



QA Level 3 Award in
**Mental Health First Aid
in the Workplace (RQF)**

Qualification Specification

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Key Qualification Information

Qualification number:	603/5026/X
Operational start date:	1 September 2019
Total Qualification Time (TQT):	14
Guided learning hours (GLH):	14
Number of units:	1 mandatory unit
Assessment methods:	<ul style="list-style-type: none"> Theory assessment/multiple choice question paper: 1 x 25 question paper (minimum score 18) per paper



Qualsafe Awards

Not only is Qualsafe Awards (QA) one of the largest Awarding Organisations (AO) in the UK, we are also the biggest AO for First Aid qualifications, making us an extremely trusted and recognisable name that employers look for when selecting a training provider.

We are recognised and regulated by the Office of Qualifications and Examinations Regulation (Ofqual), Qualifications Wales and the Northern Ireland Council for the Curriculum, Examinations and Assessment (CCEA). This means we can offer Centres an extensive range of qualification suites including First Aid; Prehospital Care; Health and Safety; Food Safety; Fire Safety; Education and Training; Manual Handling; and Health and Social Care and Mental Health First Aid.

With a specialist team of subject matter experts on hand to support our Centres, including A&E Consultants, doctors, paramedics, nurses, physiotherapists and specialists in the other sectors, you can be confident that you are truly working with the industry experts.

Qualification overview

This qualification forms part of the QA Mental Health suite of qualifications. The qualification and learning outcomes are based on the recommendations of:

- QA training providers, subject matter experts and in-depth research in the area of mental health.

This QA qualification is for people who wish to:

- Raise their awareness of the signs and symptoms associated with mental health problems both related to the workplace and in the general public
- Be able to actively listen and feel confident to have a conversation with individuals suffering potential mental ill-health
- Be able to assist with policy writing and risk assessments for mental health in the workplace
- Direct anyone with potential mental health problems to a reliable source of support both internally and externally

This qualification specification provides information for Centres about the delivery of the QA Level 3 Award in Mental Health First Aid in the Workplace (RQF) and includes qualification approval requirements, assessment methods and quality assurance arrangements.

Objective

The objective of the qualification is to benefit the Learner by educating them in common mental health problems related to work such as stress, depression anxiety, and post-traumatic stress disorder.

The qualification includes how to actively listen and have a conversation provide suggestions but empowering the individual to make their own decisions on how to best provide assistance in difficult times. The Learner will have an understanding of laws that apply to work place associated with mental health and in addition know how to assist with making the work environment beneficial to both employer and employee.

Purpose

The purpose of this qualification is to prepare Learners for further learning in the area of mental health or continuing professional development in the area of mental health first aid.



Intended audience

This qualification is for those over the age of 18, who have an interest in mental health first aid and would like to raise their awareness of mental health within the work environment and be able to actively listen and guide/support work colleagues. Although this qualification is ideal for those who are line managers or work in human resources department any member of staff should be able to attend this qualification.

Structure

This qualification contains 1 mandatory unit with a Total Qualification Time (TQT) of 14 hours. Full details of the unit are available in the QA Level 3 Award in Mental Health First Aid in the Workspace (RQF) appendix.

Learners must complete the assessment in the unit, successfully within the registration period to achieve the qualification. The maximum period to achieve this qualification, including any referrals is 12 weeks.

TQT is the total number of hours required for a Learner to achieve this qualification. It has 2 elements:

- Guided Learning Hours (GLH) is the time a Learner is being taught and assessed under the immediate guidance of a Trainer/Assessor, which for this qualification is 14 GLH (minimum), and
- The number of hours a Learner will reasonably be likely to spend in preparation and study, including assessment, as directed by, but not under the immediate guidance or supervision of a Trainer, e.g. pre-course reading, which for this qualification is 14 hours

Other units

The QA Level 3 Award in Mental Health First Aid in the Workplace (RQF) contains a unit from the QA Level 3 Award in Teaching and Assessing Mental Health Qualification (RQF).

Therefore assessment gained through QA Level 3 Award in Mental Health First Aid in the Workplace (RQF) unit maybe used as RPL towards achievement in of the QA Level 3 Award in Teaching and Assessing Mental Health Qualifications (RQF).

Relationship with other related qualifications

The units may appear in other mental health first aid qualifications that contain multiple units.

Recognition of Prior Learning

Recognition of Prior Learning (RPL) is not permitted for this qualification.

