Opening Minds

MENTAL HEALTH COMMISSION OF CANADA

The Working Mind™

First Responders™

Leadership Course Handout

About the Mental Health Commission of Canada (MHCC)

The **Mental Health Commission of Canada** (MHCC) leads the development and dissemination of innovative programs and tools to support the mental health and wellness of Canadians. The MHCC offers several mental health training programs including **The Working Mind, The Working Mind First Responders** and **Mental Health First Aid**. For more information about these courses, you can visit the MHCC website at www.mentalhealthcommission.ca

What is The Working Mind First Responders (TWMFR)?

This evidence-based training is designed to initiate a shift in the way you think, feel, and act with respect to mental health by increasing your awareness, reducing stigma and other barriers to care in the workplace, encouraging mental health conversations, and strengthening your resilience. By accomplishing these goals, TWMFR aims to help first responders maintain their wellness and support others in a psychologically healthy and safe work setting.

The Working Mind First Responders has been adapted by Opening Minds, the anti-stigma initiative of the Mental Health Commission of Canada, from the Canadian Department of National Defense's Road to Mental Readiness (R2MR) program, as well as the Calgary Police Service's version of that program. While many individuals have helped with the development of TWMFR, special acknowledgment should go to the staff at the Department of National Defense and Calgary Police Service, to Dr. Andrew Szeto and Dr. Keith Dobson from the University of Calgary, as well as the staff and researchers at Opening Minds.

Course Objectives

At the end of this course, you will be better able to:

Module 1

- ✓ Define basic concepts related to mental health
- ✓ Recognize the impact of stigma for people with mental health problems and discuss how to reduce stigma in the workplace

Module 2

- ✓ Recognize and keep track of changes in your mental health and know when to take appropriate actions or seek help
- ✓ Have conversations about mental health with colleagues, friends, and family members

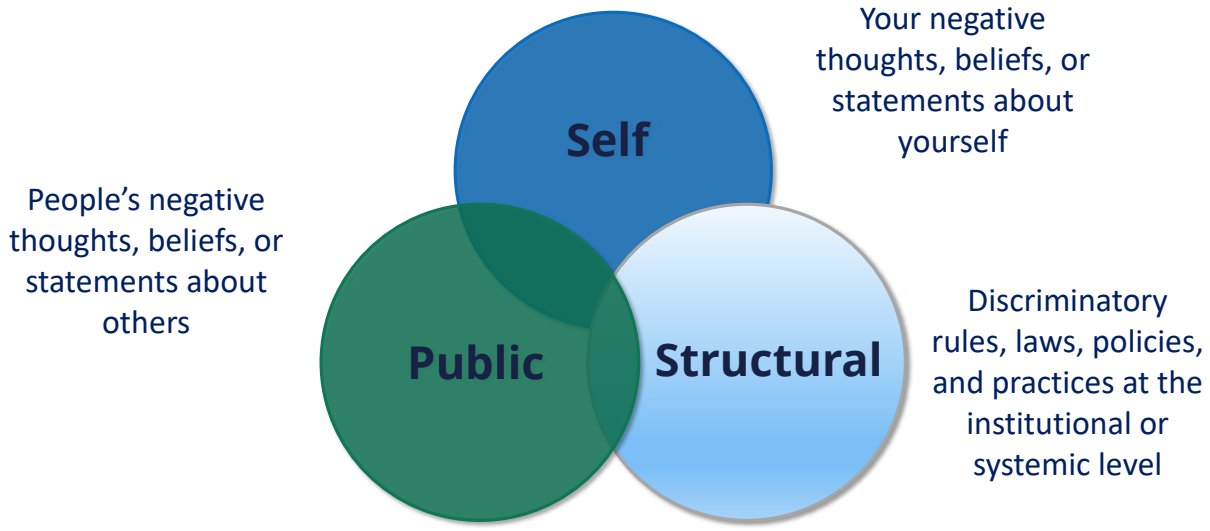
Module 3

- ✓ Recognize the role of stress and your response to stressors
- ✓ Practice The Big 4 coping strategies to manage stress and remain resilient
- ✓ Identify and use available mental health resources to support yourself and others

Module 4

- ✓ Support a psychologically healthy and safe workplace
- ✓ Use the Triple S approach and appropriate tools and resources to support your team's mental health.

