



# Mental Health in the Emergency Services

## Our 2019 Survey Results – Ambulance Service

### Introduction

Between 2015 and 2019, Mind delivered an ambitious and comprehensive programme of activity aimed at reducing stigma, promoting wellbeing and improving mental health support for those working or volunteering in ambulance, fire, police and search and rescue services. The Blue Light Programme was launched with LIBOR funding from the UK Government. Over four years we set about creating lasting change in this sector. During that time, thousands of staff and volunteers across 999 services actively challenged stigma, learned more about mental health and made positive changes in their approach to wellbeing.

To help us develop the Blue Light Programme, we conducted a scoping survey in 2015 of more than 3,500 emergency services personnel. We found a high prevalence of poor mental health among emergency services staff and volunteers, a clear need for targeted mental health support, and for emergency services organisations to step up on behalf of their staff and volunteers.

Four years later, between 30<sup>th</sup> November 2018 and 29<sup>th</sup> January 2019, we carried out another survey to see what had changed. As well as questions about mental health triggers, sources of support and perceptions of organisational support that were directly comparable to the 2015 survey, we also asked questions about involvement in the Blue Light Programme and perceptions of cultural and organisational change. The full survey text can be found in Appendix 1. The survey was administered online and there were 5,081 anonymous responses from emergency services staff and volunteers across England and Wales – over 1,400 more than in 2015.

This briefing will present a summary of the findings from the ambulance service data and compare them to the 2015 survey (where applicable) and data from the other emergency services (police, fire and search and rescue).

### Headline Results

|                                     |  |
|-------------------------------------|--|
| <p><b>Mental Health at Work</b></p> | <ul style="list-style-type: none"> <li>• 75.8% of ambulance service staff and volunteers who took part in our 2019 survey had personal experience of mental health problems.</li> <li>• Ambulance service staff and volunteers were the least likely out of all the emergency services to rate their mental health as ‘good’ or ‘very good’ – 34.5% compared to an average of 45% overall.</li> <li>• The number of ambulance personnel citing organisational factors as impacting negatively on their wellbeing has decreased. Experience of distressing or traumatic events is now the number</li> </ul> |
|-------------------------------------|--|



|                                    |  |
|------------------------------------|--|
|                                    | one cause of poor mental wellbeing amongst ambulance service personnel.  |
| Sources and Perceptions of Support | <ul style="list-style-type: none"> <li>65.5% of ambulance service staff and volunteers who took our 2019 survey were aware of the mental health support available to them through their organisation, compared to 43.5% in 2015.</li> <li>The proportion of ambulance personnel willing to seek support for their mental health from almost all sources has increased since 2015. Family and colleagues remain the most frequently used sources of support.</li> <li>Only 22.7% of ambulance personnel said they would seek support from their managers for a mental health problem. Whilst still low, this is a marked increase from the 11.6% willing to seek support from their managers in our 2015 survey.</li> <li>There has been a big rise in the proportion of ambulance staff and volunteers who think that their organisation supports employees who experience mental health problems well – 43.3% to 20.9% in 2015.</li> <li>54.7% of ambulance staff and volunteers now feel that their organisation encourages staff to talk openly about mental health – compared to just 19.6% of those who responded in 2015.</li> </ul> |
| Mental Health Training             | <ul style="list-style-type: none"> <li>Ambulance service staff and volunteers were the least likely out of all the emergency services to receive training to support their own mental health or the mental health of their colleagues – 30.5% compared to 39.5% overall.</li> <li>However, 49.2% of staff in management positions had received mental health training, either from an internal or external source.</li> <li>68.8% of ambulance personnel received induction training to help them support members of the public with mental health problems, but only 23% received any input on how to support their own or colleagues' mental health.</li> </ul>  |
| Managers & Mental Health           | <ul style="list-style-type: none"> <li>Just over half (50.7%) of ambulance staff and volunteers agreed that people feel more able to talk with managers in their organisation about mental health than they did three years ago.</li> </ul>  |





|                       |   |
|-----------------------|---|
|                       | <ul style="list-style-type: none"> <li>88.7% of managers agreed that they felt more confident to support the mental health of staff and volunteers than they did just one year ago. This figure was even higher (92%) for those who had been involved in the Blue Light Programme.</li> </ul>   |
| Perceptions of Change | <ul style="list-style-type: none"> <li>Just over half (50.7%) of ambulance service staff and volunteers said they felt confident that attitudes towards mental health in their organisation were changing for the better, and just under half (46.8%) felt confident that support for the mental health of staff and volunteers was also improving.</li> <li>Staff and volunteers with involvement in the Blue Light Programme were more likely to respond positively to questions about their perception of support and attitudes towards mental health in their organisation.</li> <li>However, those with personal experience of mental health problems were less positive, suggesting that there's still more work to do to ensure that staff and volunteers experiencing mental health problems get the support and respect they deserve.</li> </ul> |

## Key Findings

### Respondent Demographics

There were 5,081 responses to the survey from emergency services staff across England and Wales. This compares to 3,627 responses from personnel across England in our 2015 survey. Ambulance service staff and volunteers represented 26.7% of the total sample of respondents to our 2019 survey – the second highest response rate across the four services. 95.9% of those responding to the survey were based in England. Response rates from ambulance staff and volunteers in Wales were the lowest across all of the services – 4.1% compared to an average of 11.4% overall.

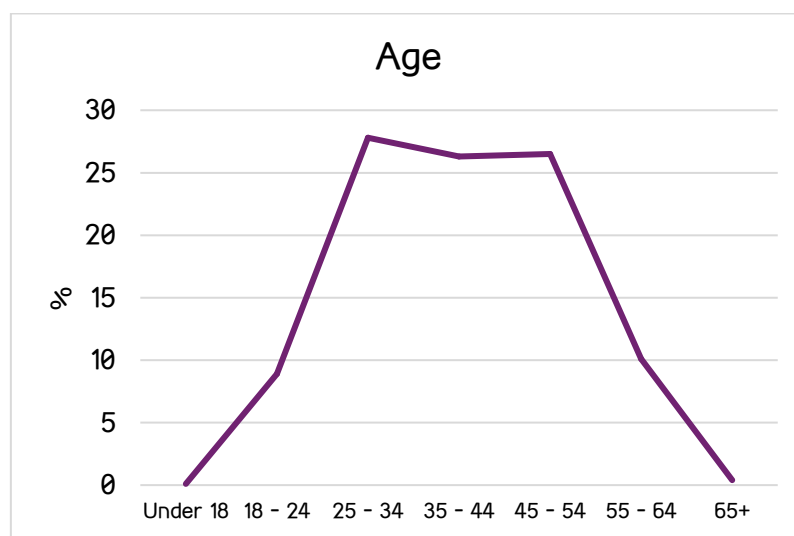
The vast majority (93%) of responses from ambulance service personnel came from staff employed in paid roles within the service. Only 7% of responses came from those working in a voluntary capacity, although this was still higher than those in volunteer roles who responded to the survey from the police and fire services (2% and 0.5% respectively).

16.2% of ambulance service staff and volunteers who responded to the survey indicated that they had line management responsibility. This was the lowest out of all the emergency services, but is broadly representative of the overall workforce composition.