Entry requirements

Learners must be at least 18 years old on the first day of the training. Learners should have an interest in the area of mental health due to the content of the course and the nature of the role of the mental health first aider.

There are no other formal entry requirements but to benefit from the learning we advise that Learners have a minimum of Level 3 in literacy and numeracy or equivalent.

Progression

Learners may progress to the other qualifications including:

- QA Level 2 Award in CitizenAid (RQF)
- QA Level 3 Award in Emergency First Aid at Work (RQF)
- QA Level 3 Award in Paediatric First Aid (RQF)
- QA Level 2 Award in Safeguarding and Protecting Children and Vulnerable Adults at Risk (RQF)
- QA Level 3 Award in Teaching and Assessing Mental Health Qualifications (RQF)



Requalification requirements

This qualification is valid for a period of 3 years. The Learner needs to retake the qualification before the certificate expiry date to remain qualified.

Qualification approval requirements

Quasafe Awards requires the Centre:

- To have appropriate policies, systems and procedures in place
- To appoint suitable individuals from their personnel team to train, assess and quality assure their QA qualifications
- To have suitable and adequate venues, equipment and learning resources

In order to secure and maintain approval from QA, Centres need a minimum staffing requirement for each qualification suite they deliver, which for this qualification is:

One Trainer/Assessor	Responsible for the delivery and assessment of qualifications
One Internal Quality Assurer	Responsible for quality assuring the delivery, assessment and awarding of this qualification

Quasafe Awards requires the Centre staff to read and understand QA's key policies and procedures, and to abide by their contents.

Trainers

All Trainers should have the skills, knowledge and experience to be able to teach and demonstrate the subject. Each Trainer must be approved by Quasafe Awards and provide evidence of:

1. A QA Level 3 Award in Teaching and Assessing Mental Health Qualifications (RQF)
2. An up to date QA Level 3 Award in Mental Health First Aid in the Workplace (RQF)
3. A formal teaching/training qualification (see *Teaching qualifications* table)

Teaching qualifications	
B.Ed, M.Ed	City and Guilds Teacher's Certificate or equivalent
PGCE, PCET, Cert Ed	Ofqual Regulated Level 3 Award and Level 4 Certificate in Education and Training
NVQ Level 3 in Learning and Development	PTTLS, CTTLS, DTTLs
NVQ Level 4 in Learning and Development	Further Education Teacher's Certificate
Qualified Teacher Status - QTS	

If relevant qualifications or experience do not appear on these lists, please provide us with details as these alternatives could be acceptable.

Trainers are expected to keep up to date with the subject area and provide evidence of continuing professional development (CPD).



Assessors

There is no requirement for a separate Assessor when delivering this qualification. Once Trainers have been approved to deliver the qualification, they can assess Learners.

It is best practice for Trainers to hold a formal (regulated) assessing qualification or attend relevant Assessor CPD training with an Awarding Organisation (AO). However, as a minimum, Trainers must follow the principles outlined in the current *National Occupational Standards for Learning and Development: Standard 9 – Assess learner achievement*. Centres must be able to prove this.

Internal Quality Assurers

Each Internal Quality Assurer must be approved by Qualsafe Awards and provide evidence of:

- Hold (or be working towards) a quality assurance qualification or
- Hold or have attended QA approved IQA training relevant to this qualification
- Be occupationally competent in the area of mental health. Examples include QA Level 3 Award in Mental Health in the Workplace (RQF) or other equivalent qualifications, training or experience

It is best practice for IQAs to hold a formal (regulated) IQA qualification and to hold, or be working towards, a formal (regulated) teaching qualification.

Full details of the Centre's requirements for internal quality assurance are in the *QA Centre Quality Assurance Guidance*.

Note: IQAs cannot quality assure a course for which they were the Trainer and/or Assessor.

Venue and equipment

Quality training involves using premises conducive to learning and it is a Centre's responsibility to make sure all venues used for training and assessment purposes are suitable and adequate – whether these are hired or in-house training rooms. They must also comply with all current legislation.

In addition, it is important to use a wide range of equipment and learning resources to support delivery.

As a minimum, Centres must make sure their venues, equipment and other resources include:

Area:	Requirements:
Training venue	<p>The training venue must meet acceptable health and safety standards and be conducive to learning, with sufficient:</p> <p>Size, floor surfaces, seating, writing surfaces, toilet facilities, ventilation, lighting, heating, access, exits, cleanliness, absence of distracting noise.</p> <p>The theory assessment space should allow Learners to sit at least 1 metre apart to prevent collusion.</p>
Audio visual (AV) equipment and training aids	Sufficient AV equipment and training aids to facilitate learning using varying teaching methods.
Learning materials	Provide Learners with clear and accurate reference books/handouts covering the topics included in the qualification.

