching and Learning:** Do students feel safe, engaged, and supported?
3. **Staff Wellbeing:** Are workloads manageable? Are there opportunities for support and recognition?
4. **Partnerships:** Are there active links with community health and social services?

5. Physical and Social Environment: Are facilities accessible, safe, and inclusive?

An example of a [self-assessment of a wellbeing framework](#) can be found in the organisational change toolkit, as well as the [24-Month Institutional Roadmap](#), as a practical example of how VET institutions can structure their wellbeing transformation journey over two academic years.

Template: Institutional Wellbeing Action Plan

Goal	Actions	Responsible	Timeline	Resources	Indicators
Example: Strengthen staff wellbeing	<ul style="list-style-type: none">- Introduce peer mentoring- Launch monthly wellbeing bulletin- Conduct staff stress survey	HR Manager & Wellbeing Team	6 months	€1,500	70% staff participation; lower absenteeism

Reflection Questions for Leadership Teams

1. How do our current policies support or hinder wellbeing?
2. What signals do we send about mental health through our everyday practices?
3. How do we model healthy work–life boundaries as leaders?
4. In what ways do students and staff have a voice in shaping wellbeing?
5. How can we measure success beyond academic performance?

Case Vignette (Example)

A medium-sized VET school established a “Wellbeing Working Group” composed of teachers, the school counsellor, and two student representatives. The group conducted a short survey and discovered that staff burnout and student stress during exams were key issues. They introduced monthly reflection meetings and mindfulness sessions for teachers and implemented flexible deadlines for project-based learning. Within one year, absenteeism dropped by 15%, and both staff and student satisfaction improved. The experience demonstrated that small, collaborative actions can create significant cultural change.

A template for [case studies](#) can be found in the Organisational Change Toolkit.

16. Communication and Engagement Strategy

Communication is the lifeline of cultural transformation. Mental health initiatives succeed when people feel informed, inspired, and involved.

Internal communication

- **Transparency:** Regular updates on wellbeing activities and results.
- **Two-way feedback:** Encourage staff and student input via surveys or suggestion boxes.
- **Storytelling:** Share personal or collective success stories to humanise change.
- **Symbolic actions:** Leadership messages during World Mental Health Day or institutional events.
- **Visual identity:** Create recognisable branding (logo, slogan) for the wellbeing programme.

External communication

- Share achievements with parents, employers, and local media.
- Participate in community wellbeing events.
- Position the institution as a model of social responsibility.
- Seek partnerships with local health centres, NGOs, and municipalities.

Example:

A “Wellbeing Week” campaign co-organised with a local health centre may include workshops, exhibitions, and open discussions on mental health, involving students, staff, and employers.

Engagement principles

Principle	Meaning
Visibility	Keep wellbeing consistently visible in communication.
Participation	Invite contribution, not just attendance.
Recognition	Celebrate progress and individuals who make a difference.
Continuity	Maintain regular communication, not one-off events.

Sustaining Momentum

Cultural change requires ongoing reinforcement. Leaders should anticipate fluctuation in energy and motivation and plan mechanisms to sustain momentum.

Key strategies:

- Rotate wellbeing team members to keep ideas fresh.
- Create annual wellbeing awards for staff and students.
- [Include wellbeing indicators in institutional KPIs.](#)
- Document and share progress at conferences or networks.
- Link wellbeing to professional development plans.

The message should remain consistent: *Wellbeing is not a project we finish — it is who we are becoming.*

17. Summary: The Change Journey at a Glance

Phase	Purpose	Main Outputs
1. Diagnosis	Understand current situation	Baseline report, wellbeing audit
2. Vision Building	Define shared direction	Vision statement, guiding principles
3. Planning	Set priorities and actions	Strategic action plan
4. Implementation	Put plans into practice	Pilot projects, training, communication
5. Sustainability	Embed and evolve	Policy integration, evaluation, renewal

This five-phase model provides a roadmap for leaders to move from awareness to transformation. Each step is iterative, encouraging reflection, adaptation, and participation.

PART IV. SUSTAINING THE TRANSFORMATION

18. Embedding Mental Health in Institutional Quality and Development Systems

From innovation to integration

For many VET institutions, mental health initiatives begin as pilot projects or short-term innovations. While these efforts often generate enthusiasm and impact, they risk fading once funding or leadership changes occur. The ultimate goal, therefore, is **institutionalisation**: embedding mental health into policies, routines, and evaluation frameworks so that it becomes self-sustaining.

This shift requires moving from:

- **Projects → Policy**
- **Individual commitment → Shared responsibility**
- **Short-term actions → Continuous improvement cycles**

A mentally healthy institution integrates wellbeing into **every dimension of its quality system** — planning, implementation, evaluation, and reporting.

The Quality Cycle for Wellbeing Integration

Stage	Key Questions	Examples of Action
Plan	What are our wellbeing priorities and goals?	Include wellbeing in strategic plan; allocate resources
Do	How are we implementing wellbeing initiatives?	Deliver training, peer support, and communication campaigns
Check	How do we know it is working?	Conduct surveys, review indicators, hold focus groups
Act	How do we improve and embed lessons?	Update policy, refine practices, share results

This *Plan–Do–Check–Act (PDCA)* cycle aligns wellbeing with existing quality assurance models used in VET, making it measurable and iterative.

Including wellbeing in institutional accreditation and self-evaluation

National and European quality frameworks for VET increasingly emphasise learner wellbeing and inclusion.

Institutions can demonstrate excellence by explicitly including mental health indicators in their **self-evaluation reports**, such as:

- Evidence of wellbeing policy implementation.
- Results of student and staff wellbeing surveys.
- Examples of participatory initiatives.
- Staff training and competence development in mental health literacy.
- Mechanisms for feedback and continuous improvement.

Embedding wellbeing into official evaluation processes ensures sustainability and accountability — while signalling to inspectors, funders, and partners that the institution takes mental health seriously as part of its quality identity.

Strategic alignment with European priorities

Sustaining transformation also means aligning with broader frameworks such as:

- **ET 2030 Framework** – priority on inclusion and wellbeing in education.
- **European Pillar of Social Rights** – focus on healthy, safe, and adaptable work environments.
- **Comprehensive Approach to Mental Health (EU, 2023)** – promotes mental health across all policy domains.

By positioning wellbeing within these agendas, VET institutions strengthen access to funding, visibility, and transnational collaboration. They also contribute to the European Education Area's vision of **quality education for wellbeing and sustainability**.

In the Organisational change toolkit you can find a curated list of key European and international frameworks, reports, and guidelines relevant to mental health and wellbeing in vocational education and training ([tool 17](#)).

19. Building Capacity and Competence

The human factor in sustaining change

Institutional change depends on people, their skills, motivation, and confidence. For wellbeing transformation to endure, staff and leaders must possess the competencies to recognise mental health needs, support others, and maintain healthy professional boundaries.

