

### Appendix 1 – Qualification Unit

The QA Level 2 Award in Understanding Mental Health in the Workplace (RQF) has 1 unit that learners are required to complete in order to achieve the qualification.

Title:	Awareness of Mental Health within the Workplace		
Level:	2		
GLH:	7		
Total Qualification Time:	7		
Learning outcomes The Learner will:	Assessment criteria The Learner can:	Indicative content	
Understand Mental     Health and its importance	1.1 Identify what is meant by the term     Mental Health	Mental Health – a person's condition with regard to their psychological and emotional well-being.  Mental ill health could be:  Temporary  Fluctuating  Ongoing  Amplification of normal behaviour  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.  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.	
2. Understand roles and legislation associated with Mental Health in the workplace	2.1 Identify the roles of those associated with Mental Health in the workplace.	Including Mental Health First Aider, employers and employees:  Know limitations (it is not the role of anyone within the workplace to diagnose mental health conditions)  Listening should include active listening skills and without judgement applying SOLER technique  Support  Everyone should work together to promote good Mental Health practices and reduce stigma/prejudice associated with Mental Health.	
	2.2 State legislation associated with Mental Health in the workplace	<ul> <li>Main areas of legislation that relate to Mental Health and well-being in the workplace:</li> <li>Health and safety at work Act 1974 (HASWA)</li> <li>Human Rights Act 1998 (HRA)</li> <li>Management of Health and Safety at Work Regulations (1999)</li> <li>Equality Act 2010</li> <li>Duty of Care 2014</li> </ul>	
	2.3 Give examples of how employers can promote a culture of positive Mental Health within the workplace	<ul> <li>Employers can promote a positive culture through:</li> <li>Developing an approach to Mental Health that protects and improves Mental Health for all</li> <li>Providing an environment whereby employees can talk to someone at work about their mental health</li> <li>Improve awareness of mental health throughout the organisation and at all levels</li> <li>Have designated mental health champions, senior leaders, etc. who are trained in mental health</li> <li>Provide tools to promote mindfulness as well as tips for maintaining a healthy lifestyle</li> <li>Conduct staff surveys on a regular basis and collection of other staff data to assist with improving work policies</li> </ul>	





Learning outcomes The Learner will:	Assessment criteria The Learner can:	Indicative content
		<ul> <li>Provide a workplace culture that treats everyone with respect and dignity</li> <li>Doesn't tolerate bullying or harassment in the workplace</li> <li>Has a whistleblowing policy whereby acts of discrimination can be reported</li> <li>Provide training and educational opportunities which support understanding of Mental Health issues</li> <li>Provide access to HR</li> <li>Join national and local anti-stigma campaigns</li> <li>Provide peer or mentor groups or programmes with people with experience/training in Mental Health</li> <li>Allowing employees to have a voice</li> <li>Promoting equality and diversity</li> <li>Understanding the importance of a good work/life balance</li> <li>Promoting self-care including developing own self-care plan</li> </ul>
		It is essential that we take time to look after our own mental health Implementing HSE Management standards
		<ul> <li>Embedding Mental Health information into induction for new starters</li> <li>Bring in professionals to discuss and raise awareness</li> <li>Use internal organisational communication</li> <li>Have team champions (dependent on size of organisation)</li> <li>Thriving at Work (2017) suggest larger organisations with over 500 employees should look at having enhanced standards to include:         <ul> <li>Increase transparency and accountability through internal and external reporting</li> <li>Demonstrate accountability</li> <li>Improve disclosure process</li> <li>Ensure provision of tailored in house Mental Health support and signposting</li> </ul> </li> </ul>
	Identify how core standards for Mental Health can be introduced into the workplace	<ul> <li>Production, implementation and communication of Mental Health at work plan</li> <li>Developing Mental Health awareness among employees</li> <li>Encourage open conversation and the support available</li> <li>Provide good working conditions</li> <li>Promote effective people management</li> <li>Monitor employee Mental Health and wellbeing</li> <li>Recovery</li> <li>Wellness Recovery Action Plan</li> </ul>