Note: Learners should sit at least 1 metre apart to prevent collusion during the theory/multiple choice question paper assessment.



Course/Centre administration

Registering Learners

Register Learners with Qualsafe Awards in accordance with the guidance in the *QA Centre Handbook*.

Certification

After a Learner has completed an assessment, unit or qualification, whether they have passed or not, Centres must enter the details and assessment results on the Customer Portal at:

www.qualsafeawards.org

Centres will be given login details and guidance on using the Customer Portal when they are approved to deliver a QA qualification.

The Learner receives a certificate on achieving this qualification.

The certificate date is the date the Learner achieves the unit.

Delivery and support

Learner to Trainer ratio

To maintain the quality of training and assessment, make sure the class ratio is no more than 16 Learners to 1 Trainer. The assessment space should allow Learners to sit at least 1 metre apart during the multiple choice question paper assessment. Never allow more Learners on the course than you can cater for during the assessment.

Delivery plan

Qualsafe Awards provides Centres with a complimentary course programme and detailed lesson plans, which are carefully designed to meet the objective of this qualification and the needs of Learners, making sure Learners are adequately prepared for the assessments.

Learning materials

Centres must provide each Learner with suitable reference material that covers the lesson plans and learning outcomes for this qualification. We recommend the QA Mental Health First Aid in the Workplace Workbook.

Ongoing support

Qualsafe Awards Centres should provide appropriate levels of support to Learners throughout the qualification. The purpose of the support is to:

- Assess knowledge and competence in relation to learning outcomes and the detailed assessment criteria of the units within the appendix
- Give Learners feedback on their progress and how they might be able to improve



Assessment

Methods

Quallsafe Awards has devised assessment tools to make sure Learners are assessed against the required knowledge, skills and understanding, as detailed in the learning outcomes and assessment criteria shown in the *unit specification for this qualification*. Centres should download all assessment papers from the Customer Portal in advance of the course. For the unit there is:

- Theory assessment/multiple choice question papers – there is 1 paper per unit for each Learner and Learners should answer all the questions under ‘examination’ conditions, see *QA Multiple Choice Question Paper Guidelines*:
 - Maximum time allowed is 40 minutes (per multiple choice question paper)
 - Minimum mark is 18 out of 25 to be considered for an overall ‘Pass’. (per multiple choice question paper)

Access to assessment

Quallsafe Awards is committed to equality when designing the assessments for this qualification. Centres can make sure they do not unfairly exclude the assessment needs of a particular Learner by following the *QA Access to Assessment Policy* to determine whether it is appropriate to make a:

- Reasonable adjustment or
- Special consideration

When a reasonable adjustment is made or requested, e.g. written or theory assessment delivered verbally, Centres must complete a Reasonable Adjustment Form and send it to QA with any relevant supporting evidence. Centres should retain a copy of this form for their own records.

Learners may be eligible for special consideration if they have been affected by adverse circumstances beyond their control. A Special Consideration Request Form should be completed and sent to QA for consideration along with supporting evidence prior to implementation. Centres should retain a copy of this form for their own records.

Note: If you have any suggestions for improvements, please let us know.

Learners should be informed about Centre’s and QA’s appeals procedures and how they can access these.

Quality assurance

Centre internal quality assurance

The Centre is required to sample a reasonable amount of assessments as part of the quality assurance of the qualification. This standardisation of assessment across Learners and Trainers is to make sure there is fairness and consistency in assessment practices. The arrangements for this should be included in the Centre’s approved internal quality assurance policy.

Centres must retain all Learner documents and records for a period of 3 years and make sure these are available for review by Quallsafe Awards or our representatives, e.g. External Quality Assurers (EQAs), on request.



Qualsafe Awards external quality assurance

Qualsafe Awards operates a system of ongoing monitoring, support and feedback for approved Centres across the United Kingdom.

QA employs a risk based model to decide the frequency of EQA visits and each approved Centre will receive at least 1 EQA visit within a 3 year cycle.

Direct Claims Status (DCS) for this qualification is dependent on 3 successful QA desk based audits across 3 courses.

Further details of the Qualsafe Awards' external quality assurance programme are available in the *QA Centre Quality Assurance Guidance*.