Building mental health literacy across roles

Target Group	Core Competencies to Develop	Suggested Methods
Leaders and executives	Strategic vision, emotional intelligence, modelling self-care, policy design	Leadership seminars, coaching, peer networks
Teachers and trainers	Recognising distress, supportive communication, trauma-informed pedagogy	Workshops, online courses, communities of practice
Support staff and counsellors	Case management, referral pathways, crisis response	Interprofessional training, supervision
Students	Peer support, stress management, help-seeking	Awareness campaigns, mentoring, wellbeing courses

These training elements should be embedded in professional development plans and recognised as part of continuous learning requirements.

Developing a wellbeing leadership model

Effective wellbeing leadership combines three dimensions:

1. **Strategic** – integrating wellbeing into policy and governance.
2. **Relational** – building trust and empathy within teams.
3. **Operational** – ensuring structures and resources are in place.

A leadership development programme can include:

- Reflection sessions on personal leadership style.
- 360° feedback on wellbeing leadership competencies.

- Coaching or mentoring by experienced peers.
- Case analysis of wellbeing dilemmas and solutions.

This helps institutional leaders become **role models** for the mental health culture they aim to create.

Communities of practice and peer learning

VET professionals learn best from one another. Sustaining wellbeing transformation requires spaces for **peer dialogue**, **knowledge exchange**, and **collective reflection**. Examples include:

- Regional or national **Wellbeing in VET Networks**.
- Online communities for resource sharing.
- Peer supervision groups for counsellors or coordinators.
- Annual institutional “Wellbeing Forums” showcasing good practices.

Such communities transform individual experiences into collective capacities, strengthening both competence and morale.

20. Policy and System-Level Recommendations

To ensure that wellbeing integration becomes standard practice across VET, systemic support is essential.

The following recommendations address policymakers, agencies, and umbrella organisations that shape the VET landscape.

For institutional leaders

1. **Integrate wellbeing into strategic planning** and annual quality review cycles.
2. **Allocate stable resources** — not only budgets but also time and staff roles — for wellbeing coordination.
3. **Model healthy leadership:** demonstrate openness, balance, and care in communication and decision-making.
4. **Ensure participation:** involve teachers, students, and partners in shaping wellbeing strategies.

5. **Monitor and celebrate progress:** include wellbeing results in annual reports and events.

For national and regional authorities

1. **Embed mental health in VET policy frameworks** as a recognised quality dimension.
2. **Provide funding mechanisms** for long-term wellbeing initiatives, beyond short project cycles.
3. **Integrate wellbeing indicators** into accreditation and inspection systems.
4. **Support professional development** on mental health literacy for all educators.
5. **Encourage intersectoral collaboration** between education, health, labour, and social sectors.
6. **Recognise and disseminate good practice** through national awards or databases.

Ministries and agencies have the leverage to transform wellbeing from an optional activity into a standard of institutional excellence.

For European and Transnational Stakeholders

1. Promote **cross-national research and knowledge sharing** on wellbeing in VET.
2. Include wellbeing outcomes in **Erasmus+ and European Social Fund (ESF+) funding priorities**.
3. Support **transnational peer review systems** that include mental health criteria.
4. Strengthen the voice of **students and staff** in European education policy dialogues.
5. Facilitate **joint frameworks** linking mental health, digitalisation, and inclusion in VET.

21. Embedding Wellbeing into Organisational Identity

From compliance to conviction

When wellbeing is sustained, it becomes part of the institution's identity — *“the way we do things here.”*

The transition from external compliance to internal conviction occurs when:

- Staff and students perceive wellbeing as integral to their purpose.

- Policies are lived through daily behaviours.
- Mental health discussions are normal, not exceptional.
- The institution takes pride in being a caring community.

Symbols of sustainable culture

Symbolic Practice	Meaning
Wellbeing integrated in school motto or website	Visibility and commitment
Annual Wellbeing Report published publicly	Transparency and accountability
“Wellbeing Awards” for students/staff	Recognition of caring behaviours
Shared wellbeing spaces (quiet rooms, green areas)	Tangible support for mental health
Joint events with external partners	Community engagement and continuity

Such symbols reinforce values and ensure that wellbeing remains visible, valued, and celebrated.

22. Looking Forward: The Future of Mentally Healthy VET

The cultural legacy of AHEADinVET

The AHEADinVET project demonstrates that **mental health and vocational excellence are not competing goals**, they are interdependent. Institutions that care for wellbeing produce learners who are resilient, adaptable, and employable; staff who are innovative and loyal; and communities that are cohesive and future-oriented.

The Strategy Paper and Scaling paper are not end points but **living resources**. Their impact depends on continuous reflection, adaptation, and collaboration across Europe's VET systems.

The vision ahead

“Every VET institution in Europe becomes a place where wellbeing and learning reinforce one another — where education not only prepares for work, but for life.”

This vision requires courage, but also hope: the belief that education can be both technically excellent and deeply humane.

Summary of Key Messages

Theme	Core Message
Rationale (Part I)	Mental health is central to learning, employability, and quality in VET.
Strategic Framework (Part II)	Four pillars – leadership, teaching, staff wellbeing, partnerships – guide systemic integration.
Organisational Change (Part III)	Transformation follows five phases: Diagnose → Vision → Plan → Implement → Sustain.
Sustainability (Part IV)	Embed wellbeing into policy, capacity building, and quality systems for lasting change.

23. Concluding Reflection

Sustaining a mentally healthy institution is not about achieving perfection. It is about maintaining **a living dialogue** between people and purpose — ensuring that everyone in the community feels seen, supported, and able to grow. Transformation happens not through grand gestures but through consistent, caring practice.

“Culture change occurs when daily conversations reflect our deepest values.”
– Adapted from Edgar Schein, *Organisational Culture and Leadership*

The task of VET leaders, therefore, is not only to manage systems but to **lead with humanity** — to cultivate institutions where wellbeing is both a value and a daily reality.

Executive Summary

Towards Mentally Healthy Vocational Education and Training Institutions

Mental health has emerged as one of the most critical issues affecting students, teachers, and leaders in Europe's vocational education and training (VET) systems. The Erasmus+ project **AHEADinVET – mentAl HEalth AmbassaDors in VET institutions** recognises that the wellbeing of students and staff is not an optional extra but a *strategic condition for learning, inclusion, and institutional quality*.

This Strategy Paper and **Organisational Change Handbook** provide a comprehensive framework and set of practical tools for VET executives who wish to place mental health at the centre of their institutional agenda. It offers both inspiration and guidance for transforming VET institutions on cultural and operational levels, ensuring that wellbeing becomes embedded in governance, pedagogy, and daily practice.

Part I – Why Mental Health Matters in VET

VET institutions today operate in an increasingly complex environment. Rapid technological change, shifting labour markets, and social instability have intensified pressure on students and staff alike. Young people in vocational education often experience higher levels of stress, insecurity, and stigma, while teachers face heavy workloads and emotional exhaustion.

Mental health challenges translate directly into educational challenges: absenteeism, early school leaving, lower motivation, and burnout. The **cost of inaction** is substantial—both human and economic. Conversely, institutions that invest in wellbeing see improved learning outcomes, stronger engagement, and greater staff retention.