Module 1: Mental Health and Stigma

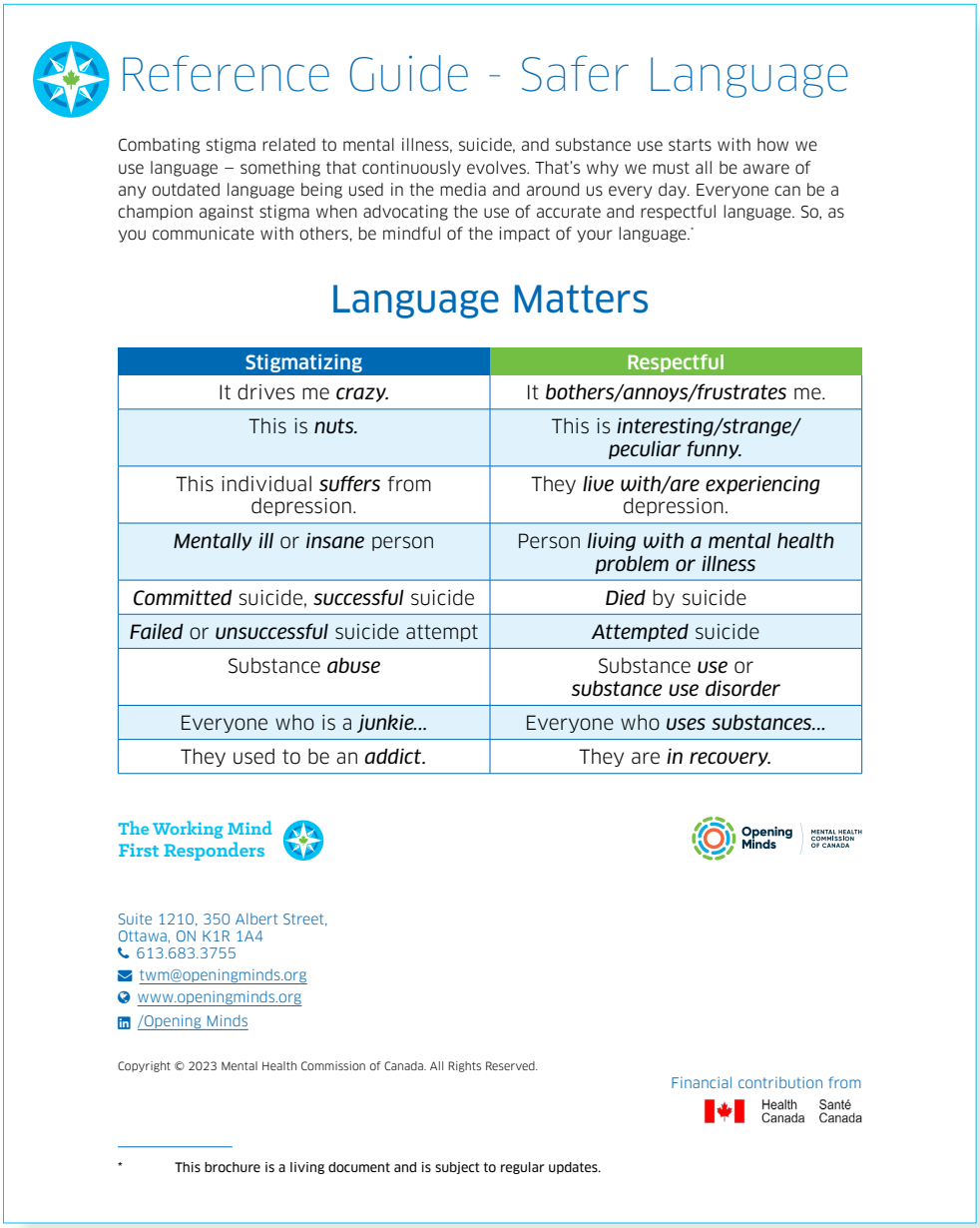


Impact of Stigma

Brainstorm and write down at least 3 possible impacts of stigma on individuals, workplaces and society in general.

Individuals	Workplace	Society

Language Matters



Reference Guide - Safer Language

Combating stigma related to mental illness, suicide, and substance use starts with how we use language – something that continuously evolves. That's why we must all be aware of any outdated language being used in the media and around us every day. Everyone can be a champion against stigma when advocating the use of accurate and respectful language. So, as you communicate with others, be mindful of the impact of your language.*

Language Matters

Stigmatizing	Respectful
It drives me ***crazy.***	It ***bothers/annoys/frustrates*** me.
This is ***nuts.***	This is ***interesting/strange/ peculiar funny.***
This individual ***suffers*** from depression.	They ***live with/are experiencing*** depression.
Mentally ill or ***insane*** person	Person ***living with a mental health problem or illness***
Committed suicide, ***successful*** suicide	***Died*** by suicide
Failed or ***unsuccessful*** suicide attempt	***Attempted*** suicide
Substance ***abuse***	Substance ***use*** or ***substance use disorder***
Everyone who is a ***junkie…***	Everyone who ***uses substances…***
They used to be an ***addict.***	They are ***in recovery.***

The Working Mind First Responders

Opening Minds | Mental Health Commission of Canada

Suite 1210, 350 Albert Street,
Ottawa, ON K1R 1A4
613.683.3755
twm@openingminds.org
www.openingminds.org
/Opening Minds

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* This brochure is a living document and is subject to regular updates.