Further information

Contact us

If you have any queries or comments we would be happy to help you, contact us:

Email: info@qualsafeawards.org

Tel: 0845 644 3305

Useful addresses and websites

- Qualsafe Awards, City View, 3 Wapping Road, Bradford, BD3 0ED
www.qualsafeawards.org/home
- Office of Qualifications and Examinations Regulation (Ofqual):
www.gov.uk/government/organisations/ofqual
- Scottish Qualifications Authority (SQA) Accreditation: <http://accreditation.sqa.org.uk>
- Qualifications Wales: www.qualificationswales.org
- Health & Safety Executive (HSE): www.hse.gov.uk
- Skills for Health: www.skillsforhealth.org.uk
- Mind: www.mind.org.uk/
- Mental Health Foundation: www.mentalhealth.org.uk
- NICE: www.nice.org.uk/search?q=mental+health
- Samaritans: www.samaritans.org/
- Rethink mental illness: www.rethink.org/services-groups/service-types/advice-and-helplines
- Anxiety UK: www.anxietyuk.org.uk
- Citizen advice: www.citizensadvice.org.uk/
- MindEd: www.minded.org.uk/
- Mental Health UK: www.mentalhealth-uk.org/
- Bipolar UK: www.bipolaruk.org.uk



- Calm: www.thecalmzone.net
- Mens Health Forum: www.menshealthforum.org.uk
- No Panic: www.nopanic.org.uk
- OCD Action: www.ocdaction.org.uk
- OCD UK: www.ocduk.org
- Papyrus: www.papyrus-uk.org
- SANE: www.sane.org.uk/support
- Young Minds: www.youngminds.org.uk
- NSPCC: www.nspcc.org.uk
- Refuge: www.refuge.org.uk
- Alcoholics Anonymous: www.alcoholics-anonymous.org.uk
- Gamblers Anonymous: www.gamblersanonymous.org.uk
- Narcotics Anonymous: www.ukna.org
- Alzheimer's Society: www.alzheimers.org.uk
- Cruse Bereavement Care: www.crusebereavementcare.org.uk
- Rape Crisis: www.rapecrisis.org.uk
- Victim Support: www.victimsupport.org
- Beat: www.b-eat.co.uk
- Mencap: www.mencap.org.uk
- Family Lives: www.familylives.org.uk
- Relate: www.relate.org.uk

Appendix 1 – Qualification Unit

The QA Level 3 Award in Mental Health First Aid in the Workplace (RQF) has 1 unit that learners are required to complete in order to achieve the qualification.

Title:	Understanding the Principles of Mental Health First Aid and the Association within the Workplace	
GLH:	14	
Level:	3	
Total Qualification Time:	14	
Learning outcomes The Learner will:	Assessment criteria The Learner can:	Indicative content
1. Understand Mental Health and its importance	1.1 Identify what is meant by the terms: <ul style="list-style-type: none"> Mental Health and Mental Health first aid 	<p>Mental Health - a person's condition with regard to their psychological and emotional well-being.</p> <p>Mental Health First Aid - how to identify, understand and support a person who may be developing a Mental Health issue, experiencing a worsening of an existing Mental Health problem or in a Mental Health crisis.</p> <p>In the same way as we learn physical first aid, Mental Health first aid teaches you how to recognise those crucial warning signs of Mental ill Health or emotional distress.</p> <p>There may not be any signs of Mental Health.</p> <p>Mental ill Health could be:</p> <ul style="list-style-type: none"> Temporary Fluctuating Ongoing <p>Amplification of normal behaviour</p>
	1.2 Give examples of how poor mental health can affect employers	<p>Benefits of positive mental health in the workplace</p> <ul style="list-style-type: none"> Fewer injuries, less illness and lost time Reduced sick leave usage, absences and staff turnover Increased productivity Greater job satisfaction Increased work engagement Reduced costs to the employer Improved employee Health and community wellbeing Improved morale.
	1.3 Give examples of why positive mental health is important to employees	<p>Employees – Can affect their:</p> <ul style="list-style-type: none"> Confidence Self-esteem Judgement Ability to work with others Productivity Ability to fully concentrate which can often cause costly mistakes or accidents in the workplace.