European and national policies already recognise wellbeing as a core dimension of quality education. Integrating mental health into VET, therefore, aligns with the **EU's Strategic Framework for Education and Training 2030**, the **European Pillar of Social Rights**, and the **Comprehensive Approach to Mental Health (2023)**.

Part I establishes the case for change: mental health is both a moral imperative and a strategic necessity for modern vocational education.

Part II – The Strategic Framework for Mentally Healthy VET Institutions

The second part sets out the **vision, principles, and structure** of mentally healthy VET institutions.

A healthy institution is defined not by the absence of illness but by the **presence of wellbeing**, where students and staff feel safe, valued, and capable of growth. The framework rests on seven guiding principles: inclusivity, participation, whole-institution engagement, prevention, evidence-based practice, sustainability, and partnership.

The Four Pillars of Integration

1. **Leadership and Governance** – embedding wellbeing into mission, policy, and accountability structures.
2. **Teaching and Learning Environment** – fostering safe, inclusive, and engaging classrooms that build self-efficacy and belonging.
3. **Workplace Wellbeing (Staff Focus)** – ensuring manageable workloads, collegial support, recognition, and psychological safety.
4. **Partnerships and Community Engagement** – connecting with families, employers, and health services to provide holistic support.

These pillars are interconnected and reinforce each other, forming an ecosystem in which mental health becomes a shared responsibility.

Part II also introduces **strategic goals and performance indicators**, allowing institutions to translate values into measurable outcomes and continuous improvement.

Part III – The Organisational Change Handbook

Cultural transformation requires more than good intentions; it requires structured processes. Part III presents a **five-phase model** for embedding mental health into institutional systems:

Phase	Purpose	Main Outputs
1. Diagnosis	Assess current wellbeing status and needs	Baseline report, wellbeing audit
2. Vision Building	Co-create shared aspirations	Vision statement, guiding principles
3. Planning	Develop concrete objectives and actions	Wellbeing Action Plan, governance structure
4. Implementation	Deliver initiatives and build engagement	Training, communication, pilot projects
5. Sustainability	Integrate wellbeing into policy and routine	Annual review, policy integration, continuous learning

The Handbook emphasises participation, transparency, and small, visible successes that build momentum. Change is viewed as an iterative learning process rather than a top-down reform.

Part IV – Sustaining the Transformation

True transformation endures only when wellbeing becomes embedded in the **institution's identity and quality system**.

Part IV outlines how institutions can institutionalise mental health by:

- Incorporating wellbeing indicators into self-evaluation and accreditation.
- Integrating mental health into strategic planning and annual reporting cycles.
- Establishing continuous professional development in mental health literacy.
- Creating leadership models that combine empathy, strategy, and operational rigour.
- Building communities of practice and cross-sector partnerships.

The section also provides **policy recommendations** for VET leaders, national authorities, and European stakeholders. Key actions include establishing long-term funding mechanisms, fostering cross-sector collaboration, incorporating wellbeing into inspection criteria, and developing transnational networks for peer learning.

Sustainability is achieved when institutions move from **compliance to conviction**—when wellbeing is no longer seen as a project but as *“the way we do things here.”*

Symbolic practices such as annual wellbeing awards, public reports, and shared spaces for reflection make the culture visible and durable.

AHEADinVET's Contribution

The AHEADinVET project provides the conceptual foundation and practical resources that underpin this strategy. It offers self-assessment tools, digital campaigns, and capacity-building materials to empower VET professionals as **mental health ambassadors** within their institutions.

By aligning with European frameworks and national priorities, AHEADinVET supports VET institutions in becoming **mentally healthy, inclusive, and future-ready**, places where learning and wellbeing reinforce each other.

Key Takeaways

Theme	Strategic Message
Mental health in VET	Central to quality, inclusion, and employability
Institutional transformation	Requires cultural and operational change
Framework	Four pillars: leadership, learning, staff, partnerships
Change management	Five phases from diagnosis to sustainability
Sustainability	Embed wellbeing in policy, leadership, and quality assurance

Closing Reflection

“A healthy institution is one that enables people to flourish — not only to perform.”

This Strategy Paper is both a roadmap and an invitation: for VET leaders to champion mental health as a driver of excellence, for teachers to model care and resilience, and for policymakers to recognise wellbeing as a cornerstone of educational sustainability.

When VET institutions nurture mental health, they strengthen not only individuals but the social and economic fabric of their communities. This is the transformative promise of AHEADinVET — a European VET system that prepares people not only for work, but for life.

PART V. THE ORGANISATIONAL CHANGE TOOLKIT

The Organisational Change Toolkit provides the practical foundation for this Strategy Paper, enabling VET institutions to translate cultural awareness into operational reality.

It turns the “why” and “what” from Parts I and II into a concrete “how”. Each tool can be adapted to the local context, ensuring sustainability long after the AHEADinVET project concludes.

The Organisational Change Toolkit is designed to help vocational education and training (VET) institutions translate strategic intentions about mental health and wellbeing into practical, coordinated actions.

How to Use the Toolkit

In total there are 20 individual templates that support Organisational change Handbook. Each tool, whether it is an example of a survey, guideline, or reflection tool, may be used individually or as part of an integrated cycle. Institutions are encouraged to adapt templates to local contexts. The Toolkit is not prescriptive but modular, flexible, and participatory.

Who should use it:

- VET executive teams and quality managers
- Wellbeing coordinators or committees
- Teachers and staff representatives
- Student councils and peer mentors
- External partners (e.g. health services, NGOs)

The tools are designed for collective use, ideally in workshops or meetings that foster dialogue, rather than simply as paperwork.

Purpose

The Toolkit helps institutions **integrate mental health and wellbeing into their everyday practices**.

It follows the **Five-Phase Change Model** (Diagnosis → Vision → Planning → Implementation → Sustainability) introduced in *Part III* of the Strategy Paper. If applicable, each tool is described in terms of its purpose and how to use it effectively.

Use it flexibly: start where your institution currently stands, adapt the templates as needed, and involve both staff and students in every step.

How to Begin

1. **Form your Wellbeing Committee.** Include leadership, teachers, counsellors, and students.
2. **Run the Self-Assessment.** Identify strengths and gaps (Phase 1).
3. **Host a Vision Workshop.** Agree on what a “mentally healthy VET institution” means for you.
4. **Draft the Action Plan & Policy.** Translate values into goals, roles, and timelines.
5. **Communicate & celebrate.** Share progress widely to build engagement.
6. **Review annually.** Use the Report Template & indicators to track improvement.

Top Tips for Success

Keep it participatory – wellbeing grows from dialogue.

Start small, think long-term – early wins build trust.

Integrate, don't add-on – align with existing quality and inclusion systems.

Show results visually – data dashboards or posters make impact visible.

Share learning – exchange experiences within regional and European VET networks.

Remember, the Toolkit is a compass, not a checklist. Use it to steer your institution steadily toward a culture where wellbeing and learning reinforce each other.”