What does "people-first" language mean and why does it matter?

Everyone can be a champion against stigma when advocating the use of accurate and respectful language. So, as you communicate with others, be mindful of the impact of your language.

For more information refer to the **MHCC Language Matters Reference Guide.**

Module 2: The Mental Health Continuum

As you move from the left (green) toward the right (red) of the Continuum, you may notice changes in each of these areas. The dotted lines across the four colour zones indicate that some people may experience a linear progression (i.e., from regular-occasional-frequent to excessive) from healthy to ill but not everyone will experience it this way.

This is not a one-size-fits-all tool so everyone will experience these changes differently.

Your task: Take a moment to check the signs and indicators that reflect your changes in these five areas and write any additional changes you might notice in the "my personal changes" section.

	Healthy	Reacting	Injured	Ill
Changes in Mood	☐ Healthy mood fluctuations	☐ Irritability/impatience	☐ Anger	☐ Excessive anger or rage
	☐ Calmness	☐ Nervousness	☐ Feelings of anxiety	☐ Feelings of excessive anxiety
	☐ Confidence/optimism	☐ Occasional self-doubt/ pessimism	☐ Loss of confidence/ frequent pessimism	☐ Feelings of depression, numbness, hopelessness
Changes in Thinking and Attitude	☐ Good sense of humour	☐ Displaced sarcasm	☐ Cynicism	☐ Humourless
	☐ Healthy attitude and thinking patterns	☐ Occasional negative intrusive thoughts	☐ Frequent negative intrusive thoughts/suicidal ideation	☐ Obsessive negative intrusive thoughts/suicidal intent
	☐ Ability to concentrate and/or focus on tasks	☐ Occasional distraction and/ or loss of focus on tasks	☐ Frequent distraction and/ or loss of focus on tasks	☐ Inability to concentrate and/ or complete loss of memory or cognitive abilities
	☐ Ability to cope and/or handle competing demands	☐ Occasional inability to cope and/or handle competing demands	☐ Frequent inability to cope and/or handle competing demands	☐ Pervasive sense of incompetence and/or feeling completely overwhelmed
Changes in Behaviour and Performance	☐ Healthy physical/ social activity	☐ Occasional avoidance of physical/social activity	☐ Frequent avoidance of physical/social activity	☐ Isolation and/or complete withdrawal from physical/ social activity
	☐ Good performance	☐ Occasional performance issues and/or procrastination	☐ Frequent performance issues and/or procrastination	☐ Inability to perform duties and/or complete tasks
	☐ Physically present and engaged	☐ Occasional presenteeism	☐ Frequent presenteeism/ absenteeism	☐ Constant and prolonged absenteeism
	☐ Mentally present and alert	☐ Occasionally distant/ distracted	☐ Frequently distant/ distracted and/or pulling away from others	☐ Not mentally present
Physical Changes	☐ Healthy sleep patterns	☐ Occasional trouble sleeping	☐ Frequent trouble sleeping/restlessness	☐ Inability to fall/stay asleep and/or insomnia
	☐ Healthy appetite	☐ Occasional gain/ loss of appetite	☐ Frequent gain/loss of appetite	☐ Excessive food intake or complete loss of appetite
	☐ Feeling energetic	☐ Occasional lack of energy	☐ Frequent tiredness	☐ Constant and prolonged physical exhaustion
	☐ Healthy and stable weight	☐ Occasional weight fluctuations	☐ Frequent weight fluctuations	☐ Extreme weight fluctuations
Changes in Substance Use and Addictive Behaviours	☐ Limited/no alcohol consumption and/ or binge drinking	☐ Occasional alcohol consumption and/ or binge drinking	☐ Frequent alcohol consumption and/or binge drinking	☐ Excessive alcohol consumption and/ or binge drinking
	☐ Limited/no addictive behaviours (i.e., gaming, social media use, etc.)	☐ Occasional addictive behaviours (i.e., gaming, social media use, etc.)	☐ Struggle to control addictive behaviours (i.e., gaming, social media use, etc.)	☐ Inability to control addictive behaviours (i.e., gaming, social media use, etc.)
	☐ No trouble/impact due to substance use (i.e., smoking, vaping, etc.)	☐ Limited trouble/impact due to substance use (i.e., smoking, vaping, etc.)	☐ Frequent trouble/impact due to substance use (i.e., smoking, vaping, etc.)	☐ Severe trouble/impact due to substance use (i.e., smoking, vaping, etc.)
My Personal Changes				