Learning outcomes <i>The Learner will:</i>	Assessment criteria <i>The Learner can:</i>	Indicative content
	1.4 Recognise contributory factors of work-related stress	Some of the factors that commonly cause work-related stress include: <ul style="list-style-type: none"> • Long hours • Salary • Heavy workload • Changes within the organisation • Tight deadlines • Changes to duties • Job insecurity • Lack of autonomy • Boring work • Insufficient skills for the job • Over-supervision (micromanagement) • Inadequate working environment • Lack of proper resources • Lack of equipment • Few promotional opportunities • Harassment • Discrimination • Poor relationships with colleagues or bosses • Crisis incidents, such as an armed hold-up or workplace death.
2. Understand roles and responsibilities in relation to Mental Health in the workplace	2.1 Identify own role as a Mental Health first aider	Including: <ul style="list-style-type: none"> • Know limitations (it is not the role of a mental health first aider to diagnose mental health conditions) • Listen • Support • Work with workplace to implement good Mental Health practices
	2.2 State importance of own self-care as a Mental Health first aider	Know own limitations in order to maintain own state of Mental Health: <ul style="list-style-type: none"> - Ensure own safety before starting communication - None diagnosis of illness - Only supporting and signposting role - Never make promises not possible to keep - Ensure own mind set is appropriate before speaking to colleagues experiencing Mental Health issues Have another individual to speak/share with
	2.3 State legislation associated with Mental Health in the workplace	Main areas of legislation that relate to Mental Health and well-being in the workplace: <ul style="list-style-type: none"> • Health and safety at work Act 1974 (HASWA) • Human Rights Act 1998 (HRA) • Management of Health and Safety at Work Regulations (1999) • Equality Act 2010



Learning outcomes <i>The Learner will:</i>	Assessment criteria <i>The Learner can:</i>	Indicative content
	<p>2.4 Identify employers' moral duty to employees regarding Mental Health and well being</p> <p>2.5 Give examples of how to promote a culture of positive Mental Health within the workplace</p>	<ul style="list-style-type: none"> • To show workforce is cared for when considering their Mental Health • In order show they are not implementing Mental Health policies/training/Mental Health first aiders solely due to government initiative <p>Employers can promote a positive culture through:</p> <ul style="list-style-type: none"> • Developing an approach to Mental Health that protects and improves Mental Health for all • Providing an environment whereby employees can talk to someone at work about their mental health • Improve awareness of mental health throughout the organisation and at all levels • Have designated mental health champions, senior leaders, etc. who are trained in mental health • Provide tools to promote mindfulness as well as tips for maintaining a healthy lifestyle • Conduct staff surveys on a regular basis and collection of other staff data to assist with improving work policies • Provide a workplace culture that treats everyone with respect and dignity • Doesn't tolerate bullying or harassment in the workplace • Has a whistleblowing policy whereby acts of discrimination can be reported • Provide training and educational opportunities which support understanding of Mental Health issues • Provide access to HR • Join national and local anti-stigma campaigns • Provide peer or mentor groups or programmes with people with experience/training in Mental Health • Allowing employees to have a voice • Promoting equality and diversity • Understanding the importance of a good work/life balance <p>Implementing HSE Management standards</p> <ul style="list-style-type: none"> • Embedding Mental Health information into induction for new starters • Bring in professionals to discuss and raise awareness • Use internal organisational communication • Have team champions (dependent on size of organisation)
<p>3. Understand a range of common Mental Health conditions</p>	<p>3.1 Identify characteristics and features of common Mental Health conditions</p>	<p>Suicide</p> <p>Warning signs</p> <ul style="list-style-type: none"> • Sometimes there are no warning signs • Fluctuating mood (happy quickly after being depressed) • Increased feelings making them tearful • Restless or agitated • Withdrawn from others • Misuse of drugs and alcohol • Low energy levels • Unkempt • Sleeping/eating more/less than usual • Suicide plan • Talking about wanting to die