Tool 1. Glossary of Key Concepts

Term	Definition (in VET context)
Mental Health	A state of wellbeing in which students and staff realise their abilities, cope with everyday stresses of life, work productively, and contribute to their community (WHO).
Wellbeing	A holistic concept encompassing mental, physical, emotional, and social dimensions of health.
Psychosocial Environment	The combination of social relationships, institutional culture, and physical settings that affect psychological safety and learning.
Whole-Institution Approach	Coordinated action across all areas of school life – leadership, teaching, support, and partnerships – to promote mental health.
Mental Health Literacy	Knowledge and skills that enable recognition, management, and prevention of mental health issues.
Psychological Safety	A shared belief that the institution is safe for interpersonal risk-taking, such as expressing vulnerability or new ideas.
Organisational Culture	The shared values, norms, and routines that shape how people behave within the institution.
Wellbeing Champion	A designated person (staff or student) who advocates for and coordinates wellbeing initiatives.
Wellbeing Audit	A structured process for evaluating institutional strengths and needs related to mental health.
Resilience	The capacity of individuals or systems to adapt positively to challenges and recover from stress.

Tool 2. Institutional Wellbeing Self-Assessment Tool

Purpose:

To establish a clear baseline of how mental health and wellbeing are currently integrated across leadership, teaching, staff support, and partnerships.

When to use:

At the beginning of the change process (Phase 1: Diagnosis) and repeated annually to measure progress.

Who should use it:

Wellbeing Committee or leadership team; can also be used with department heads.

How to use:

- Rate each domain (Leadership, Teaching, Staff, Partnerships, Environment) on a 1–5 scale.
- Discuss discrepancies between individual scores — differences often reveal blind spots.
- Summarise results visually in a *Wellbeing Radar Chart* to stimulate discussion.

Outcome:

A concise “snapshot” report identifying institutional strengths, gaps, and priority areas.

Institutional Wellbeing Self-Assessment Tool - example

Area	Indicators (1 – 5 scale)	Current Score	Target Score
Leadership commitment	Mission and policy mention wellbeing	3	5
Staff engagement	Existence of wellbeing team	2	4
Student voice	Students represented in planning	2	5
Learning environment	Active anti-bullying policy	4	5
Staff wellbeing	Regular supervision or reflection sessions	3	4
Community partnerships	Formal link with health/social services	2	4

Tool 3 Focus group guide

Purpose:

Focus groups help institutions explore the lived experience behind survey numbers. They provide qualitative insights into wellbeing, relationships, and culture from those directly involved in daily learning and work life.

Separate sessions for students and staff are recommended to ensure openness and trust.

When to Use:

During Phase 1: Diagnosis (to understand the starting point) and again in Phase 5: Sustainability (to evaluate progress or test new initiatives).

Preparation:

- 6–10 participants per group (homogeneous: all students or all staff).
- Duration: 60–90 minutes.
- Facilitator: neutral person (counsellor, wellbeing lead, or external moderator).
- Use an audio recorder or note-taker (with consent).
- Ensure confidentiality and voluntary participation.

Focus Group Template

Section	Content / Guiding Questions	Facilitator Notes
1. Welcome and introduction (5 min)	- Thank participants and explain purpose (“We want to understand what helps and hinders wellbeing in our school”) - Emphasise confidentiality and respect. - Obtain consent for notes/recording.	Set a relaxed, conversational tone.
2. Warm-up (5 min)	- “When you think about feeling good at school/work, what comes to mind?”	Helps participants ease into the topic.
3. General wellbeing climate (15 min)	- “How would you describe the atmosphere here?”- “What makes this place supportive or stressful?” - “Do you feel you belong?”	Encourage examples and different perspectives.
4. Support and communication (15 min)	- “If someone feels anxious or stressed, what happens?” - “Who can people talk to?” - “How does the school handle wellbeing concerns?”	Explore accessibility of support structures.
5. Teaching/working environment (15 min)	<i>For students:</i> “Do teachers help you when you struggle?” “Are workloads reasonable?” <i>For staff:</i> “How manageable is your workload?” “Do you feel recognised and supported?”	Keep questions relevant to each group.
6. Voice and participation (10 min)	- “Do students/staff have a say in decisions affecting them?”	Look for mechanisms of participation.

Section	Content / Guiding Questions	Facilitator Notes
	- “How are ideas or concerns about wellbeing shared?”	
7. Hopes and improvements (10 min)	- “What one thing would most improve wellbeing here?”	Summarise the main suggestions.
8. Closing (5 min)	- Summarise key points back to participants. - Thank them and explain how results will be used.	End positively.

After the Session

- Summarise notes under 3–4 themes: *strengths, challenges, needs, ideas*.
- Combine with survey data in your **Wellbeing Baseline Report**.
- Feed findings into **Phase 2: Vision Building**.

Tool 4 Wellbeing Data Dashboard

Purpose:

The **Wellbeing Data Dashboard** provides a simple way to **track and visualise progress** on wellbeing indicators over time.

It consolidates quantitative data (e.g., survey scores, absenteeism) and qualitative summaries (e.g., focus-group themes) in one overview.

The dashboard helps leadership teams monitor trends, identify risks early, and communicate progress clearly to staff and stakeholders.

When to Use:

- After completing the first Wellbeing Audit (Phase 1).
- Updated termly or annually (Phases 4 & 5).

Recommended Format

You can create the dashboard in **Excel**, **Google Sheets**, or a **table within your institutional report**.

Dashboard Template

Domain	Indicator	Baseline (Year 1)	Current (Year 2)	Target	Trend (↑/↓)	Comments / Insights
Student Wellbeing	% of students reporting high wellbeing (survey Q 1-5 average ≥ 4)	62 %	71 %	75 %	↑	Improvement after introduction of wellbeing workshops.
Staff Wellbeing	% of staff who agree “workload is manageable”	48 %	55 %	65 %	↑	Time-management sessions and reduced admin load.
Institutional Culture	Average “sense of belonging” score (staff + students)	3.6	3.9	4.2	→	Stable; follow up with focus groups for deeper insight.

Domain	Indicator	Baseline (Year 1)	Current (Year 2)	Target	Trend (↑/↓)	Comments / Insights
Attendance / Retention	Student absenteeism rate	12 %	9 %	< 8 %	↓	Ongoing mentoring support shows results.
Engagement / Voice	% of staff & students feeling heard in decision-making	58 %	64 %	70 %	↑	Introduced suggestion boxes and forums.
External Partnerships	Number of wellbeing collaborations (e.g., NGOs, health services)	1	3	4	↑	Two new MOUs signed this year.

Optional Add-ons

- Use **conditional formatting** or colour codes (green = on track, yellow = needs attention, red = off track).
- Add a small **chart or graph** for each domain to visualise change.
- Include **qualitative comments** from surveys or focus groups to add context.

