

Building a Supportive Workplace

Mental Health First Aid at Work

A comprehensive, practical guide for colleagues, line managers, HR teams and workplace supporters. Learn how to recognise distress without diagnosing, have supportive conversations, create healthier working conditions and know when to seek professional or urgent help.

> **Core principle**
>
> You do not need to fix another person. Listen, respect privacy, offer appropriate practical support, and take workplace stressors seriously.

Support • Understand • Belong

How to use this guide

Read the sections in order or select the ones relevant to a situation. The final pages include an action pathway and clear next steps. Separate printable worksheets are supplied in the companion PDF.

Important boundaries

This is an educational Space to Breathe Therapy resource. It is not an accredited Mental Health First Aid England course or qualification, and does not replace clinical, safeguarding, emergency, HR, occupational-health or legal advice.

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1. Foundations: what workplace support means

Workplace mental-health support is a compassionate response to an employee or colleague who may be distressed. It should be voluntary where possible, respectful, practical, and clear about the supporter's role.

• Acknowledge changes or disclosures without assuming a condition.

• Check immediate safety and whether the person wants to speak.

• Listen and ask what would help; do not rush into advice.

• Address working conditions when they contribute to distress.

• Use appropriate routes for health, HR, occupational health and safeguarding.

IN PRACTICE

Useful opening: "I have noticed you seem under pressure recently. Would you like to talk about what might help at work?"

2. Recognising changes without diagnosing

Any single observation may have many explanations. A pattern of change can invite a gentle check-in, but it cannot establish a diagnosis.

• Possible changes include withdrawing from activities, appearing distressed, difficulty concentrating, fatigue or changes in attendance.

• Physical illness, disability, grief, social demands and pressures outside work can produce similar changes.

• Describe only what you have actually observed; avoid labels like "unstable" or "not coping".

• Never pressure somebody to disclose treatment, diagnosis or personal history.

IN PRACTICE

Say: "I have noticed the deadlines have been difficult this week," rather than "You seem depressed."

3. Approach: beginning respectfully

Choose an appropriate moment and location. A manager holds more authority than a colleague, so the person may be cautious about what they disclose.

• Ask permission to talk; offer another time or a written format.

• Use a calm tone and specific, non-judgemental observations.

• Explain your role and any limits on confidentiality at the start.

• If they say "I'm fine," respect the response unless you have an immediate safety concern.

IN PRACTICE

“There is no pressure to share personal details. We can focus on what would make work manageable.”

4. Listen: understanding, not fixing

Listening can reduce isolation and help uncover practical needs. The person decides what to share.

• Allow pauses; ask open questions such as “What has been hardest lately?”

• Reflect what was said: “It sounds like the unexpected changes are exhausting.”

• Ask whether the person wants listening, problem-solving or time to think.

• Avoid minimising, comparing experiences or telling someone to “be positive”.

• Do not promise total secrecy: share information only when appropriately necessary.

IN PRACTICE

“Would it help if I listened first, before we think about possible changes?”

5. Support: adjustments and work conditions

A person cannot always recover while the same workplace conditions continue to cause harm. Look for practical changes and agree how they will be reviewed.

• Consider realistic workload, priorities and protected breaks.

• Review communication formats, written instructions, meeting expectations and processing time.

• Assess sensory demands, equipment, workplace accessibility and flexible arrangements.

• Avoid one-size-fits-all adjustments; discuss what helps this individual.

• Employers may have legal duties to make reasonable adjustments for disabled workers under the Equality Act 2010.

IN PRACTICE

A trial arrangement might include a written priority list, fewer unexpected calls and a review after two weeks.

6. Guide: signposting and confidentiality

Supporters can give information and practical assistance without becoming counsellors or diagnosing.

• Ask permission before sharing support options.

• Potential routes include a GP, NHS services, occupational health, an employee assistance programme, HR, a union representative or a trusted person.

• Clarify what will be documented, where records are kept, and who may see them.

• If a disclosure suggests serious risk, follow safeguarding and emergency procedures.

IN PRACTICE

“Would it be useful to explore occupational health or other support? You can decide what you want to pursue.”

7. Follow up: review and sustainability

A helpful conversation is not the endpoint. Follow-up should be agreed, respectful and focused on whether the support is effective.

• Set a review date and clarify who will make contact.

• Ask whether agreed changes are working and whether demands have shifted.

• Expect variation in capacity; a difficult day is not automatic failure.

• Make updates to arrangements rather than expecting the person to manage alone.

• Avoid daily questioning that feels like surveillance.

IN PRACTICE

“We agreed to try these changes for two weeks. What has helped, and what still needs adjusting?”

8. Neurodivergent and accessible conversations

Some autistic, ADHD and otherwise neurodivergent employees may need different processing, sensory and communication conditions. Ask rather than assume.

• Offer written questions before a meeting or written responses afterwards.

• Use direct, concrete wording and avoid reliance on implied meaning.

• Allow processing time; silence is not lack of understanding.

• Do not judge engagement from eye contact, voice, facial expression or body movement.

• Consider remote, quiet or low-stimulation settings and assistive technology.

IN PRACTICE

“Would you prefer to reply by email, speak today, or have some time to think first?”

9. Responding to risk and emergencies

Mental health first aid includes knowing when immediate safety and professional help matter more than a routine workplace conversation.

• For immediate danger to life or serious harm in the UK, call 999.

• If you are concerned about suicidal thoughts, ask sensitively and directly about safety; take concerns seriously.

• If safe, stay with the person while suitable emergency assistance is arranged.

• Follow workplace safeguarding and emergency policies, and avoid making promises of secrecy.

• For urgent but non-emergency mental-health support in England, NHS 111 offers a mental health option; elsewhere use relevant local NHS routes.

IN PRACTICE

Do not attempt to manage a high-risk situation alone or use this guide as an emergency protocol.

10. Managers, teams and organisational responsibility

Supportive workplaces address how work is designed, led and changed, not just employees' individual coping skills.

• Review demands, control, support, relationships, role clarity and change: the HSE Management Standards areas.

• Avoid blame, public criticism and sudden unexplained changes where possible.

• Train managers to respond with respect and to seek advice beyond their competence.

• Give employees safe routes for raising concerns about bullying, discrimination or unsafe practice.

• Evaluate whether adjustments work in practice, not just whether they have been offered.

IN PRACTICE

Ask: "Which part of the working environment is creating the barrier, and what can the organisation change?"

11. Practical workplace action pathway

Use these steps as a flexible sequence rather than a rigid script.

• Approach: notice and invite conversation at a suitable moment.

• Listen: clarify what the employee wishes to share and how they prefer to communicate.

• Support: identify manageable practical changes and explain role boundaries.

• Guide: offer relevant professional or workplace pathways.

• Follow up: record agreed work actions appropriately and review their effectiveness.

IN PRACTICE

Write an action in observable terms: “Provide advance agenda 24 hours before meetings; review in two weeks.”

12. UK support and next steps

Support options differ by location and situation. Use official sources, and check local services and current contact details.

• NHS mental health: www.nhs.uk/mental-health/

• Samaritans: 116 123, free emotional support, day and night; www.samaritans.org

• Shout: text SHOUT to 85258; giveusashout.org

• Mind: www.mind.org.uk

• ACAS employment guidance: www.acas.org.uk

• HSE work-related stress guidance: www.hse.gov.uk/stress/

IN PRACTICE

Space to Breathe Therapy: spacetobreathetherapy.co.uk — Support • Understand • Belong.