Learning outcomes <i>The Learner will:</i>	Assessment criteria <i>The Learner can:</i>	Indicative content
		<p>Post-traumatic stress disorder (PTSD) PTSD can develop following being involved in or witnessing a traumatic, horrific, threatening event or series of events. Symptoms are</p> <ul style="list-style-type: none"> • Re-experiencing the trauma – memories, flashbacks, nightmares • Avoidance – places, thoughts, situations or people associated with the trauma • Persistent perceptions of heightened threat – hypervigilance, startled reactions <p>The symptoms persist for at least several weeks and cause significant impairment in personal, family, social, educational, occupational or other important areas of functioning</p> <p>Obsessive compulsive disorder (OCD) Obsessional fear of:</p> <ul style="list-style-type: none"> • Contamination • Causing harm • a need for symmetry or perfection • Own behaviour <p>Compulsive behaviour can include making:</p> <ul style="list-style-type: none"> • Checks • Rituals • Requiring reassurance • Correcting thoughts <p>Phobias Fear of a potential panic attack can lead to people fearing:</p> <ul style="list-style-type: none"> • Outdoors (agoraphobia) or environments • Crowds • Specific modes of transport • Events • Animals <p>Bipolar</p> <ul style="list-style-type: none"> • Bipolar type I disorder – A person affected by bipolar I disorder has had at least one manic episode in his or her life. • Bipolar type II disorder – At least one episode of severe depression and symptoms of hypomania. • Cyclothymic disorder – Persistent instability of mood over a period of at least 2 years. Involving many periods of depression and hypomania. The symptoms are not severe enough to meet the criteria for Bipolar I or II. However the symptoms result in significant distress or impairment in personal, family, social, educational, occupational or other important areas of functioning. • A manic episode is an extreme mood state lasting at least one week unless shortened by a treatment intervention characterized by euphoria, irritability, or expansiveness, and by increased activity or a subjective experience of increased energy, accompanied by other characteristic symptoms such as rapid or pressured speech, flight of ideas, increased self-esteem or grandiosity, decreased need for sleep, distractibility, impulsive or reckless behaviour, and rapid changes among different moods. • Hypomania – This is a much milder type of mania lasting a few days.



Learning outcomes <i>The Learner will:</i>	Assessment criteria <i>The Learner can:</i>	Indicative content
		<p><u>Self-harm</u> This is a behaviour not a disorder Is when someone intentionally injures their body. Usually to express or cope with overwhelming distress. Physical signs</p> <ul style="list-style-type: none"> • Cuts, bruises or cigarette burns in usually hidden areas • Low mood • Lack of motivation • Suicidal • Not wanting to communicate • Wearing clothing to hide injuries • Hatred of themselves (feeling they are not good enough) • Hair damage (due to hair pulling) <p><u>Psychosis</u> The key symptoms of a psychotic disorder are; Inability to reality test – therefore having a distorted view of what is real or not</p> <p><u>Positive Symptoms</u> (thoughts and feelings that are ‘added’ to a person’s experiences e.g. hearing voices) Persistent hallucinations – seeing, hearing, feeling, smelling or tasting something that others don’t. Persistent delusions – firm held false belief not consistent with the person’s culture Disorganised thinking – confused and distorted, often manifests as distorted speech. Disorganised behaviours – any behaviour that doesn’t fit in with the situation e.g. inappropriate clothing or emotional response.</p> <p><u>Negative symptoms</u> (things ‘taken away’ from a person’s experiences e.g. reduced motivation) Blunted or flat effect – inexpression or lack of expression Avolition – lack of motivation to complete purposeful tasks Psychomotor disturbances – anxious restlessness, making movements without meaning to.</p> <p>Contributing factors to consider Triggers There are a vast array of possible triggers/event that can cause someone to have Mental ill Health including: Bereavement; Birth of a child; Anniversary dates of losses or trauma; Workload/examinations/tests; Severe or long term stress; Family feuding; Break up of a relationship; Loneliness; Bullying or being judged, domestic violence; Debt; Physical illness (long term); Sexual harassment; Certain smells, tastes, or noises; Abuse, trauma or neglect; Drug and alcohol misuse; Witnessing or being involved in a traumatic event; Head injuries; Social media/technology; Menopause; Weather (winter blues)</p>