Unlike our 2015 survey, where 60.4% of ambulance service respondents were male, the gender split in our 2019 survey was roughly 50/50. This means that females are slightly overrepresented in the survey data compared to the proportion that make up the ambulance service overall (40% according to data from the 2018 NHS Workforce Statistics),

The majority of respondents from the ambulance service were between 25 and 54 years of age (80.6% of the total sample), with a roughly even spread across the 25-34, 35-44 and 45-54 age brackets:



In terms of length of service, the greatest number of responses (33.6%) came from staff and volunteers who had been in the ambulance service between one to five years. This was slightly higher than the 2015 survey, where the greatest number of responses (30.1%) came from those who had worked in the ambulance service for 11-20 years. The increased response from personnel who had been in their roles for less than five years may be reflective of the Blue Light Programme's work with new recruits, including targeted messaging encouraging them to share their views in the survey.


The ethnic breakdown of survey respondents was broadly similar to the 2018 workforce data published by NHS Digital. 94% of respondents were White, down slightly from 97% in our 2015 survey.

5% of survey respondents from the ambulance service stated that they had a disability. This is higher than the average for ambulance trusts, which was reported at 3% as of September 2018.

### Lived Experience

75.8% of ambulance service staff and volunteers who took part in our 2019 survey indicated that they had personal experience of mental health problems, compared to 53% in 2015. This was higher than the average of 67.5% reported across all services. The most





commonly reported mental health problems experienced by ambulance staff were depression (55.9%), anxiety (54.7%) and PTSD (30.9%).

Whilst we know from our previous research that the prevalence of poor mental health in the emergency services is greater than the general population, the overrepresentation of people with lived experience of mental health problems in our survey sample is likely due to the way that the survey was promoted and the higher rates of engagement in the Blue Light Programme amongst those with an interest in or experience of poor mental health.

### Involvement in the Blue Light Programme

In order to help us to understand the impact that the Blue Light Programme has had on the way staff and volunteers in the emergency services think and act about mental health, we asked survey respondents about their involvement in the Blue Light Programme.

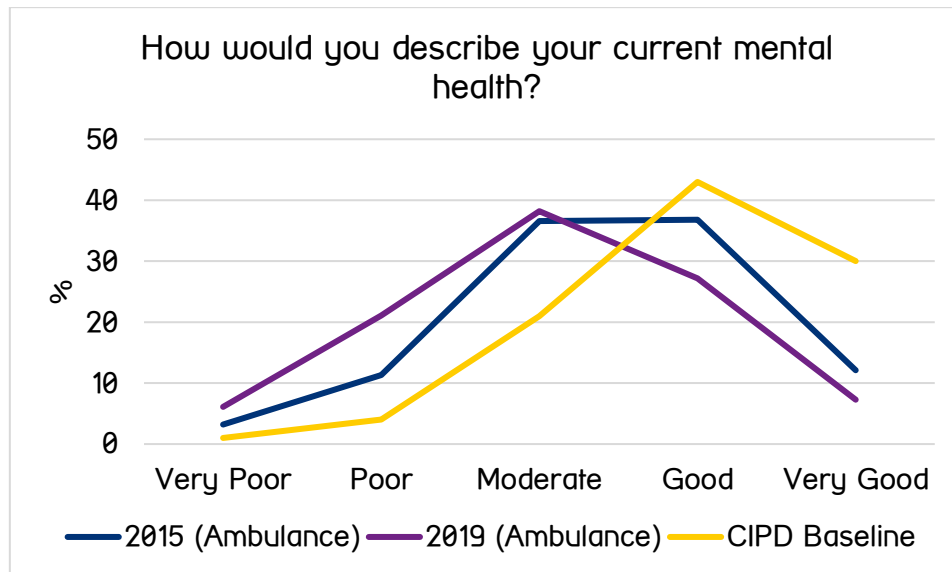
38.4% of ambulance service personnel who completed the survey had previously had some involvement in the Blue Light Programme. Involvement in the programme was greater amongst those in management roles (55%). The most common ways that staff and volunteers had engaged with the Blue Light Programme were through accessing information online (14.3%), through the website or Twitter account (12.9%) or through media coverage (12.8%). 9.4% of respondents were Blue Light Champions – an employee or volunteer who takes action in the workplace to raise awareness of mental health problems and challenge the way people think and act about mental health.

### Mental Health at Work

In our 2015 and 2019 surveys we used question wording that was consistent with CIPD's 'Focus on Mental Health in the Workplace' survey to establish a picture of the current mental health of emergency services staff and volunteers. The CIPD survey was carried out in 2011, and again in 2016, in partnership with YouGov, and included a sample of 2,000 working age adults across the UK.

Our 2019 survey results show that poor mental health continues to be an issue across all of the services, with levels of mental health generally falling below the CIPD baseline. Whilst 30% of CIPD respondents rated their current mental health as 'very good', this was just 7% for ambulance service respondents.

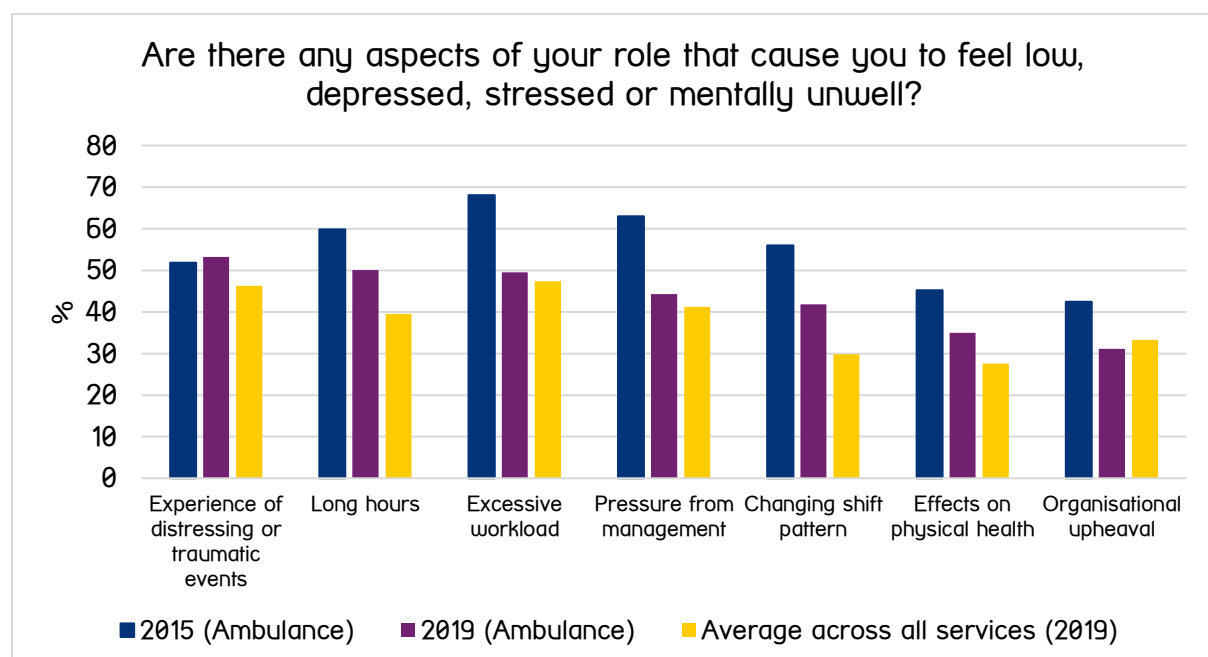





Ambulance service staff and volunteers reported the lowest level of mental health across all the emergency services, with only 34.5% saying their mental health is 'good' or 'very good' compared to an average of 45% across all the four services.