Wellness Plan

Things I can do on my own that support my wellness and help me cope:

People and places that support my wellness and help me cope:

Name: Phone #:

Name: Phone #:

Place:

Place:

Signs that my mental health may be starting to decline:

Changes in mood, thinking and attitude, behaviour & performance, physical changes, substance use and addictive behaviours?

People I can ask for help:

Name: Phone #:

Name: Phone #:

Name: Phone #:

Wellness Plan

Resources for when I need professional help or during a crisis:

Name: Phone #:

Emergency #:

Name: Phone #:

Emergency #:

Local Urgent Care #:

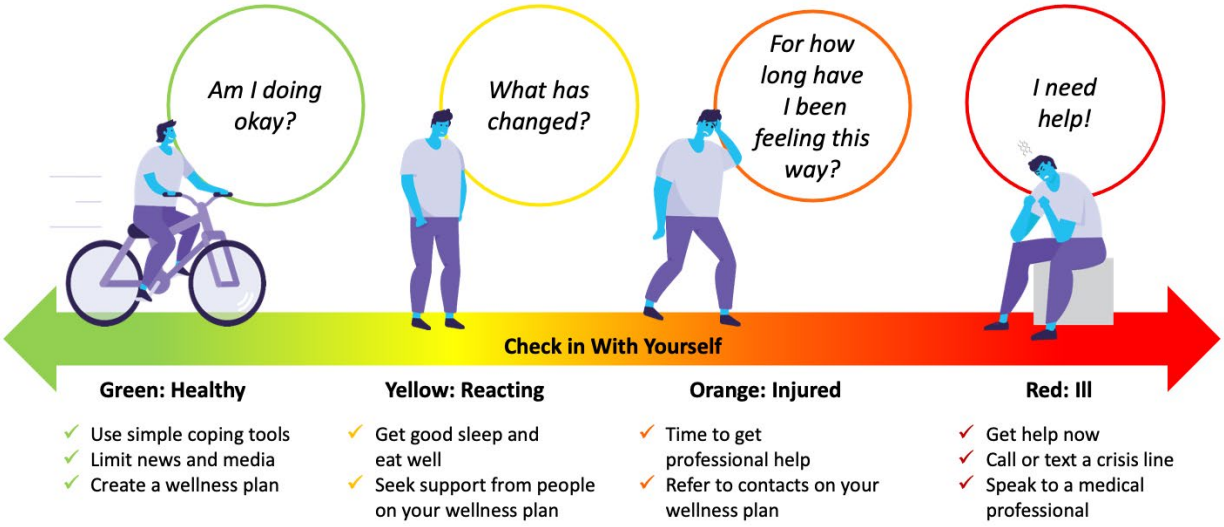
Phone #:

Address:

Ways I can make my environment safe:

The one thing that is most important to me and worth living for is:

How am I doing?



Scenario: Mental Health Continuum

Scenario 2A

You have been coming to work feeling tired and are having a hard time concentrating. You notice you keep making mistakes and end up blaming them on someone else. Even small things are making you angry and you blow up at your co-workers at least once every shift. You are avoiding your supervisor whenever possible, and don't take part in the conversation at break time.

Scenario 2B

Your co-worker approaches you after your shift and asks if they can talk to you. They explain that when they got home last night their spouse and kids were gone and the house was empty, except for a note saying that their spouse wants a divorce. Your co-worker is distraught: they say that without their family nothing matters anymore. They admit to drinking heavily for some time and having had an affair. They cannot stop crying and tell you that they don't know what they are going to do.

Scenario 2C

Your co-worker has always been really popular with everybody on the team. Although they can sometimes be loud and boisterous, they are usually able to stay in control even when they drink excessively. Lately, the first day of the rotation has seemed rough for them, especially when call volumes or workloads spike. No one seems to want to work with them anymore, and your co-worker often keeps to themselves. You heard they might be having personal issues, but they have not said anything specific to you about it.

Discussion Questions: Mental Health Continuum

1. What signs and indicators are you noticing? Where might you (they) be on the Mental Health Continuum?

2. Where can you (they) go, what can you (they) do and who can you (they) talk to?

Module 3: Stress, Resilience, and Mental Toughness

Stress in your Life

Take a moment to reflect and make your own list of some organizational, operational, and personal stressors. This list is for you, and you will not be asked to share your list.

