



Galliford Try – Next Steps of Mental Health support



















- Current Status
- What have we achieved so far?
- What difference has it made?
- > OK, so how do we do more....?
- ≻ Q&A











Current Status

Statistics taken from Mental Health In The Construction Industry – The Holistic Health Care Group

What's happening to our workforce? Suicide 3 x more likely

Kills more construction workers than falls

73% feel employers don't offer any support





The industry is very good at focusing on *physical* health, safety and wellbeing but it's time to broaden that to include *mental* health as well

Construction is the industry with the highest level of death rate, where it makes up for nearly 27% of the total workplace deaths in 2021. It also has a suicide rate three times higher than the national average for a male worker.











Current Status







- Helplines: 38%
- Awareness week activities: 26%
- Scheduled I-I meetings : 25%
- Fatigue management plans: 5%
- Flexible working: 38%
- Work from home policy: 28%
- Switch-off policy (e.g Policy against checking your phone/emails during non-working hours): 7%
- Training on mental health and the symptoms: 31%
- Support structures: 26%
- Additional external support (e.g. Counsellors, Occupational Psychologist): 31%
- Other (Please specify): 3%









What have we achieved so far?

What is CBT?

Midlands Highway Alliance Driving Collaboration

CBT is based on the idea that how we think about situations can affect the way we feel and behave. For example, if you interpret a situation negatively, you might experience negative emotions. And those bad feelings might lead you to behave in a certain way.

CBT combines two types of therapy to help you deal with these thoughts and behaviours:

•cognitive therapy, examining the things you think

•behaviour therapy, examining the things you do.



[™]It got me through a really tough time, from being suicidal and off work on long-term sick leave, to fully functioning again and now in a successful career. It pulled me back from a very dark place and reintroduced structure to my life when I'd given up.[®]











What have we achieved so far?

Firstly, we stepped in when needed....



Pilot planned to focus on:-

- worry/anxiety management •
- managing anxiety in social situations •
- managing anxiety about health/illness
- overcoming fears and phobias
- lifting low mood and improving motivation
- improving sleep
- improving self-esteem











What have we achieved so far?



Work thus far recognised by Construction News, British Construction Industry Awards, ICE, Considerate Constructors & other bodies

Success of the pilot

45 minute sessions extended and numbers of sessions increased

"Really useful workshop - good to get people talking about mental health reduce the taboo"

"These sessions are an eye opener, having these more frequently would be great"

"I thought it was really useful, I'd definitely do something like this again"

Requests for more topics to be covered

Strong supply chain uptake















OK, so what do we do now...?

- Challenge What can we do that is different and enhances support?
- Mental Health first aiders now a standard
- Mates in Mind now a standard
- Aimed at people helping people
- Our goal is look within
- ➢ Now enhancing the CBT pilot
- More sessions, more topics, more invites
- Good start....















OK, so what do we do now...?

Accessible

Needs led

Inclusive

Signposting

Evidence based treatment

iapt Improving Access to Psychological Therapies

<u>Resources</u> <u>accessible to us all</u>

Who is responsible for care?			What is the focus?	What do they do?
	Step 5:	Inpatient care, crisis teams	Risk to life, severe self-neglect	Medication, combined treatments, ECT
S	itep 4:	Mental health specialists, including crisis teams	Treatment-resistant, recurrent, atypical and psychotic depression, and those at significant risk	Medication, complex psychological interventions, combined treatments
Step	3:	Primary care team, primary care mental health worker	Moderate or severe depression	Medication, psychological interventions, social support
Step 2:		Primary care team, primary care mental health worker	Mild depression	Watchful waiting, guided self-help, computerised CBT, exercise, brief psychological interventions
Step 1:		GP, practice nurse	Recognition	Assessment

*source ONS











OK, so what do we do now...?

- Started as a Mental Health Stand Down event
- > CBT is a tool, started as the stand alone focus
- Not E-Learning, not stand down days
- Face to Face project to project, office to office
- Supported with engagement footage
- Still development
- Framework wide opportunity maximise our reach, maximise our impact













Thank you for listening