Whilst reported levels of mental health have slightly decreased across all of the services, it is impossible to say whether these figures indicate that the prevalence of poor mental health is on the rise, or that people feel better able to identify when they are struggling and more able to speak out.

In our 2015 and 2019 surveys, we asked people what particular aspects of their role could cause them to feel low, depressed, stressed or mentally unwell:







Overall, the number of ambulance staff and volunteers citing organisational factors as impacting negatively on their mental health has decreased. However, the responses indicate long hours, changing shift patterns and effects on physical health still have a greater effect on the mental health of ambulance service personnel than those in the other emergency services.

Experience of traumatic or distressing events has moved from the fourth highest cause of poor mental health amongst ambulance staff and volunteers in 2015 to number one in our 2019 survey. Again, this could reflect a greater awareness of trauma and willingness amongst staff to speak openly about its impact, or it could be reflective of organisational efforts to improve employee wellbeing. Ambulance service personnel were the most likely out of all the emergency services to cite trauma as the biggest factor affecting their mental health.

Our survey showed that the longer people serve, the more likely they are to feel the negative impact of workload pressures. Those with 11 to 20 years of service were the most likely to feel the effects of a range of pressures, including organisational upheaval and physical health concerns – making them an important audience for mental health and wellbeing support.

As in our 2015 survey, many respondents' highlighted additional factors that trigger poor mental health within the free-text response field, and used this as an opportunity to expand upon specific organisational issues. Abuse from the public and misuse of the ambulance service were frequently cited as challenges and a number of respondents referred to the impact of being single crewed or not having a regular crew mate to work alongside.

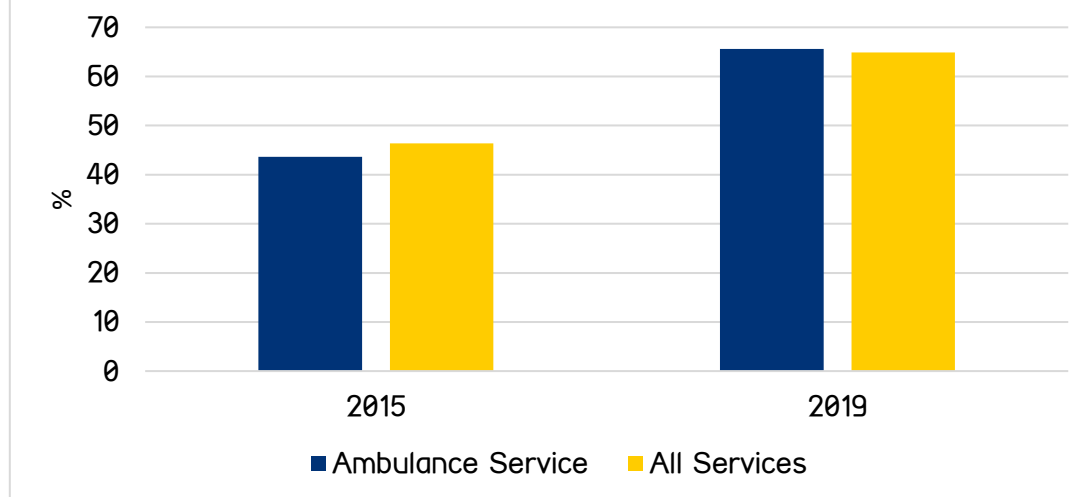
## Sources & Perceptions of Support

### Awareness of Support

Participants in both our 2015 and 2019 surveys were asked about their awareness of support provided by their organisation to improve the wellbeing and mental health of its personnel:



Are you aware of any support your organisation offers to improve the wellbeing and mental health of its personnel?



The proportion of ambulance service staff and volunteers who were aware of the mental health support available to them rose from 43.5% in 2015 to 65.5% in 2019. Along with the fire service, this was the highest increase observed.

### Sources of Support

Of those who were aware of available support, the most frequently cited sources of support amongst ambulance staff and volunteers were the Staff Advice and Liaison Scheme (SALS), which supports ambulance personnel who have had to deal with particularly traumatic cases, Trauma Risk Management (TRiM) – a peer delivered system of risk assessment and ongoing support, and occupational health. Some staff also referenced the Blue Light Programme and peer support initiatives within their organisation. A number of the comments provided by respondents indicated that whilst awareness of available support of grown, the support provided internally within their organisations is not always perceived as adequate:

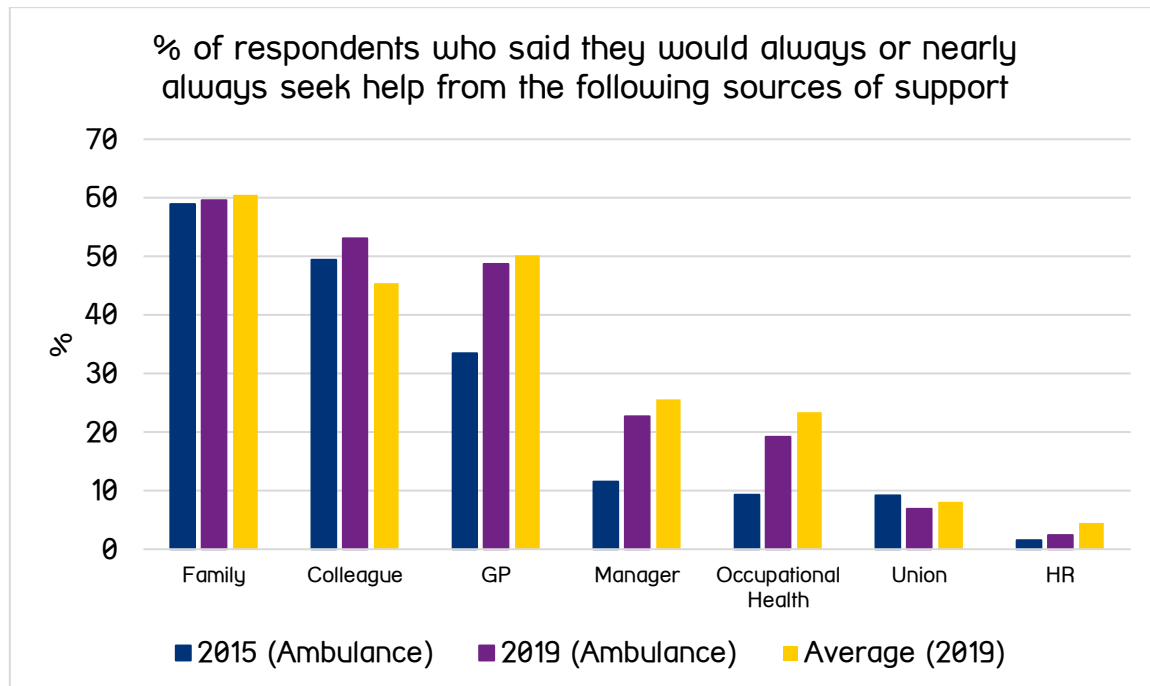
“Somewhat limited and invariably useless. In extreme circumstances you might get to talk to someone over 3 short sessions, which often don't scratch the surface.”