Organizational	Operational	Personal

Stress and Performance

Stress is a fact of life. But NOT all stress is negative!
Both too little and too much stress can negatively impact well-being.

Scenario: The Big 4

Scenario 3A

You have recently separated from your spouse of 10 years, have a three-year-old child, one of your parents has a terminal disease and is now in palliative care. You are having trouble sleeping, eating, and often find yourself breaking down in tears. You have been to your family doctor, who has prescribed an anti-depressant and is encouraging you to take some leave time. You are really reluctant to take time off and feel ashamed that you cannot deal with your problems on your own. You do not know how to approach your supervisor. You need your job and do not want to be seen as someone who cannot handle things.

Scenario 3B

You are usually a very patient and easygoing person who likes to make jokes. Lately, you seem to have lost your sense of humour and you're feeling more frustrated about changes to work policies. On top of having to manage additional work, you are trying to take care of your family and worrying about your elderly parents who need you for support each week. You would like to ask your supervisor for help, but with so many people on leave already, the last thing you want is for anyone to think you're not able to do your job. You often catch yourself thinking, "I'm such a failure," "Everyone thinks I'm no good at this," and "I should be able to keep up." The constant worry is keeping you up at night.

Scenario 3C

You have noticed one of your co-workers has been coming to work looking unkempt. Their uniform looks loose, and it seems like they may have lost a lot of weight in the past few weeks. You find they often seem confused during discussions at briefings and they don't seem to be able to recall recent conversations with others. Your team members have been commenting on all the extended breaks that your co-worker has been taking and how this is causing extra duties for the rest of the team. You want to approach this person and ask how they are doing, but you don't know how to get the conversation started and are really worried they'll be angry at you, so you keep putting it off.

Discussion Question: The Big 4

Take note of the signs and indicators you notice and where you (they) might be on the Continuum, and then answer the following question.

1. How can you use the Big 4 coping strategies to help with the situation?

Self-Care Questions

A One thing I do on a regular basis to take care of myself is…

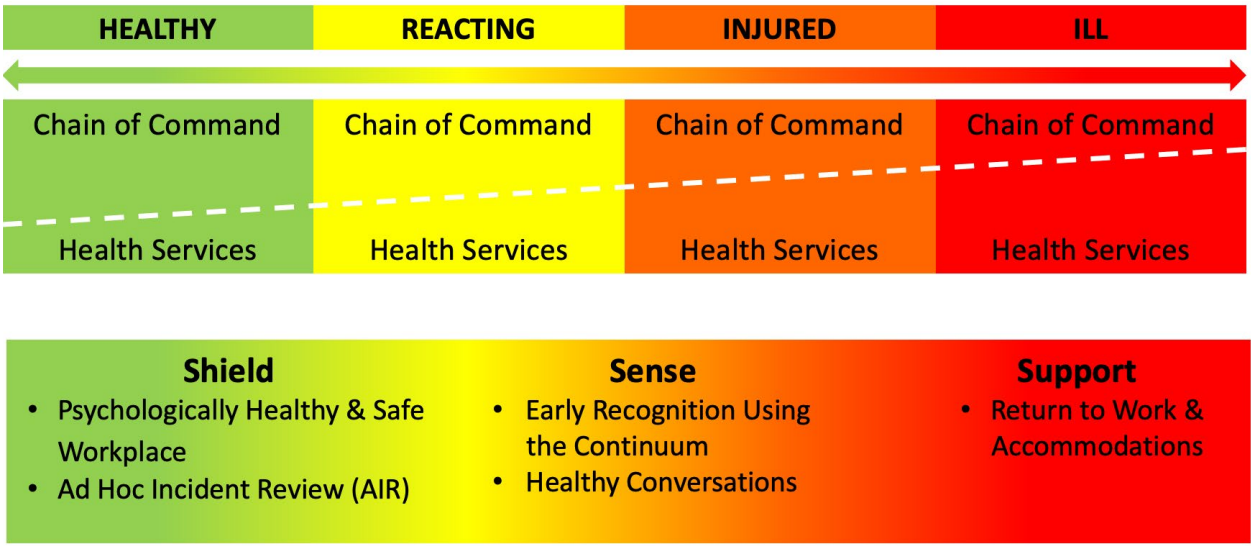
B One thing I would like to do more often for myself is…

C I know I need to pause and take care of myself when…

For more information refer to the *MHCC Self-Care & Resilience Guide* included in this course.