Interpretation Tips

1. Review data quarterly in Wellbeing Committee meetings.
2. Identify both *improvements* and *early warning signs*.
3. Link dashboard results directly to Action Plan revisions.
4. Share highlights publicly (staff newsletter, wellbeing board).

Tool 5. Vision Workshop Facilitation Guide

Purpose:

The Vision Workshop helps your institution **co-create a shared understanding of what a “mentally healthy VET institution” means** in practice.

It builds ownership of the wellbeing agenda and establishes guiding principles for later planning.

When to Use:

During **Phase 2: Vision Building**, after the diagnostic phase (survey and focus-group results) but before writing the Action Plan or Policy.

Duration and Format

- **Duration:** 2 – 3 hours
- **Participants:** 10 – 20 people (leadership, teachers, support staff, student representatives, counsellor, possibly a community partner)
- **Facilitator:** Neutral moderator or wellbeing coordinator
- **Format:** In-person or hybrid; use visual tools (flip-charts, sticky notes, shared online whiteboard)

Workshop Flow

Step	Time	Objective	Activities / Materials
1. Welcome and context	10 min	Set tone, explain goals	Brief presentation of AHEADinVET framework and key findings from self-assessment
2. Appreciative opening	15 min	Build positive mindset	Round-table question: <i>“What already makes our institution a caring place to learn and work?”</i>
3. Exploring aspirations	30 min	Identify shared hopes	Small-group work: <i>“Imagine our school in three years if wellbeing is central. What do you see, hear, feel?”</i>
4. Collective synthesis	30 min	Define core values and themes	Groups present visions; facilitator clusters ideas into 4–6 themes (e.g., safety, belonging, empowerment, partnership)

Step	Time	Objective	Activities / Materials
5. Drafting the vision	30 min	Formulate concise statement	Plenary drafting session using <i>Vision Statement Template</i> (Tool 3b)
6. Agreeing guiding principles	20 min	Identify “how” values will be lived	Brainstorm 4–5 guiding principles (e.g., inclusion, participation, evidence-based practice)
7. Closing reflection	15 min	Commit to next steps	Participants share one concrete action they will take to support the vision

Facilitator Tips

- Use inclusive language and invite all voices.
- Record ideas visually (e.g., on flip-charts titled “Our future looks like…”).
- Keep energy high with breaks or quick energisers.
- Conclude by summarising the draft vision aloud for collective validation.

Outputs

1. Draft **Wellbeing Vision Statement** (to refine later with leadership).
2. List of **Guiding Principles** (to include in policy or strategy).
3. Summary of participant feedback and next steps.

Tool 6. Template for Wellbeing Vision Statement

Purpose:

To formalise the institution's collective vision for mental health and wellbeing.

This one-page statement becomes the **core reference point** for policies, communication materials, and action plans.

How to Use

- Developed during or after the Vision Workshop.
- Approved by leadership and communicated widely.
- Displayed in staffrooms, student areas, and strategic documents.

Template

Section	Content Guide	Example (illustrative)
Title	A short, inspiring headline (max 15 words).	<i>"Wellbeing at the Heart of Learning."</i>
Vision Statement	3–4 sentences describing the desired future state. Use inclusive, values-based language.	<i>Our institution is a community where every student and staff member feels safe, valued, and capable of growth. We see wellbeing as the foundation of learning, innovation, and belonging. Together we create an environment that supports mental health through respect, collaboration, and care.</i>
Our Guiding Principles	4–6 concise statements beginning with action verbs.	<ul style="list-style-type: none">- We include every learner and colleague.- We listen and give everyone a voice.- We promote prevention and early support.- We learn continuously from evidence and experience.- We sustain wellbeing through teamwork and reflection.
Commitment	1–2 sentences showing leadership endorsement.	<i>Signed by the school leadership and wellbeing committee, this vision guides our daily work and strategic decisions.</i>

Section	Content Guide	Example (illustrative)
Date & Signatures	To formalise adoption.	Principal, Wellbeing Coordinator, Student Representative

Implementation Suggestions

- Incorporate the vision statement into the institution's website, newsletters, induction materials, and policy documents.
- Revisit the statement annually to ensure relevance.
- Use key phrases from the vision as slogans for campaigns or wellbeing weeks.

Tool 7. Wellbeing Policy Template (Excerpt)

1. Purpose and Scope

Define the institution's commitment to mental health and outline who the policy covers (students, staff, external partners).

2. Principles

- Inclusion
- Participation
- Prevention and promotion
- Confidentiality and respect

3. Roles and Responsibilities

- Leadership: Strategic direction and resources
- Wellbeing Committee: Coordination and monitoring
- Staff: Implementation and peer support
- Students: Participation and feedback

4. Implementation Plan

Summarise annual goals and key activities.

5. Review Cycle

Policy to be reviewed every two years as part of institutional quality assurance.

Tool 8. Wellbeing Action Plan (template)

Purpose:

To formalise institutional commitment to mental health and define governance, responsibilities, and review mechanisms.

When to use:

After the Vision-Building phase and alongside the development of the institutional Action Plan.

Who should use it:

Leadership and policy/quality teams with input from staff and student representatives.

How to use:

- Begin with a short statement of intent that aligns with the institutional mission.
- Outline guiding principles (inclusion, prevention, confidentiality).
- Define roles and responsibilities clearly — this avoids fragmentation later.
- Specify monitoring and review timelines (e.g., biennial review).

Outcome:

A formal, approved policy that legitimises wellbeing work and ensures continuity.

Strategic Goal	Action	Responsible	Timeline	Resources	Indicators of Success
Improve staff wellbeing	Introduce regular wellbeing check-ins	HR & Wellbeing Committee	6 months	Internal	80 % staff participation
Promote student voice	Establish Student Wellbeing Forum	Deputy Head & Counsellor	1 year	€500	Forum meets quarterly
Build external partnerships	Sign MoU with local mental health centre	Principal	3 months	None	Partnership formalised

Tool 9. Wellbeing Survey Sample Items

Purpose:

To collect direct feedback on perceptions of safety, belonging, stress, and institutional climate.

When to use:

At baseline (Diagnosis phase) and at least once yearly for monitoring and evaluation.

Who should use it:

Quality assurance or counselling teams, with data analysis support.

How to use:

- Administer anonymously online or on paper.
- Complement quantitative data (Likert scales) with open-ended questions for qualitative insight.
- Share key findings transparently with the school community.

Outcome:

Evidence base for targeted interventions and evaluation of progress.

Examples of survey questions for students' and staff's well-being can be found below.

Wellbeing survey for students

Learning Environment & Safety

- I feel safe from bullying, discrimination, or harassment at my school.
- Teachers treat students fairly and with respect.
- I can express my opinions in class without fear of being judged.
- The physical environment of the school (classrooms, corridors, workshops) feels safe and welcoming.
- When problems occur between students, teachers help us resolve them constructively.

Support & Relationships

- There is at least one adult at school I can turn to if I feel stressed or upset.
- My teachers notice when I am struggling and offer help.
- I feel that the school cares about my wellbeing, not just my grades.
- My peers support each other in times of difficulty.
- The school provides clear information about where to get mental health support.