Some respondents also made reference to their own or colleagues' negative experiences of accessing mental health support within their organisation and suggested that this would put them off using these services in future.

The survey also asked respondents to rate the likelihood that they would seek support from a range of different sources if they began experiencing poor mental health:







Overall, the likelihood of staff and volunteers willing to seek support for their mental health from almost all sources has increased since 2015. Family and colleagues remain the most frequently used sources of support for ambulance staff and volunteers, but the number of ambulance personnel willing to seek support from their GP has increased dramatically, from 33.5% in 2015 to 48.7% in 2019.

As in our 2015 survey, a high number of respondents said they would never seek support from HR (71.2%), their Union (57.6%) or Occupational Health (32.4%). The number of ambulance service respondents who would never seek support from HR was the highest amongst all of the emergency services. Whilst (with the exception of their Union) these figures are slightly higher than those observed in 2015, this still indicates a general lack of willingness to access organisational support which has been a theme across the emergency services and is to some extent reflective of attitudes towards help-seeking behaviour within the workplace more broadly.

*"I personally don't feel comfortable leaving my mental health in the hands of them (Occupational Health) I don't think they're professionals."*

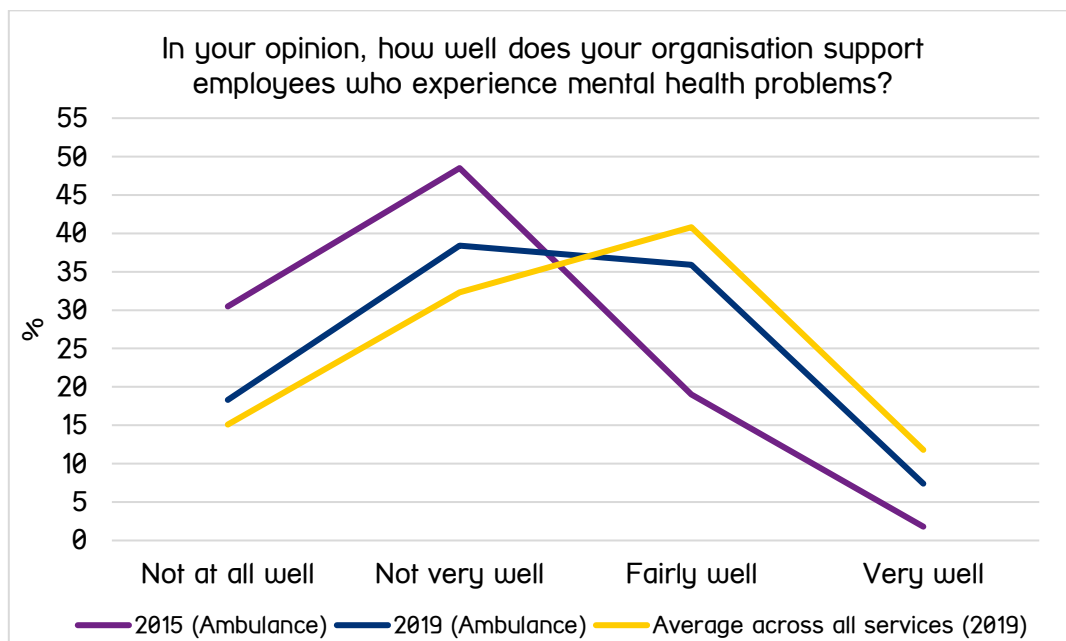
Whilst only 22.7% of ambulance personnel said they would always or nearly always seek support from their managers, this is an increase from 11.6% in 2015, which appears to suggest that things are improving and staff are feeling more confident to disclose their poor mental health in the workplace.

Ambulance service staff and volunteers were more likely than other emergency services to seek help from a colleague if they were experiencing a mental health problem - 53.1% compared to 45.4% overall. This highlights the importance of encouraging peer support initiatives and fostering positive and supportive working relationships within all the emergency services.



## Perceptions of Support

When asked directly about how well they think their organisation supports employees who experience mental health problems, ambulance service staff and volunteers were slightly more negative than other emergency services:

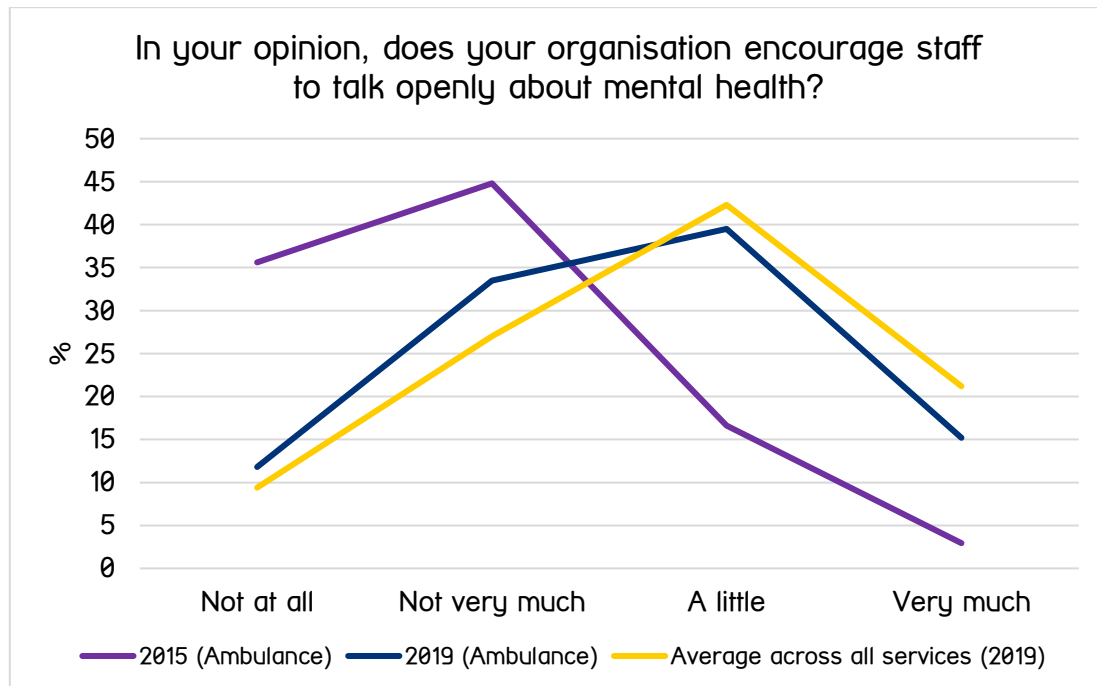


However, since 2015 there has been a big rise in the proportion of ambulance personnel who think that their organisation supports employees with mental health problems 'fairly well' or 'very well' – 43.3% in 2019 compared to 20.9% of respondents to our initial scoping survey.