Module 4: Support Your Team

Triple S: Shield, Sense, Support



Shield: Promoting a Psychologically Safe and Healthy Workplace

For more information:
https://www.mentalhealthcommission.ca/English/what-we-do/workplace/national-standard

How Can I Help my Team?

Scenario: Ad Hoc Incident Review

Scenario 4A

Upon arriving to work one morning you learn that a member of your team was in an accident and is in critical condition. The news has circulated to some of the unit already. As the supervisor, you need to tell your whole team about the incident.

Scenario 4B

Due to COVID, your unit is dealing with major changes that have resulted in new operating directives and multiple policy changes in a very short time. Your department is running at capacity, and many of your co-workers are extremely stressed and frustrated with the situation and are worried for their own safety. Several team members have been calling in sick and showing signs of burnout and anger. One morning, you learn that a member of your team has had a severe anxiety attack and is being treated in hospital.

Scenario 4C

During a night shift, a vehicle collision occurs with multiple fatalities, including children. Due to a prolonged extrication, multiple dispatchers, on-scene units, and an on-scene command setup were all involved in the incident. It has been a chaotic shift and people are visibly distressed.

Scenario 4C

Community Corrections:

During a morning shift, a former offender attends a community correctional centre (such as a parole office or halfway house) under the influence of crystal methamphetamine. The client is aggressive and trying to breach the security desk in attempt to get to the staff room. Multiple staff are involved in attempting to diffuse the situation while they wait for police to arrive on scene. One staff member was injured during the incident. After the offender has been removed from the scene, staff remain visibly distressed.

Institutional Corrections:

During a night shift, an individual is arrested and brought to the centre. Although they were medically cleared, they remain under the influence of illicit substances. When a staff member completes their round to check on the client, the client becomes agitated and engages in a physical altercation with the staff member. Additional correctional officers need to intervene to restrain the individual. It has been a chaotic shift and people are visibly distressed.

Discussion Questions: Ad Hoc Incident Review (AIR)

Take note of the signs and indicators you notice and where your team might be on the Continuum, and then answer the following questions.

1. How would you use AIR to support the mental health of your team?

2. What questions would you ask? How would you start the conversation with your team?

3. What other tools and resources could you use?

Sense: Having Healthy Conversations

What to Do	What to Say
Approach the person Set a time when you are both available and able to listen to each other either face-to-face, by phone, or online. Ensure confidentiality.	*"I would like to put aside some time for us to have an informal chat."* *"When would be a good time for you?"*
Share your observations Stick to the facts and remain objective. Use "I" statements to talk about the specific behaviour(s) you are worried about and show that you are concerned. This is a good way to say what you think/sense without blaming or criticizing.	*"I've noticed that…"* *"I feel…"* *"I'm worried about…"* *"You seem distracted/frustrated/exhausted lately."* *"I sense something is bothering you."*
Use open-ended questions These can help the person open up and help you understand the situation better. Express genuine interest in what's going on.	*"What changes have you noticed in yourself lately?"* *"What do you feel comfortable sharing?"* *"What's going on?"* *"How can I help you?"*
Listen without judgement Stop what you are doing and listen to what they are saying. Don't interrupt. Let them say everything they need to say.	Relaxed posture, eye contact, nodding *"I see…yes…hmm."* *"Okay. I see."*
Keep calm and objective Be open to what the person has to say. If you feel yourself getting impatient or upset, take some deep breaths, or take a break.	Calm, even tone of voice *"I need some time to think about this. Can we continue this conversation later?"*
Acknowledge and try to understand the situation from their point of view (empathy) Recap what you've heard and acknowledge that you hear what they're saying or feeling.	*"I'm hearing that…" Is that correct?* *"It's normal to feel…"* *"I understand that you are feeling…"* *"It sounds like you feel…"*
Encourage them to find their own solutions Help them figure out what options they have and what will make them feel better.	*"What do you need right now?"* *"Is there anyone else you trust that you can talk to about this?"* *"What resources would help?"*
Check in often Continue to check in with them to see how they are doing and let them know you are there to support them. Set a date to check back (within a week) to see how they are progressing and to work out a plan.	*"I'm here for you if you need to talk."* *"Let's check in with each other next week."*
Take appropriate action If the person is in distress and refuses help, offer to help them contact EAP or someone else they trust. If you think they might harm themselves or they express suicidal thoughts, get immediate help or call emergency services.	*"I'm going to call for help."* *"Let's contact EAP/other service/person together."*

Source: Adapted from
https://www.mentalhealth.org.nz/home/our-work/category/13/common-ground

Scenario: Healthy Conversations

Scenario 4D

For the past several months, one of your employees has been short-tempered, cutting people off during conversations, interrupting discussions, and inserting their own opinions without being asked. They are interfering with their teammates' work and have started displaying aggressive/rude behaviours towards co-workers, clients, and supervisors. The team thinks the employee has become a bully, and no longer includes the person in conversations or in team activities.

