Being a frontline officer can be tough and it can take its toll on your mental health and wellbeing. This guidance offers advice and signposts avenues of support for officers in protecting their own wellbeing and how they can support the public.

People who work or volunteer for the emergency services are even more at risk of experiencing a mental health problem than the general population, but are less likely to seek support. It is vital for you to look after both your own and the public's mental health and personal wellbeing.

### Factors that affect mental wellbeing

We all have times when we have poor mental wellbeing – when we feel sad or stressed, or find it difficult to cope. Your mental wellbeing can be affected by work-related factors such as:

- Repeated exposure to traumatic events.
- Workload pressures.
- Long working hours.
- Lone working.
- Dealing with people who may be physically or verbally abusive.

# Personal wellbeing

It's important to look after your wellbeing on a day-to-day basis, and not just after experiencing big, traumatic events. Try to:

- Talk about how you feel to someone you know and trust.
- Do something you enjoy.
- Look after your physical health.
- Relax.
- Know what triggers your bad moods. Is it food, certain people or particular situations?
- Take five minutes, even if it is a loo break, to collect your thoughts and process how you are feeling.
- Breathe better. Learning to control your breathing when stressed, upset or struggling will help you rationalise your mind and calm down.
- Don't expect too much of yourself.
- <u>Putting mindfulness into practice</u>/resilience training. This is not for everyone, but it is a
  skill that once learned will help for years to come. Many <u>Blue Light Champions</u> or
  <u>Mindfulness Champions</u> can advise.

### Help at work

 <u>Blue Light Champions</u> or <u>Mental Health First Aiders</u> can mentor you and put you in touch with the right people, a friendly voice at the end of the phone when you need some extra support.

- Contact our employee assistance provider Health Assured for free <u>Counselling and advice</u> (0800 028 0199 available 24 hours a day, 365 days a year).
- Occupational Health Unit services.
- Peer support groups.
- Police Treatment Centres.
- TRiM Trauma Risk Management
- Email the HR Policy and Wellbeing team or call them on 68982 or 0300 122 8982.

#### Debrief after stressful or traumatic incidents at work

- Your sergeant should be your first port of call, they should ask that you are OK and whether you need additional support. Admitting you do is not something to be embarrassed about, not everyone copes the same.
- If you are not happy with the response from your sergeant, you can ask to speak to someone else, such as your inspector, <u>Blue Light Champions</u> or another <u>support</u> <u>networks</u>.

#### Mental health

# Mental health conditions and symptoms

There is a wide spectrum of differing mental health conditions, see what symptoms to look out for:

# **Depression**

- An unusually sad mood that doesn't go away.
- Loss of enjoyment and interest.
- · Lack of energy and tiredness.
- · Lack of appetite.

### **Anxiety - general**

- Cardiovascular; heart palpitations, rapid heart rate, flushing colour.
- Muscle aches and pains.
- Hyperventilation.
- Unrealistic/excessive fear or worry.
- Confusion.
- Unwanted, unpleasant, repetitive thoughts.
- Avoidance of situations.
- Panic attacks.

# **Psychosis**

- Schizophrenia nothing to do with a split personality.
- May suffer from, delusions, hallucinations, thought disorders and more.
- Drug induced psychosis effects come on quickly and last a short time. Long term drug usage may trigger things like schizophrenia in people who are vulnerable to psychosis.
- People with psychosis are more likely to be victims than offenders of violent crime and are far more likely to harm themselves than another person.

# **Bipolar**

- Be overconfident and full of energy.
- Find it difficult to stick to one conversation subject.
- Have less need for sleep (talking weeks).
- Take risks they normally wouldn't (impulsive).
- Pressured in speech.
- Excessive Spending.
- No concept of personal space, maybe demanding.

# Suicidal thoughts

If someone presents as though they are suicidal, help them rationalise their thoughts.

For further guidance see **Getting help for thoughts about suicide**.

# Personality disorder

- A personality disorder generally originates in early life due to complex trauma and abuse.
   They find social stressors hard to manage and at these times their emotions become heightened and they may self-harm or threaten suicide as a way of coping.
- Can be impulsive in their behaviour and manipulative out of fear.

For further guidance, visit our **Mental health conditions and support** page.

### **Support**

Along with the in-force support, mentioned above, there are a number of useful external contacts that may also be of assistance:

- Samaritans: 116123 (24 hours, seven days a week).
- MIND: 0300 123 3393 general mental health assistance.
- No Panic (anxiety): 0844 967 4848 (10am 10pm, seven days a week) / 01753 840393 (youth helpline, 13-20 year olds, 4pm 6pm Mon-Fri.)
- Hearing Voices: 0114 271 8210 (psychosis).
- Bipolar UK: 0333 323 3880.
- CALM: 0800 585858 (5pm midnight, seven days a week) aims to prevent male suicide.

•	<ul> <li>Papyrus: 0800 068 4141 (Mon-Fri, 10am - 10p</li> </ul>	om and weekends 2om - 1	0pm) – for vouna
	people up to 35 years of age.		op, jourig