Ambulance service staff and volunteers who had some involvement in the Blue Light Programme were more inclined to have a more positive opinion of the support their organisation provides, with 48.7% responding positively, compared to 39.7% of those who had no involvement. However, those with lived experience of mental health problems were less positive about the support offered by their organisation, with only 40.2% of those with lived experience working in the ambulance service responding positively, compared to 53.4% of those without. This trend was seen across the services, and suggests that there is more to be done to ensure that the reality of support for employees matches the perception of what is available.

Our survey also asked respondents whether they felt their organisation encourages staff to talk openly about mental health:





Again, whilst ambulance service staff and volunteers responded slightly more negatively than the average across the emergency services overall, the number of personnel responding 'a little' or 'very much' rose from 19.6% in 2015 to 54.7% in our 2019 survey – an increase of 35 percentage points.

As was the case when rating the quality of organisational support, those who had been involved in the Blue Light Programme were more likely to provide a positive response to this question, with 61.1% saying their organisation encouraged staff to talk openly about mental health, compared to 50.7% of those who had no involvement.

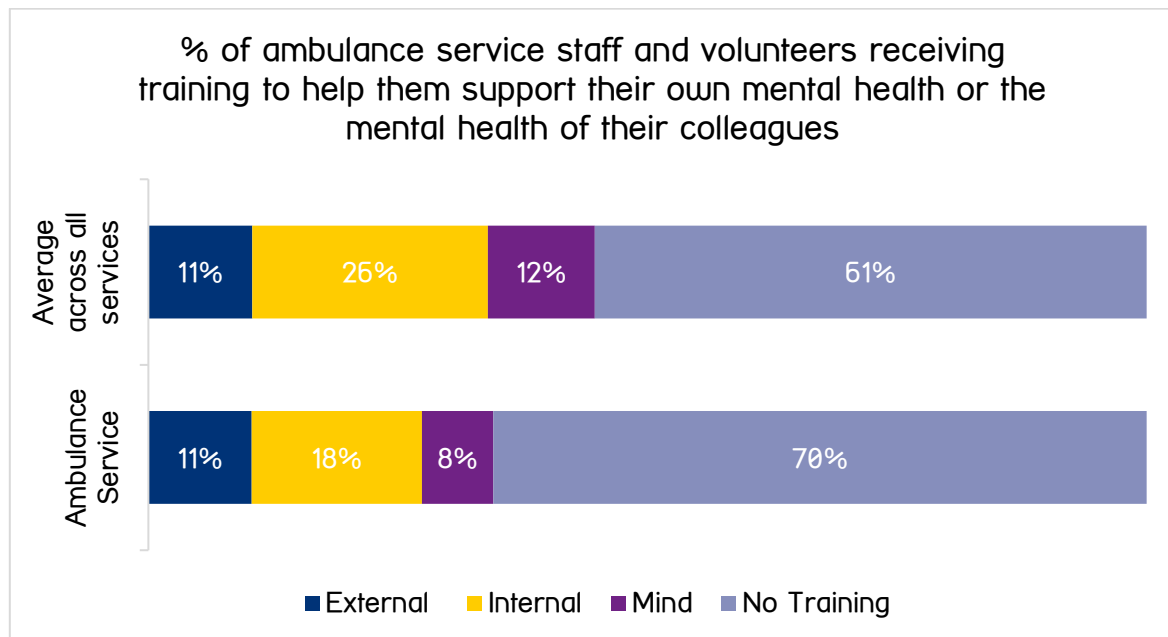
## Mental Health Training

Our research and evaluation over the last four years of the Blue Light Programme has demonstrated that there is a high demand for mental health training amongst emergency services staff, volunteers and line managers. However, demands on resources mean that personnel can't always be released to attend training. Our work with new recruits has shown that providing mental health training at the start of staff's careers can help build their understanding of ways to build resilience and 95% of managers who took part in our managing mental health in the emergency services training said they felt more confident to support a colleague experiencing a mental health problem as a result.

In our 2019 survey, we wanted to understand what training emergency services staff and volunteers are currently receiving to help them manage their own mental health and how this compares to the training they receive to support the mental health of members of the public they come into contact with.



We asked respondents whether they had received any training from their organisation to help them support their own mental health and/or the mental health of their colleagues, and if so, who this training was delivered by:



Only 30.5% of ambulance service staff and volunteers reported that they had received training to help them support their own mental health or the mental health of their colleagues, compared to 39.5% across the emergency services as a whole. This figure increased to 49.1% for respondents holding a line management position.

Of those who did receive training, 18.1% had received this from an internal source, 7.6% from Mind, and 11% from another external provider. Training was mandatory for only 38.3%.

Our survey also asked respondents whether they had received any training about mental health as part of their initial induction to their role or service. Ambulance service staff and volunteers were the most likely to receive induction training to help them support members of the public with mental health problems (58.8%) but the second least likely (after the police service) to receive training to help them support their own or their colleagues mental health (23%).

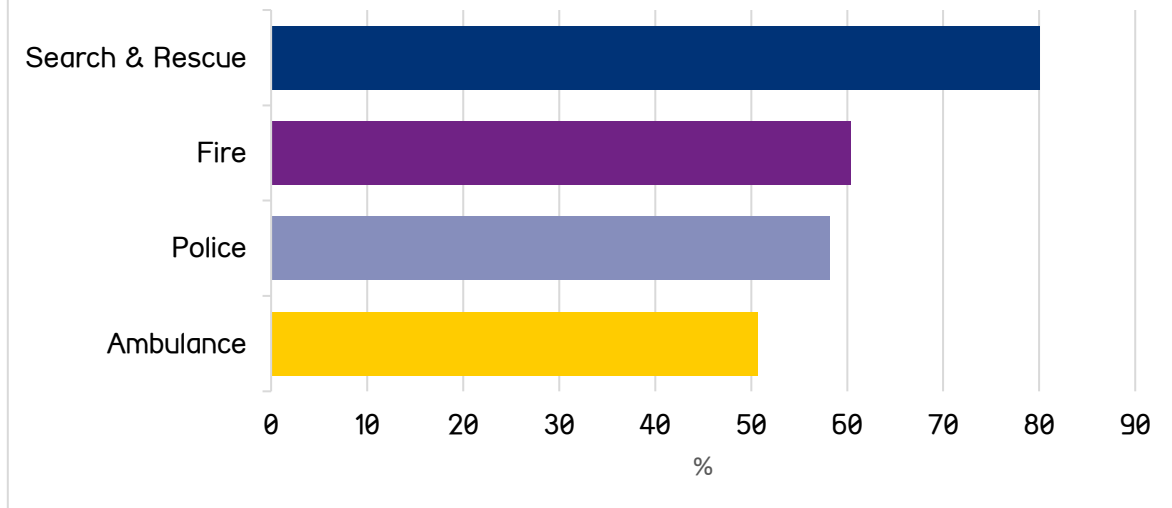
## Managers & Mental Health

Supervisors have an important role to play in supporting staff wellbeing and the Blue Light Programme has encouraged services to invest in making sure supporting staff wellbeing can be an integral part of a manager's day to day role.