Scenario 4E

You have noticed that an employee has not been their usual self recently. In general, they are a good worker, but their performance seems to be declining. They have been struggling with their workload and documentation. They have been withdrawing from co-workers and missing more shifts. You are aware they are very concerned about being exposed to COVID-19. When you ask them about a missing report, they quietly say: "I can't do this anymore. Everyone would be better off without me."

Scenario 4F

First Responders:

A multi-car accident occurs at a major intersection during rush hour. Numerous units are required on scene. A driver ignores traffic directions and strikes two first responders at the scene. Both are seriously injured, the scene is chaotic, and people are visibly distressed. One of your direct reports witnessed the incident and appears very shaken. They say they are fine and continue to carry on with their duties on scene. During the next shift they seem withdrawn and distant from the rest of the team.

Scenario 4F

Corrections:

An inmate fight occurs on your unit during the supper hour. Staff from surrounding units are required on-scene to assist in managing the event. Two inmates ignore direction to return to their cells, and continue to assault each. One is noted to have a weapon. Both inmates are seriously injured, one with life threatening injuries. One of your direct reports witnessed the incident and appears very shaken. They say they are fine and continue with their duties for the remainder of the shift. During the next shift they seem withdrawn and distant from the rest of the team.

Discussion Questions: Healthy Conversations

Take note of the signs and indicators you notice and where your employee might be on the Continuum, and then answer the following questions.

1. When and how would you approach them? What can you say?

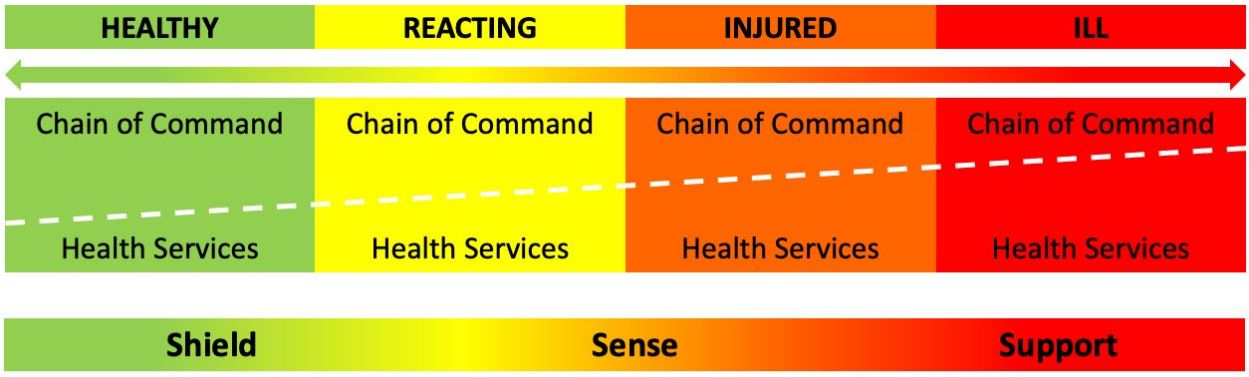
2. What steps would you take to support the employee?

3. What would you say to the rest of your team?

Support: Return to Work and Accommodation Checklist

Action Items	✓
1. Connect with the employee during their leave to let them know everyone is thinking about them.	☐
2. Discuss how the employee would like information about them to be shared with co-workers, especially with regard to the changes in work that will affect co-workers as the person returns to work.	☐
3. Respect the employee's wishes about what information is kept private and what is shared with others.	☐
4. Meet with the employee after they return to work to discuss their needs and understand how to support them. Ask if there are any functional limitations that could affect the person's ability to carry out the essential duties of their job.	☐
5. Discuss and provide any training, information, or resources that the employee may need to get back up to speed.	☐
6. Confirm that they are connected to extended health benefits, Employee Assistance Plan (EAP) services, disability benefits, sick days, and other information about benefits as needed.	☐
7. Provide information about policies or procedures, including policies for return to work and accommodation.	☐
8. Participate in the development of the return-to-work plan.	☐
9. Help to address issues of conflict at work or performance concerns.	☐
10. Initiate training and education programs.	☐
11. Follow up with the employee or designate someone who can follow up on your behalf.	☐
12. Keep your notes on the meeting in a secure location. A locked filing cabinet and password-protected computers are key to maintaining an employee's confidentiality.	☐

Source: *Working Through it: Leader's Guide,* Great West Life Centre for Mental Health in the Workplace



Triple S

Scenario: Return to Work

Scenario 4G

An employee is scheduled to come back to work after being on leave for several months. It is known that they were the lead on a high-profile incident with a fatality. You have overheard people on the team discussing the event, blaming the employee as they failed to voice significant information to other responders. Others are saying that the employee is weak and should not be trusted with their duties. The returning employee is now assigned to your shift rotation, and you will be responsible for integrating them back into the unit.