Learning outcomes The Learner will:	Assessment criteria The Learner can:	Indicative content
		<p>Alcohol General effects of alcohol on the individual</p> <ul style="list-style-type: none"> • Stage 1 – relaxation and euphoria (feeling a little merry) • Stage 2 – excited and agitated (getting loud and inappropriate) • Stage 3 – reduction of feeling pain and lack of inhibitions (not feeling hurt when falling over and behaving in ways you wouldn't otherwise) • Stage 4 – muscle relaxation and incoordination (can't feel much or walk in a straight line) • Stage 5 – Anaesthesia – can't feel a thing (could carry out surgery without you feeling it) <ul style="list-style-type: none"> • Often used as 'self-medication' to reduce pain of distress. • This is a similar effect to what Ether has on you if you are anaesthetised and about to have surgery. • Alcohol is a toxic chemical and does a tiny bit of brain damage each time. <p>Alcohol Limits</p> <ul style="list-style-type: none"> • Maximum 14 units per week for Men and Women • Spread out over the week • No binge drinking • Drinking if pregnant <p>Other Drugs of Addiction Cocaine and cannabis can worsen pre-existing Mental Health conditions. Drug Induced Psychosis – generally temporary state where the person will experience psychotic symptoms such as delusions and hallucinations. Dual Diagnosis – Where a person has a dependency to alcohol/drugs and a Mental Health condition.</p>
	<p>3.2 Recognise signs of work-related stress</p>	<p>Stress (Work-related and other) Signs of stress in teams:</p> <ul style="list-style-type: none"> • Conflicts/arguments • Higher staff turnover • Low morale • Poor performance • More reports of stress • Higher instances of sickness • Poor performance • More complaints and grievances <p>Signs of stress in an employee A change in the way someone acts can be a sign of stress, for example they may:</p> <ul style="list-style-type: none"> • Take more time off • Be consistently late for work • Be twitchy or nervous • Be short tempered <p>A change in the way someone thinks or feels can also be a sign of stress, for example:</p> <ul style="list-style-type: none"> • Loss of motivation, commitment and confidence • Being withdrawn • Mood swings • Increased emotional reactions e.g. be more tearful, sensitive or aggressive



Learning outcomes <i>The Learner will:</i>	Assessment criteria <i>The Learner can:</i>	Indicative content
		Physical symptoms <ul style="list-style-type: none"> • Panic attack • Headache • Chest pain • Tiredness • Diarrhoea or constipation • Vomiting • Dizzy or faint
	3.3 Recognise psychological symptoms of stress	Psychological Symptoms <ul style="list-style-type: none"> • Agitated, irritable • Overwhelmed • Depressed • Unable to enjoy life • Neglected • Indecisive • Restless • Emotionally unstable • Lack of concentration
	3.4 Identify different types of anxiety	<p><u>Anxiety</u> The symptoms associated with Anxiety Disorders can be split into 2 categories:</p> <ul style="list-style-type: none"> • Physical symptoms • Psychological symptoms <p>There are several types of anxiety disorders, including:</p> <ul style="list-style-type: none"> • Generalized anxiety disorder • Specific phobia • Social anxiety disorder • Separation anxiety disorder • Agoraphobia • Panic disorder • Selective mutism <p>Panic attacks Basic symptoms</p>



Learning outcomes <i>The Learner will:</i>	Assessment criteria <i>The Learner can:</i>	Indicative content
	3.5 State different types of eating disorders	<p><u>Eating disorders</u></p> <p>Anorexia – limiting energy intake</p> <p>Bulimia – bingeing (eating large quantities of food) the purging (expelling the food by vomiting or by use of laxatives)</p> <p>Binge eating – loss of control over eating large quantities of food</p> <p>Emotional overeating – eating large amounts of food during low moods in order to feel comforted</p> <p>OSFED – other specified eating or feeding disorder, where symptoms do not fit in with any one ED.</p> <p>ARFID – avoidant/restrictive food intake disorder, avoiding or restricting the intake of certain types of food (of a certain texture)</p> <p>Pica – eating things that are not food and have no nutritional value (wood, paper, soap....)</p>
	3.6 Recognise signs of depression	<p><u>Depression</u></p> <p>Symptoms</p> <ul style="list-style-type: none"> • Continued sad mood (persistent) • Lack of energy • Low self-confidence/self esteem • Lack of appetite or increased appetite • Insomnia • Suicidal thoughts • Loss of libido • Communication and cognitive difficulty <p>Signs</p> <ul style="list-style-type: none"> • Appearance – May look unkempt and lack personal hygiene • Quiet slow monotone voice • Movement is slow • Sad or anxious expression • May self-harm
<p>4. Know how to implement Mental Health first aid strategies in the workplace</p>	4.1 Identify best practice for employers in relation to mental health in the workplace	<p>Employers should:</p> <ul style="list-style-type: none"> • Carrying out a risk assessment; • Select appropriate mental health first aiders; • Train mental health first aiders; • Have an adequate policy in place; • Know where to signpost employees with mental issues to
	4.2 Identify key features within Mental Health first aid at work action plan	<p>Action plan to include:</p> <ul style="list-style-type: none"> • <u>Listening STOPS Distress</u> • Spot signs of distress • Talk • Offer hope, care, comfort • Professional support • Self help strategies • <i>'If you spot distress, start listening'</i>