We asked our 2019 survey respondents a number of questions relating to their perception of if/how things in their organisation have changed over the last three years, including how able people in their organisation feel able to talk with managers about mental health:



Compared to three years ago, people feel more able to talk with managers about mental health at my organisation:  
% of respondents agreeing or strongly agreeing



Over half (50.7%) of ambulance staff and volunteers agreed or strongly agreed that people feel more able to talk with managers about their mental health compared to three years ago. Whilst this is positive, ambulance staff and volunteers were the least likely of the emergency services to report that their ability to talk to managers in their organisation has improved over the last three years. A slightly higher percentage of ambulance personnel (56%) who had been involved in the Blue Light Programme were in agreement that there had been some improvement.

Whilst it's promising that over half of ambulance staff and volunteers feel that it's easier to talk to managers about mental health than it used to be, this figure is still much less than the 69.7% of ambulance service staff and volunteers who said they feel more able to talk to colleagues than they did three years ago. This suggests that there is still some stigma attached to disclosing a mental health problem to a line manager within the ambulance services, potentially because of fears it may impact detrimentally upon career progression.

Our survey also asked line managers whether there had been any change to how confident they felt supporting a member of staff who was experiencing poor mental health at work. The vast majority (88.7%) of managers in the ambulance service agreed that they felt more confident to support the mental health of staff than they did just one year ago. This was even higher (92%) for those who had been involved in the Blue Light Programme.

## Perceptions of Change

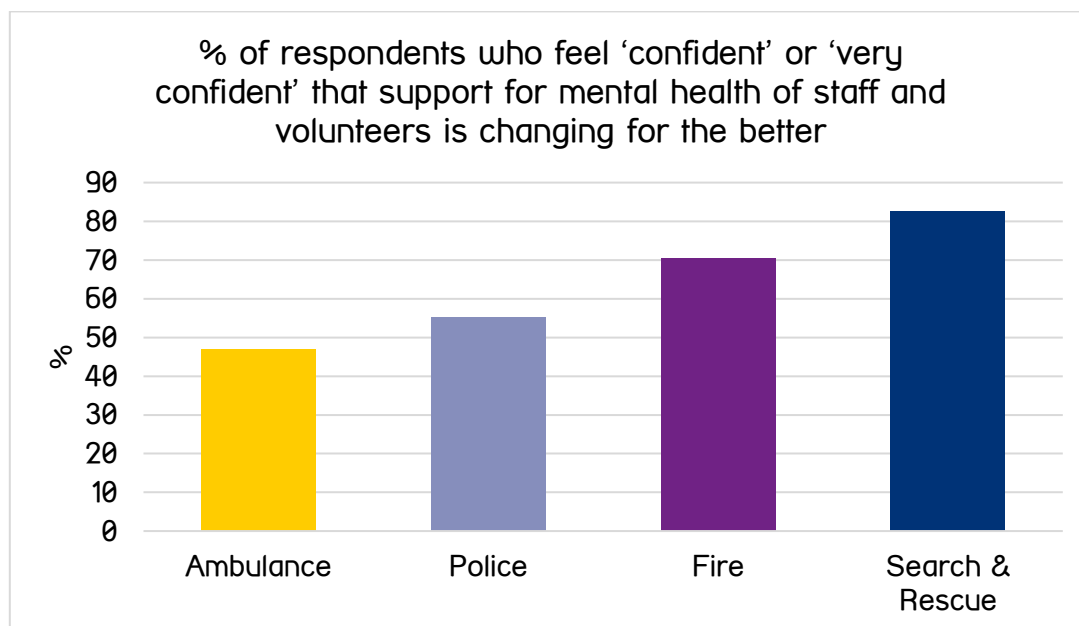
As well as understanding how support and attitudes towards mental health in the emergency services have changed over the last four years since the start of the Blue Light Programme, we also wanted to use our 2019 survey to explore staff and volunteers



perceptions of how their organisation’s approach to mental health has, and continues to evolve.

In our 2019 survey, we wanted to understand staff and volunteers perceptions of how attitudes and support for mental health have, and are continuing to change, in their organisations. We asked respondents to rate their confidence that attitudes and support for the mental health of staff and volunteers is changing for the better in their organisation.

Overall, 59.4% of people who took our 2019 survey said they felt confident that attitudes towards mental health in their organisation were changing for the better, and 55.9% felt confident that mental health support was also improving. However, respondents from the ambulance service were least likely to feel confident in both areas, with 50.7% feeling confident that attitudes were changing and less than half (46.8%) feeling positive that support was improving:



This increased to 57.7% (attitudes) and 54.5% (support) for those involved in the Blue Light Programme, but those with lived experience of mental health problems were less positive (48.2% and 44.4% respectively), suggesting that there’s still more work to do to ensure that staff and volunteers experiencing mental health problems in the ambulance service get the support and respect they deserve.

New recruits (in role less than a year) were the most positive about the changes occurring in their organisations, whilst those who had served 11 to 20 years were least likely to express confidence that things are getting better. The Blue Light Programme has invested significantly in targeted support, training and messaging for new recruits which may have contributed to this finding.







## Conclusion

Our 2019 survey demonstrated that, compared to 2015, staff and volunteers across the emergency services are now far more likely to say their organisation encourages them to talk about mental health and feel more able to seek support for a mental health problem from a range of sources, including their colleagues and line managers. Overall, perceptions are more positive among those who have had some involvement with the Blue Light Programme, compared to those who haven't, but people with lived experience of mental health problems tend to rate the support provided by their organisation lower than those without, suggesting that there is still work to be done to improve the practical delivery of mental health and wellbeing support for those who need it.

Though there have been marked improvements across the board since our 2015 survey, responses from ambulance service personnel were generally more negative than those working for the police, fire and search and rescue services across almost all elements of the survey. This suggests that there is still scope for ambulance service organisations to assess and reprioritise their approach to the mental health and wellbeing of their workforce. Our survey demonstrated that the workplace factors that contribute to staff and volunteers feeling mentally unwell or stress have changed little since 2015. Excessive workload continues to top the list, however more people are now likely to cite trauma as a source of pressure than they did in 2015. As awareness of and willingness to talk about and seek support for mental health problems grows, it is important to keep pace with demand to ensure that all those who require support are able to access it.

The overall findings from our 2019 survey are presented in and were used to inform our 'Wellbeing and mental health support in the emergency services' learning and recommendations report which was published in March 2019 and is available to download on our [website](#). This report sets out what we learned from our four years working with emergency services through the Blue Light Programme and makes a number of recommendations for how emergency services, professional bodies and other organisations can work together to ensure that progress in this area continues and mental health continues to remain on the agenda across the emergency services.



## Appendix One

# Mental health in the emergency services survey

## Introduction

We are Mind, the mental health charity. Since 2015, we've been delivering the Blue Light Programme to provide mental health support for emergency services staff and volunteers from ambulance, fire, police and search and rescue services across England. In April 2017 we launched the programme in Wales too.

Understanding the mental health experiences of 999 teams is incredibly valuable. It helps us and others to shape what we say and how we deliver support.