Learning Engagement & Confidence

- I feel motivated to learn and attend classes regularly.

- I believe I can succeed in my studies if I work hard.
- My teachers encourage me to recognise my strengths and abilities.
- I am confident about my future after finishing this programme.
- The teaching methods used in class make learning enjoyable and meaningful.

Student Voice & Participation

- Students are asked for their opinions about school life and wellbeing.
- I feel that my feedback is taken seriously by teachers or school leaders.
- I am encouraged to participate in school projects or wellbeing activities.
- The school celebrates student achievements and efforts beyond grades.

Stress & Coping

- I know how to manage stress related to schoolwork.
- The school workload is reasonable and allows time for rest.
- I feel that my school helps me build resilience and coping skills.
- I have learned how to seek help when I need it.

Wellbeing Survey for staff

Leadership & Organisational Culture

- The leadership of this institution actively supports staff wellbeing.
- Wellbeing is discussed openly and without stigma in staff meetings.
- I understand how my work contributes to the institution's vision and purpose.
- Decisions affecting staff workload and wellbeing are communicated transparently.
- I feel valued and appreciated for the work I do.

Workload, Balance & Resources

- My workload is manageable within normal working hours.
- I have enough time to prepare quality teaching and support students effectively.
- The institution provides resources (materials, time, training) that help me do my job well.
- I can maintain a healthy balance between work and personal life.
- The scheduling of classes and administrative tasks is fair and realistic.

Professional Relationships & Support

- Colleagues are supportive and willing to help each other.
- I feel comfortable discussing wellbeing or stress issues with my line manager.
- I receive constructive feedback and encouragement from leadership.

- Teamwork and collaboration are recognised and rewarded.
- Conflicts or tensions among staff are handled respectfully.

Professional Growth & Recognition

- The institution offers training or workshops related to wellbeing and mental health.
- I have opportunities to develop professionally in areas that interest me.
- My contributions to school life (beyond teaching) are acknowledged.
- Innovation and creativity are encouraged.
- I feel proud to work in this institution.

Psychological Safety & Climate

- I can express concerns or mistakes without fear of blame.
- Communication between staff and management is open and respectful.
- The school environment allows me to be myself at work.
- The institution reacts constructively to feedback or criticism.
- Overall, I feel that this is a mentally healthy place to work.

Scale: 1 = Strongly disagree ... 5 = Strongly agree

Administration: Anonymous; twice per year; combined with qualitative feedback.

Optional Short Open Questions

For students:

- What helps you feel good about coming to school?
- What could the school do to better support your wellbeing?

For staff:

- What aspects of your work support your wellbeing the most?
- What changes would make your work environment healthier and more balanced?

Administration Tips

- Keep the survey anonymous and voluntary.
- Aim for twice per year (start and end of academic year).
- Use both online and paper formats to maximise participation.
- Combine quantitative results with focus groups for qualitative insights.
- Share findings transparently with staff and students, and discuss next steps.

Tool 10. SMART Goals Matrix

Purpose:

To help institutions convert their wellbeing vision into **specific, measurable, achievable, relevant, and time-bound goals**.

The matrix ensures that action planning remains realistic, transparent, and results-oriented.

When to Use:

During **Phase 3: Planning**, immediately after the Vision Workshop and before finalising the Action Plan Template.

How to Use:

1. Review findings from the self-assessment and focus groups.
2. Select 3–5 key wellbeing priorities.
3. Define one or more SMART goals for each.
4. Revisit quarterly to track progress and adjust as needed.

SMART Goals Matrix Template

Priority Area	Specific Objective	Measurable Indicator(s)	Achievable Actions	Relevant Outcome / Rationale	Time-Bound Deadline	Responsible Person(s)
Staff Wellbeing	Increase perceived workload manageability among staff	15 % improvement on Staff Survey Q12 by June 2026	- Introduce digital marking tool - Streamline admin procedures	Reduces stress, improves morale	June 2026	HR Manager, Wellbeing Lead
Student Support	Improve awareness of mental-health help options	90 % of students can name ≥ 1 support service (survey)	- Develop posters, orientation sessions	Encourages early help-seeking	December 2025	Counsellor, Student Rep
School Climate	Strengthen sense of belonging	Average score ≥ 4 on “I feel I belong” item	- Launch peer-mentoring scheme - Host	Builds engagement and retention	April 2026	Teachers’ Team, Students’ Council

Priority Area	Specific Objective	Measurable Indicator(s)	Achievable Actions	Relevant Outcome / Rationale	Time-Bound Deadline	Responsible Person(s)
			community day			

Facilitation Tips

- Keep wording concrete and short.
- Check vertical alignment: each action must clearly contribute to its objective.
- Colour-code priorities (e.g., green = on track, yellow = in progress).
- Use this matrix as an appendix to the **Institutional Wellbeing Action Plan**.

Tool 11. Implementation tracker

Purpose

The **Implementation Tracker** helps the Wellbeing Committee and leadership team monitor progress on each action in the Institutional Wellbeing Action Plan.

It provides a simple, visual way to record what has been done, what is in progress, and what needs attention — ensuring accountability and learning throughout the process.

When to Use







During **Phase 4: Implementation**, once the Action Plan has been approved and launched. It should be reviewed at every Wellbeing Committee meeting (at least once per term).

How to Use

1. Transfer actions and SMART goals from the **Action Plan Template** into this tracker.
2. Update the “Status,” “Progress,” and “Notes” columns regularly.
3. Use colour coding or symbols (● on track | ● in progress | ● delayed | ○ not started).
4. At the end of the year, summarise achievements for the **Annual Wellbeing Report**.

Implementation Tracker Template

Priority Area	Action / Initiative	Start Date	Target Completion Date	Responsible Person / Team	Resources Needed	Status (● ● ● ○)	Progress / Key Milestones	Barriers / Support Needed	Evidence / Outputs	Next Review Date
Staff Wellbeing	Conduct staff wellbeing survey	Sep 2025	Oct 2025	HR Manager, Wellbeing Lead	Survey tool, time slot in staff meeting	●	Survey completed, 78 % response rate	None	Data summary presented to committee	Nov 2025
Student Support	Launch peer-mentoring programme	Oct 2025	Apr 2026	Counsellor, Student Council	Training materials, supervision time	●	10 mentors trained; programme piloted in 2 departments	Need teacher liaison support	Mid-term evaluation report	Jan 2026
School Climate	Redesign common space with	Nov 2025	Feb 2026	Facilities Team, Art Teacher	Paint, display boards	○	Planning phase only	Funding approval pending	Photos, feedback survey	Mar 2026

Priority Area	Action / Initiative	Start Date	Target Completion Date	Responsible Person / Team	Resources Needed	Status (   )	Progress / Key Milestones	Barriers / Support Needed	Evidence / Outputs	Next Review Date
	student art									
Communication	Develop monthly wellbeing bulletin	Oct 2025	ongoing	Wellbeing Coordinator	Template, design software		3 issues published	Need wider staff submissions	Newsletter analytics	Jan 2026
Leadership & Governance	Integrate wellbeing into annual review	Jan 2026	Jun 2026	Principal, QA Officer	Meeting time, evaluation form		Draft not yet reviewed	Competing priorities	Updated QA report	Feb 2026

Suggested Review Process

- **Monthly (informal):** Coordinator checks progress with responsible persons.
- **Termly (formal):** Wellbeing Committee reviews tracker and updates status.
- **Annually:** Data from tracker feeds into *Annual Wellbeing Report* and *Dashboard*.