Learning outcomes The Learner will:	Assessment criteria The Learner can:	Indicative content
3. Understand a range of common Mental Health conditions	3.1 Identify characteristics and features of common Mental Health conditions	Suicide Including the following:  What is suicide?  Is suicide a choice?  Is suicide a selfish act?  Do people who are suicidal feel guilt?  Is suicide a crime?  CPR model for suicide  Self-harm  This is a behaviour not a disorder Is when someone intentionally injures their body. Usually to express or cope with overwhelming distress.  Turning emotional pain into physical pain  Expressing what is difficult to put into words  Having a sense of control  Punishing self  Expressing suicidal feelings  Types of self-harm can include; cutting, burning, punching, poisoning, risky behaviour, picking fights  Psychosis  The key symptoms of a psychotic disorder are;  Inability to reality test - therefore having a distorted view of what is real or not  Positive Symptoms (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 behaviours - any behaviour that doesn't fit in with the situation e.g. inappropriate clothing or emotional response.  Negative symptoms (this graden way' from a person's experiences e.g. reduced motivation)  Blunted or flat effect - inexpression or lack of expression  Avoiltion - lack of motivation to complete purposeful tasks  Psychomotor disturbances - anxious restlessness, making movements without meaning to.  Contributing factors to consider
	3.2 Recognise signs of work-related stress	Understanding stress and adverse childhood experience Stress (Work-related and other) Signs of stress in teams:  Conflicts/arguments  Higher staff turnover  Low morale  Poor performance





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		<ul> <li>More reports of stress</li> <li>Higher instances of sickness</li> <li>Poor performance</li> <li>More complaints and grievances</li> <li>Signs of stress in an employee</li> <li>A change in the way someone acts can be a sign of stress, for example they may:</li> <li>Take more time off</li> <li>Be consistently late for work</li> <li>Be twitchy or nervous</li> <li>Be short tempered</li> <li>A change in the way someone thinks or feels can also be a sign of stress, for example:</li> <li>Loss of motivation, commitment and confidence</li> <li>Being withdrawn</li> <li>Mood swings</li> <li>Increased emotional reactions e.g. be more tearful, sensitive or aggressive</li> <li>Triggers</li> <li>Alcohol</li> <li>Self-medication</li> <li>Maximum 14 units per week for Men and Women</li> <li>Coping strategies</li> </ul>
	3.3 Identify symptoms of anxiety disorder	Anxiety  The symptoms associated with Anxiety Disorders can be split into 2 categories:  Physical symptoms  Psychological symptoms  Caffeine and anxiety
	3.4 State different types of eating disorders	Eating disorders  Anorexia – limiting energy intake  Bulimia – binging (eating large quantities of food) the purging (expelling the food by vomiting or by use of laxatives)  Binge eating – loss of control over eating large quantities of food  Emotional overeating – eating large amounts of food during low moods in order to feel comforted  OSFED – other specified eating or feeding disorder, where symptoms do not fit in with any one ED.  ARFID – avoidant/restrictive food intake disorder, avoiding or restricting the intake of certain types of food (of a certain texture)  Pica – eating things that are not food and have no nutritional value (wood, paper, soap)





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	3.5 Recognise symptoms of depression	Depression (Mild, moderate and severe)  Symptoms can be broken down into 3 areas; Behaviour, Physiological and Psychological  Signs could include:  Appearance – May look unkempt and lack personal hygiene  Quiet slow monotone voice  Movement is slow  Sad or anxious expression  May self-harm  Eating slowly  Ritual behaviour regarding food  Wearing baggy clothes to hide their body  Using medication (slimming pills, suppressants, laxatives and diuretics)
4. Understand the application of a Mental Health First Aid at Work Action Plan	4.1 Identify key features within Mental Health First Aid at Work Action Plan	Action plan to include:  Listening STOPS Distress S pot signs of distress T alk Offer hope, care, comfort Proffessional support S elf help strategies 'If you spot distress, start listening' Listen without judgement –acceptance, genuineness and empathy SOLER Technique