We want to understand the current experiences of staff and volunteers within ambulance, fire, police and search rescue services, across England and Wales. It doesn't matter if you haven't accessed support or information from the Blue Light Programme before.

This survey is for everyone within the emergency services: you do not need to have a mental health problem to complete it. We would be extremely grateful for your input.

The headline survey findings will be published in a report and shared publically through our website and other channels including social media from March 2019. All answers will be treated in confidence and will remain anonymous.

For further details about the Blue Light Programme please visit [mind.org.uk/bluelight](http://mind.org.uk/bluelight). If you have any queries please email [bluelight@mind.org.uk](mailto:bluelight@mind.org.uk).

## Section 1 – Your Role

In this section we want to understand a little more about you and the type of work you do.

### Q1

|      |   |
|------|---|
| Tick | I am a member of the police service                   |
| Tick | I am a member of the fire service                     |
| Tick | I am a member of the ambulance service                |
| Tick | I am a member of the search and rescue service        |
| Tick | Other<br>[If yes – free text explanation is required] |

### Q2

|      |                  |
|------|------------------|
| Tick | I am an employee |
|------|------------------|



|      |                  |
|------|------------------|
| Tick | I am a volunteer |
|------|------------------|

Q3

| Do you have a management role? |     |
|--------------------------------|-----|
| Tick                           | Yes |
| Tick                           | No  |

Q4

| How long have you been a member of the emergency services? |                    |
|--|--------------------|
| Tick   | Less than a year   |
| Tick   | 1 – 5 years        |
| Tick   | 6 – 10 years       |
| Tick   | 11 – 20 years      |
| Tick   | More than 20 years |

Q5

| Where do you work/ volunteer? |                             |
|-------------------------------|-----------------------------|
| Tick                          | South West England          |
| Tick                          | South East England          |
| Tick                          | London                      |
| Tick                          | East England                |
| Tick                          | East Midlands               |
| Tick                          | West Midlands               |
| Tick                          | Yorkshire and the Humber    |
| Tick                          | North East England          |
| Tick                          | North West England          |
| Tick                          | South Wales / De Cymru      |
| Tick                          | North Wales / Gogledd Cymru |
| Tick                          | Gwent                       |
| Tick                          | Dyfed Powys                 |

## Section 2 – Your Experience

In this section, we want to know about your experience of mental health in the workplace so we can understand how your work affects your mental health and also how your mental health affects your work. Remember, your answers are completely confidential.

Q6

| How would you describe your current mental health? |           |
|--|-----------|
| Tick   | Very good |
| Tick   | Good      |
| Tick   | Moderate  |
| Tick   | Poor      |



|      |            |
|------|------------|
| Tick | Very poor  |
| Tick | Don't know |

Q7

| Please tick all of the following statements which apply to you. |   |
|---|---|
| Tick  | I have personal experience of mental health problems                        |
| Tick  | I use/ have used mental health services                                     |
| Tick  | I use/have used the services of a local Mind                                |
| Tick  | I am a family member of somebody who has experienced mental health problems |
| Tick  | I am a friend to somebody who has experienced mental health problems        |
| Tick  | I care or look after someone who has mental health problems                 |
| Tick  | None of the above.  |

Q8

| Are there any particular aspects of your role that can trigger you feeling low, depressed, stressed, or mentally unwell?<br>Please tick all that apply |   |
|--|---|
| Tick   | Long hours  |
| Tick   | Changing shift patterns                               |
| Tick   | Excessive workload                                    |
| Tick   | Pressure from management                              |
| Tick   | Organisational upheaval                               |
| Tick   | Effects on physical health                            |
| Tick   | Experience of distressing or traumatic events         |
| Tick   | Other<br>[If yes – free text explanation is required] |

Q9

| If you began experiencing poor mental health, how likely are you to seek help from the following?<br>1 is 'never' and 5 is 'always' |   |   |   |   |   |
|---|---|---|---|---|---|
| GP  | 1 | 2 | 3 | 4 | 5 |
| Occupational Health   | 1 | 2 | 3 | 4 | 5 |
| Human Resources   | 1 | 2 | 3 | 4 | 5 |
| Union   | 1 | 2 | 3 | 4 | 5 |
| Colleague   | 1 | 2 | 3 | 4 | 5 |
| Manager   | 1 | 2 | 3 | 4 | 5 |
| Family  | 1 | 2 | 3 | 4 | 5 |
| Friend  | 1 | 2 | 3 | 4 | 5 |
| Other<br>[If yes – free text explanation is required]   |   |   |   |   |   |





### Section 3 – Your Organisation

In this section we are interested in the ways in which your organisation supports your mental health and your perceptions of how this may have changed over the last few years.

#### Q10

| Are you involved with or have previously had any involvement with the Blue Light Programme?<br>Please tick all that apply |   |
|---|---|
| Tick  | Yes – I am a Blue Light Champion  |
| Tick  | Yes – I have been involved in signing the Blue Light Time to Change Pledge  |
| Tick  | Yes – I have used the Blue Light Infoline   |
| Tick  | Yes – I have attended Blue Light Programme training   |
| Tick  | Yes – I have accessed information or resources (leaflets etc.) online through the Blue Light Programme webpage                  |
| Tick  | Yes – I have accessed printed materials (booklets etc.) through my organisation or Blue Light Champions within my organisation? |
| Tick  | Yes – I have taken part in research for the Blue Light Programme.   |
| Tick  | Yes – I have visited the Blue Light Programme webpage or Twitter account  |
| Tick  | Yes – through my local Mind   |
| Tick  | Yes – I receive the Blue Light Programme newsletter   |
| Tick  | Yes – I have seen media coverage about the programme or heard about it at an event  |
| Tick  | Yes – Other [If yes – free text explanation is required]  |
| Tick  | No  |

#### Q11

| Are you aware of any support your organisation offers to improve the wellbeing and mental health of its personnel? |  |
|--|--|
| Tick   | Yes [If yes – free text explanation is required] |
| Tick   | No   |

#### Q12

| Have you received any training from your organisation to help you support your own and/or your colleagues mental health?<br>Please tick all that apply |  |
|--|--|
| Tick   | Yes – internally                         |
| Tick   | Yes – from Mind                          |
| Tick   | Yes – from another external organisation |
| Tick   | No                                       |

#### Q13





Only display if 'yes. Internally', 'yes – from Mind' or 'yes – from another external organisation' are selected in Q12.

Was attendance at this training mandatory or voluntary?

|      |           |
|------|-----------|
| Tick | Mandatory |
| Tick | Voluntary |
| Tick | Both      |

Q14

Only display if 'yes. Internally', 'yes – from Mind' or 'yes – from another external organisation' are selected in Q12.

When was this training offered to you?

If you have attended more than one training session, please tick all that apply

|      |                           |
|------|---------------------------|
| Tick | Less than a year ago      |
| Tick | 1 – 2 years ago           |
| Tick | 2- 3 years ago            |
| Tick | More than 3 years ago     |
| Tick | Don't know/Can't remember |

Q15

Did you receive any training on mental health as part of the initial induction to your role or service?