Learning outcomes <i>The Learner will:</i>	Assessment criteria <i>The Learner can:</i>	Indicative content
	4.3 Identify appropriate coping strategies to assist individuals who are demonstrating symptoms of Mental ill-Health	<ul style="list-style-type: none"> • Controlling breathing (deep breathes, square breathing, breathing exercises, meditation) • Replacement of negative thoughts • Eating Healthy • Sleeping the right amount • Exercise (low intensity or just being active) • Art or music • Watch a film • Walk or drive • Read • Gardening
5. Understand how employers can provide support to employees	5.1 Identify how to introduce core standards for Mental Health in the workplace	<ul style="list-style-type: none"> • Production, implementation and communication of Mental Health at work plan • Developing Mental Health awareness among employees • Encourage open conversation and the support available • Provide good working conditions • Promote effective people management • Monitor employee Mental Health and wellbeing <p>Thriving at Work (2017) suggest larger organisations with over 500 employees should look at having enhanced standards to include:</p> <ul style="list-style-type: none"> - Increase transparency and accountability through internal and external reporting - Demonstrate accountability - Improve disclosure process - Ensure provision of tailored in house Mental Health support and signposting
	5.2 Identify support for those who are experiencing Mental Health issues whilst at work	<ul style="list-style-type: none"> • Use management process including appraisals, planning or work, additional training and development, assessment of employee (stress assessment) • Create an action plan to help reduce stress • Flexible working or child care assistance • Manage workload • Discussion around support and additional adjustments to work/environment • Ongoing monitoring • Support given to other team members • Reassign work if necessary • Allow for alternative workspace • Promote a positive work environment • Ask everyone to communicate openly and regularly • Have an open door policy



Learning outcomes <i>The Learner will:</i>	Assessment criteria <i>The Learner can:</i>	Indicative content
	<p>5.3 State provisions available to those off work whilst experiencing Mental Health issues</p>	<p>Sickness absence – duration</p> <p>Whilst off sick</p> <ul style="list-style-type: none"> • Active engagement on a regular basis via phone calls, emails, visiting at home (if the employee agrees) don't apply pressure for the employee to return to work • Keep them in the loop regarding work or projects that they may need to be aware of • Remind them of sickness procedures • Support from internal/ external sources to meet the needs of the employees • Return to work – plans in place for phased approach if necessary • Focus on their wellbeing • With consent ask other work employees to keep in touch <p>Wellness Recovery Action Plan (WRAP) Returning to work Return to work interview</p> <ul style="list-style-type: none"> - Tell employees they were missed - Ask the employee how they're feeling - Explain the return-to-work process/procedures - Reassure the employee that they aren't expected to walk straight back into full-time hours, or manage a full-time workload - Use open questions that require more than just a 'yes' or 'no' answer and give people lots of space and time to talk - Listen and try to empathise with the employee - Ask if there are any problems at work that might be causing them stress - Discuss whether there are any difficulties outside work that might be contributing to their absence - Talk about the person's Mental Health problem, if they have disclosed it, and its possible impact on their work - Discuss possible solutions and make sure you are aware of any sources of available support, whether internal or external - Discuss any worries the person has about returning to work, reassure them that these are normal, and agree a strategy together to address their concerns - Help the person think about how they want to manage their return; for example, what they want to say to colleagues <ul style="list-style-type: none"> • Return plan • Access to work programme • Active monitoring • Reasonable adjustment • Rehabilitation policy • Potential retirement



Learning outcomes <i>The Learner will:</i>	Assessment criteria <i>The Learner can:</i>	Indicative content
	5.4 Identify others that can assist in Mental Health crisis both locally and nationally	<p>Common types of support</p> <ul style="list-style-type: none"> • Prescribed medication • Counselling and Talking therapies • Self help • Additional lifestyle or practical support <p>GP or emergency services</p> <p>Social services</p> <ul style="list-style-type: none"> • The Care Act 2014 • Can assist with: <ul style="list-style-type: none"> – Accommodation, employment, education, financial support, extra activities, counselling • Access to social care is gained through a referral (own or someone else), assessment, eligibility, care and support plan Can be asked to pay for social care (depending on financial circumstances) <p>Samaritans</p> <p>Mind</p> <p>Friends, family and carers</p> <ul style="list-style-type: none"> • Supportive • Caring • Listen • May need to help with finances • Home life/ day to day living • “nearest relative” <p>Local Support Networks</p>



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