Optional Visual Summary

Create a simple dashboard or chart showing:

- % of actions completed (by pillar or priority area)
- Average progress rating
- Highlights / success stories

(This can be integrated directly with the Data Dashboard Template – Tool 4.)

Facilitator Tips

- Use this tracker during meetings to focus discussion on *solutions*, not just problems.
- Encourage responsible persons to add short reflections (“What worked? What didn’t?”).
- Archive each year’s tracker to show institutional learning over time.
- Keep the format lightweight — ideally one page per term or per priority area.

Tool 12. Communication Plan Template

Purpose:

To ensure consistent, transparent, and engaging communication about wellbeing initiatives.

When to use:

At the start of Phase 4: Implementation, once key actions are identified.

Who should use it:

Wellbeing Coordinator, communications officer, or leadership delegate.

How to use:

- Define target audiences (staff, students, parents, partners).
- Plan key messages, channels (email, posters, assemblies, social media), and frequency.
- Use the template to map who communicates what, when, and how.

Outcome:

Improved awareness, participation, and visibility of wellbeing efforts across the institution.

Target Group	Message	Channel	Frequency	Responsible
Staff	Updates on wellbeing initiatives	Staff meetings, newsletter	Monthly	Wellbeing Champion
Students	Awareness & participation	Posters, assemblies, social media	Continuous	Student Council
Parents/Employers	Partnership and progress	Email, open days	Twice yearly	Head of Department

Tool 13. Reflection Worksheet: “Our Culture of Care”

Purpose:

To prompt leadership teams to examine the institution's implicit values and practices around wellbeing.

When to use:

During Vision-Building or mid-implementation reflection workshops.

Who should use it:

Leadership, Wellbeing Committee, and teacher teams.

How to use:

- Discuss questions such as: “How do new staff experience our culture?”
- Identify small symbolic or behavioural changes that could improve climate (e.g., language used in meetings, recognition rituals).
- Document agreed actions and revisit every six months.

Outcome:

Heightened cultural awareness and alignment between values and daily behaviour.

Guiding questions for leadership teams:

1. How does our institutional language reflect care and inclusion?
2. What daily practices signal empathy or, conversely, neglect?
3. Which behaviours do we reward — productivity or balance?
4. How do new staff experience our culture in their first month?
5. What symbolic gestures can demonstrate our wellbeing commitment?

Use during leadership retreats or strategic planning sessions.

Tool 14. Case Study Template

Purpose:

To document and share good practice initiatives in wellbeing for learning and replication.

When to use:

Any time after initial implementation (Phases 4–5).

Who should use it:

Project leads or teachers who implemented a wellbeing initiative.

How to use:

- Capture context, actions, outcomes, and lessons learned.
- Keep it concise (1–2 pages) with quotes or images where possible.
- Share internally and externally (networks, conferences, Erasmus+ dissemination).

Outcome:

Portfolio of institutional experience supporting learning, recognition, and scaling-up.

Institution Name	Size / Type	Challenge Identified	Action Taken	Outcomes	Lessons Learned
Example: Rijeka Technical School	500 students	High stress before exams	Introduced “Calm Room” and relaxation workshops	Reduced anxiety reports; higher attendance	Importance of student participation

Tool 15. Annual Wellbeing Report Template

Purpose:

To ensure accountability, transparency, and learning by summarising yearly progress.

When to use:

At the end of each academic year (Phase 5: Sustainability).

Who should use it:

Wellbeing Committee with input from leadership and departments.

How to use:

- Use Action Plan as a reference to summarise what was achieved.
- Present survey data, indicators, success stories, and areas for improvement.
- Circulate to staff and stakeholders and publish key highlights.

Outcome:

Formal integration of wellbeing into institutional reporting and quality systems.

Sections:

1. Executive summary
2. Overview of actions taken (linked to Action Plan)
3. Key indicators (survey data, attendance, staff turnover, feedback)
4. Success stories and challenges
5. Next-year priorities

This format supports transparency and aligns wellbeing with quality assurance.

Tool 16. AHEADinVET Institutional Self-Assessment Framework

This structured framework enables institutions to assess their progress in embedding mental health. It uses the **Four Pillars Model** as its foundation, with performance levels from 1 (Initial) to 4 (Embedded).

The **AHEADinVET Institutional Self-Assessment Framework** enables VET institutions to evaluate their progress in embedding mental health and wellbeing within organisational systems.

It is both a diagnostic and developmental tool, structured around the *Four Pillars Framework* (Leadership, Teaching, Staff Wellbeing, and Partnerships).

The framework provides descriptors for four levels of maturity, from *Initial* (1) to *Embedded* (2), helping institutions locate their current stage and set realistic improvement goals. Used annually or biannually, it promotes reflective dialogue among leaders, teachers, and students and creates evidence for internal quality assurance and external accreditation.

It is not a judgement tool but a guide for **continuous institutional learning and cultural transformation**.

Pillar	Level 1 – Initial	Level 2 – Developing	Level 3 – Consolidating	Level 4 – Embedded
Leadership & Governance	No formal policy; limited awareness	Informal commitment; pilot activities	Wellbeing included in plans and reports	Policy fully integrated; annual review
Teaching & Learning	No reference to wellbeing	Individual teacher initiatives	Coordinated wellbeing practices	Wellbeing culture across all classrooms
Workplace Wellbeing	Ad hoc support; high stress levels	Some recognition, little structure	Staff wellbeing programmes running	Positive, sustainable workplace culture
Partnerships	Minimal external contact	Occasional collaboration	Regular local partnerships	Long-term, multi-sectoral network

Scoring method: Each pillar rated 1–4; average score provides global wellbeing maturity level.

Purpose: Benchmark progress and guide next-year planning.

Tool 17. List of European and International Resources

This tool presents a curated list of key European and international frameworks, reports, and guidelines relevant to mental health and wellbeing in vocational education and training.

It connects institutional action with broader policy contexts, allowing VET leaders to align their strategies with existing European priorities and international standards.

The resources include EU and OECD policy documents, WHO frameworks, and selected Erasmus+ initiatives that inform evidence-based practice.

By consulting these materials, institutions can ensure their wellbeing strategies are coherent, comparable, and up to date within the European Education Area.