Tick all that apply

|      |   |
|------|---|
| Tick | Yes – to help me support members of the public with mental health problems            |
| Tick | Yes – to help me support my own mental health and/or the mental health of colleagues. |
| Tick | Both  |
| Tick | Don't know/Can't remember   |

Q16

In your opinion, does your organisation encourage staff to talk openly about mental health?

|      |                    |
|------|--------------------|
| Tick | Yes – very much    |
| Tick | Yes – a little     |
| Tick | No – not very much |
| Tick | No – not at all    |

Q17

In your opinion, how well does your organisation support employees who experience mental health problems?

|      |                 |
|------|-----------------|
| Tick | Very well       |
| Tick | Fairly well     |
| Tick | Not very well   |
| Tick | Not at all well |



Q18

| Please rate each statement, where 1 is 'strongly disagree' and 5 is 'strongly agree'<br>Compared to THIS TIME LAST YEAR...?  |   |   |   |   |   |                      |
|--|---|---|---|---|---|----------------------|
| People feel more able to talk with colleagues about mental health at my organisation   | 1 | 2 | 3 | 4 | 5 | Don't know/Can't say |
| People feel more able to talk with managers about mental health at my organisation   | 1 | 2 | 3 | 4 | 5 | Don't know/Can't say |
| Someone is less likely to be treated differently (in a negative way) if they disclosed their mental health problems at my organisation                               | 1 | 2 | 3 | 4 | 5 | Don't know/Can't say |
| I would feel more able to seek support if I were experiencing a mental health problem.   | 1 | 2 | 3 | 4 | 5 | Don't know/Can't say |
| I feel more confident to spot signs that a colleague may be experiencing a mental health problem   | 1 | 2 | 3 | 4 | 5 | Don't know/Can't say |
| I know more about what to do if a colleague tells me about their mental health problem   | 1 | 2 | 3 | 4 | 5 | Don't know/Can't say |
| I feel more confident that, in my capacity as a manager, I would be able to effectively support a member of my staff who was experiencing poor mental health at work | 1 | 2 | 3 | 4 | 5 | Don't know/Can't say |

Q19

| Please rate each statement, where 1 is 'strongly disagree' and 5 is 'strongly agree'<br>Compared to THREE YEARS AGO...?                |   |   |   |   |   |                      |
|--|---|---|---|---|---|----------------------|
| People feel more able to talk with colleagues about mental health at my organisation   | 1 | 2 | 3 | 4 | 5 | Don't know/Can't say |
| People feel more able to talk with managers about mental health at my organisation   | 1 | 2 | 3 | 4 | 5 | Don't know/Can't say |
| Someone is less likely to be treated differently (in a negative way) if they disclosed their mental health problems at my organisation | 1 | 2 | 3 | 4 | 5 | Don't know/Can't say |
| I would feel more able to seek support if I were experiencing a mental health problem.   | 1 | 2 | 3 | 4 | 5 | Don't know/Can't say |
| I feel more confident to spot signs that a colleague may be experiencing a mental health problem                                       | 1 | 2 | 3 | 4 | 5 | Don't know/Can't say |



|  |   |   |   |   |   |                      |
|--|---|---|---|---|---|----------------------|
| I know more about what to do if a colleague tells me about their mental health problem   | 1 | 2 | 3 | 4 | 5 | Don't know/Can't say |
| I feel more confident that, in my capacity as a manager, I would be able to effectively support a member of my staff who was experiencing poor mental health at work | 1 | 2 | 3 | 4 | 5 | Don't know/Can't say |

Q20

| How confident are you that attitudes towards mental health in your organisation are changing for the better? |                      |
|--|----------------------|
| Tick   | Very confident       |
| Tick   | Quite confident      |
| Tick   | Not very confident   |
| Tick   | Not at all confident |
| Tick   | Don't know/Can't say |

Q21

| How confident are you that support for the mental health of staff and volunteers in your organisation is changing for the better? |                      |
|---|----------------------|
| Tick  | Very confident       |
| Tick  | Quite confident      |
| Tick  | Not very confident   |
| Tick  | Not at all confident |
| Tick  | Don't know/Can't say |

## Section 4 – Demographic Monitoring

You have almost finished the survey – just a few more questions left. We need to ask some demographic questions to compare your responses to the rest of the survey participants. Again, all responses are confidential and will not be used for any other purpose.

Q22

| How old are you? |          |
|------------------|----------|
|                  | Under 18 |
|                  | 18-24    |
|                  | 25-34    |
|                  | 35-44    |
|                  | 45-54    |
|                  | 55-64    |
|                  | 65+      |



Q23

| What is your gender?     |  |
|--------------------------|--|
| <input type="checkbox"/> | Male   |
| <input type="checkbox"/> | Female   |
| <input type="checkbox"/> | Another [If yes – free text explanation is required] |

Q24

| Have you ever identified as transgender, now or in the past? |     |
|--|-----|
| <input type="checkbox"/>                                     | Yes |
| <input type="checkbox"/>                                     | No  |

Q25

| How would you describe your sexuality? |                        |
|--|------------------------|
| <input type="checkbox"/>               | Bisexual               |
| <input type="checkbox"/>               | Gay                    |
| <input type="checkbox"/>               | Heterosexual/ Straight |
| <input type="checkbox"/>               | Lesbian                |
| <input type="checkbox"/>               | Another                |

Q26

| What is your religion?   |   |
|--------------------------|---|
| <input type="checkbox"/> | No religion   |
| <input type="checkbox"/> | Christian (including Church of England, Catholic, Protestant and all other Christian denominations) |
| <input type="checkbox"/> | Buddhist  |
| <input type="checkbox"/> | Hindu   |
| <input type="checkbox"/> | Jewish  |
| <input type="checkbox"/> | Muslim  |
| <input type="checkbox"/> | Sikh  |
| <input type="checkbox"/> | Another [If yes – free text explanation is required]  |

Q27

| How would you describe your ethnicity? |
|--|
|--|





|                        |  |   |   |
|------------------------|--|---|---|
| Asian or Asian British | <input type="checkbox"/> Bangladeshi<br><input type="checkbox"/> Chinese<br><input type="checkbox"/> Indian<br><input type="checkbox"/> Pakistani<br><input type="checkbox"/> Another Asian background | Mixed   | <input type="checkbox"/> White & Asian<br><input type="checkbox"/> White & Black African<br><input type="checkbox"/> White & Black Caribbean<br><input type="checkbox"/> Another mixed background |
|                        | Black or Black British   | <input type="checkbox"/> African<br><input type="checkbox"/> Caribbean<br><input type="checkbox"/> Another Black background | White   |
| Other ethnic group     | <input type="checkbox"/> Arab<br><input type="checkbox"/> Gypsy or Traveller<br><input type="checkbox"/> Another background [If yes – free text explanation is required]                               |   |   |

Q28

| Would you say you have a long-term health condition or disability? |  |
|--|--|
|  | Physical disability (including sensory impairment)                               |
|  | Learning disability (including developmental disorders)                          |
|  | Another experience of disability<br>[If yes – free text explanation is required] |

### How we will process the information you provide:

We take your privacy seriously and promise to never sell your data. You can find out more about your rights, how we use your personal information and how we keep your details safe and secure by reading our [Privacy Policy](#). For more information contact [research@mind.org.uk](mailto:research@mind.org.uk)