Scenario 4H

An employee is returning to work after being on leave for several months. It is widely known that they were off for stress leave, but no other details were provided. You have heard some people on the team suggest that the employee was faking it to get the summer off. Others have complained about how they will have to pick up the slack for their "sick" team member and how if the person cannot handle it, they should quit. You will be supervising the returning employee and are responsible for integrating them back into the unit.

Scenario 4I

A direct report is returning to work after several months on leave. A lot of changes have occurred in the past few months and they will have a lot to catch up on. You will also need to review all the new COVID-19-related polices in their return-to-work process. Your team is frustrated by the extra work they already have and are concerned that they will have help the returning employee get up to speed, on top of their regular duties. The returning employee is now assigned to your shift rotation, and you will be responsible for integrating them back into the unit.

Discussion Questions: Return to Work

1. What steps would you take to support your employee?

2. What would you say to the rest of your team?

Suggested Reading

Leadership Behaviours to Support Mental Health – by Bill Howatt and Louise Bradley
http://www.ceohsnetwork.ca/blog/psychological-safety/leadership-behaviours-to-support-mental-health/

Empathy is both a trait and a skill. Here's how to strengthen it
https://www.ctvnews.ca/lifestyle/empathy-is-both-a-trait-and-a-skill-here-s-how-to-strengthen-it-1.4997546

Online Resources

MHCC Resource Hub: Mental health and wellness during the COVID-19 pandemic
https://www.mentalhealthcommission.ca/English/covid19

Mental Health Continuum Tool Self-Check
https://theworkingmind.ca/continuum-self-check

The Working Mind Self-Care & Resilience Guide
https://theworkingmind.ca/blog/working-mind-covid-19-self-care-resilience-guide

Workplace Psychological Health and Safety Resources

Free online training – Being a Mindful Employee: An Orientation to Psychological Health and Safety in the Workplace
https://www.mentalhealthcommission.ca/English/online-training-psychological-health-and-safety

National Standard for Psychological Health and Safety in the Workplace
https://mentalhealthcommission.ca/national-standard/

13 Psychosocial Workplace Factors (Posters)
https://www.mentalhealthcommission.ca/sites/default/files/2019-02/13_factors_posters_eng.pdf

MindsMatter Online Assessment
This free tool is designed to help you assess where your workplace stands on mental health. It's confidential, easy to use, and takes under three minutes to complete. To get started, go to:
http://mindsmatter.openingminds.ca/

Canadian Centre for Occupational Health and Safety Assembling the Pieces Toolkit
https://www.ccohs.ca/products/courses/assembling_pieces/

Recovery Resources

Guidelines for Recovery-Oriented Practice
https://www.mentalhealthcommission.ca/sites/default/files/2016-07/MHCC_Recovery_Guidelines_2016_ENG.PDF

Recovery Declaration
https://mentalhealthcommission.ca/declaration/

Video "Hope Changes Everything" (16:11 minutes)
https://adam.mb.ca/news/recovery-hope-changes-everything

Suicide Prevention Resources

9-8-8 Suicide Crisis Helpline
https://988.ca

Living Works course on suicide intervention:
https://www.livingworks.net/asist/

Mental Health First Aid Training
https://openingminds.org/training/mhfa/standard/

Canadian Crisis Centres (The Lifeline Canada Foundation)
https://thelifelinecanada.ca/canadian-crisis-centres/

Return-to-Work and Accommodations Resources

Supporting Employee Success
https://www.workplacestrategiesformentalhealth.com/resources/a-tool-to-support-employee-success

Canadian Human Rights Commission Policy and Procedures on the Accommodation of Mental Illness
https://www.chrc-ccdp.gc.ca/sites/default/files/policy_mental_illness_en_1.pdf

Opening Minds

Suite 1210, 350 Albert Street
Ottawa, ON K1R 1A4

Tel: 613.683.3755
Fax: 613.798.2989

twm@openingminds.org
www.openingminds.org

/Opening Minds

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