Organisation / Framework	Relevance to VET Mental Health	Link / Reference
WHO – Comprehensive School Health Model	Framework for holistic wellbeing in education	WHO (2021)
EU Strategic Framework for Education & Training 2030 (ET 2030)	Prioritises inclusion, wellbeing, and staff support	European Commission (2021)
European Pillar of Social Rights	Principle 16: Health care and wellbeing at work	European Commission
EU Youth Strategy 2019–2027	Focus on mental health and participation	EU Youth Portal
OECD Education 2030 Framework	Emphasises emotional resilience and agency	OECD (2018)
EU Guidelines on Improving Teachers’ Mental Health	Practical guidance for educational leadership	European Commission (2023)
AHEADinVET Erasmus+ Project Outputs	Evidence-based resources and self-assessment tools for VET	www.aheadinvet.com

Tool 18. Institutional Roadmap (24-Month Plan) – example

The 24-Month Institutional Roadmap offers a practical example of how VET institutions can structure their wellbeing transformation journey over two academic years.

It follows the five-phase model described in the Organisational Change Handbook, from *Diagnosis* to *Sustainability*, and illustrates typical milestones, responsible actors, and indicative timelines.

The roadmap serves as a planning template rather than a fixed schedule: each institution may adapt it to its size, resources, and readiness for change.

Its primary function is to visualise progression, promote accountability, and maintain momentum by breaking down long-term transformation into achievable steps.

Phase	Timeframe	Key Milestones
Diagnosis	Months 1–3	Wellbeing Audit completed; report approved
Vision Building	Months 4–5	Vision Statement adopted; communication campaign launched
Planning	Months 6–8	Action Plan finalised; committee established
Implementation	Months 9–20	Pilot projects run; staff training delivered
Sustainability	Months 21–24	Policy integration; annual wellbeing report published

The roadmap can be tailored to institutional pace and context.

Tool 19. Recommended Indicators for Monitoring and Evaluation

Effective transformation requires clear, measurable evidence of progress.

This tool provides a set of recommended indicators that VET institutions can use to monitor and evaluate the impact of their wellbeing initiatives.

The indicators cover multiple domains (student and staff wellbeing, institutional culture, attendance, retention, and community engagement) and are designed to integrate easily with existing quality-assurance systems.

They enable data-driven reflection, support transparent reporting, and demonstrate institutional commitment to continuous improvement.

Institutions are encouraged to adapt these indicators to their national contexts while maintaining consistency in measurement over time.

Domain	Indicator	Data Source	Frequency
Student wellbeing	Self-reported wellbeing score	Annual survey	Yearly
Staff wellbeing	Burnout index (e.g. Copenhagen Burnout Inventory)	Staff questionnaire	Yearly
Institutional culture	Sense of belonging (Likert 1–5)	Mixed methods	Every 2 years
Attendance	Student absenteeism rate	School records	Termly
Retention	Early school leaving percentage	Institutional data	Annual
Staff stability	Turnover rate	HR data	Annual
External engagement	Number of partnerships	Administrative records	Annual
Communication	Visibility of wellbeing messages	Internal audit	Twice yearly

Tool 20. Visual Resources and Templates (for print or digital use)

Visual communication strengthens engagement and understanding.

This final tool provides a list of suggested infographics, charts, and printable templates that can accompany the Strategy Paper or be used in institutional training, reporting, and dissemination.

These visuals translate complex frameworks, such as the *Four Pillars Model* and *Five-Phase Change Process*, into accessible formats for staff and students.

They also include practical templates (e.g., posters, dashboards, wellbeing radar charts) that help institutions make wellbeing visible in both physical and digital spaces.

Integrating visual materials supports transparency, participation, and a recognisable identity for the wellbeing initiative.

Suggested inclusions for final report appendices or web toolkit:

- Wellbeing Radar Chart (for audit visualisation)
- Four-Pillar Model infographic
- Five-Phase Change Process flowchart
- Example of a staff wellbeing poster (“We all have mental health”)
- Infographic: *From Vision to Action – The Journey of a Mentally Healthy VET Institution*

References

- AHEADinVET. (2023). *MentAl HEalth AmbassaDors in VET institutions (AHEADinVET)* [Project description]. Retrieved October 2025, from <https://www.aheadinvet.com/en/projekt>
- Bandura, A. (1997). *Self-efficacy: The exercise of control*. New York, NY: W. H. Freeman.
- Basch, C. E. (2011). Healthier students are better learners: A missing link in school reforms to close the achievement gap. *Journal of School Health*, 81(10), 593–598. <https://doi.org/10.1111/j.1746-1561.2011.00632.x>
- Deci, E. L., & Ryan, R. M. (2000). The “what” and “why” of goal pursuits: Human needs and the self-determination of behaviour. *Psychological Inquiry*, 11(4), 227–268. https://doi.org/10.1207/S15327965PLI1104_01
- European Commission. (2019). *European Youth Strategy 2019–2027*. Luxembourg: Publications Office of the European Union. <https://youth.europa.eu/youthstrategy>
- European Commission. (2021). *Council Resolution on a Strategic Framework for European Cooperation in Education and Training towards the European Education Area and beyond (2021–2030)*. Brussels: European Commission.
- European Commission. (2023). *A Comprehensive Approach to Mental Health*. Brussels: European Commission. <https://ec.europa.eu>
- European Foundation for the Improvement of Living and Working Conditions (Eurofound). (2022). *Working conditions and workers’ well-being in Europe*. Luxembourg: Publications Office of the EU.
- European Parliament & Council of the EU. (2017). *European Pillar of Social Rights*. Luxembourg: Publications Office of the EU.
- Fullan, M. (2007). *The new meaning of educational change* (4th ed.). New York, NY: Teachers College Press.
- Hargreaves, A., & Fullan, M. (2012). *Professional capital: Transforming teaching in every school*. New York, NY: Teachers College Press.
- Keyes, C. L. M. (2007). Promoting and protecting mental health as flourishing: A complementary strategy for improving national mental health. *American Psychologist*, 62(2), 95–108. <https://doi.org/10.1037/0003-066X.62.2.95>
- Kieling, C., et al. (2011). Child and adolescent mental health worldwide: Evidence for action. *The Lancet*, 378(9801), 1515–1525. [https://doi.org/10.1016/S0140-6736\(11\)60827-1](https://doi.org/10.1016/S0140-6736(11)60827-1)
- OECD. (2018). *The Future of Education and Skills 2030: Conceptual learning framework*. Paris: OECD. <https://www.oecd.org/education/2030-project>
- Schein, E. H. (2017). *Organizational culture and leadership* (5th ed.). Hoboken, NJ: John Wiley & Sons.

Seligman, M. E. P. (2011). *Flourish: A visionary new understanding of happiness and well-being*. New York, NY: Free Press.

World Health Organization (WHO). (2010). *A framework for promoting health in schools: The WHO global school health initiative*. Geneva: WHO.

World Health Organization (WHO). (2021). *Guidelines on mental health promotion and protection in schools*. Geneva: WHO. <https://www.who.int>

World Health Organization (WHO). (2023). *Mental health: Strengthening our response* [Fact sheet]. Retrieved October 2025, from <https://www.who.int>



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