



BUILDING A RESPONSE PLAN



for Incidents of Mental Health Crisis
in the Construction Industry Workplace

**HARD HAT
COURAGE**



American
Foundation
for Suicide
Prevention



Who is this Guide for?

This guide is for leaders within construction industry companies and organizations—especially those focused on safety and health—who are seeking to build or improve their response plans to include mental health crisis response, particularly when there is expressed suicidal ideation (thinking about, planning, or considering suicide) and/or risks of self-harm. This guide brings together suicide prevention best practices with crisis response processes suited to construction industry environments. The guide is intended to be a starting place and should be customized to a company or organization's specific needs and processes.

What Makes a Response Plan Effective?

- Clear, effective communication and processes
- Defined responsibilities and accountability
- Regular training and availability of resources to ensure everyone can identify people that might be at risk of suicide, have a conversation, with, provide resources to people such as EAP or 988 and are aware of the company's response plan:
 - Ex: Suicide prevention resources from outlets like "Hard Hat Courage" can be incorporated into employee health and safety curriculum.
- Awareness of and ready access to response plan
- Regular evaluation and revision of the plan to reflect lessons learned and current best practices.

SAMPLE RESPONSE PLAN

Any individual who witnesses or receives information that someone may be experiencing a mental health crisis and/or suicide ideation is responsible for taking action. If you are concerned about someone, assume you are the only one who will act and respond accordingly or ask for help to respond. Starting a conversation with someone you are concerned about is critical to preventing suicide.

Understand the Warning Signs of Suicide

Most people who take their lives exhibit one or more warning signs through their talk, behavior, or mood. Someone who is considering suicide might:

- **TALK ABOUT** killing themselves, feeling hopeless, having no reason to live, being a burden to others, feeling trapped, unbearable pain. This may be stated as a joke, but it should be taken seriously.
- **DEMONSTRATE BEHAVIORS** including increased use of alcohol or drugs; looking for a way to end their lives, such as searching online for methods; withdrawing from activities; isolating from family and friends; sleeping too much or too little; visiting or calling people to say goodbye; giving away prized possessions; aggression; fatigue. These behaviors may especially signal risk if they are new or are related to a painful event, loss, or change.
- **DISPLAY SIGNS OF** depression, anxiety, loss of interest, irritability, humiliation/shame, agitation/anger, relief/sudden improvement.

Step 1: Assess the Situation

If you witness or receive information that someone may be experiencing a mental health crisis and/or suicide ideation, determine if the person may be in Acute Distress or at Imminent Risk. Do this by observing the person's actions and listening to what they say. Show understanding and take their concerns seriously. Ask them directly about suicide calmly and without judgment. Let them know their life matters to you.

ACUTE DISTRESS

There is reason to be concerned about the person, but there is no sign of imminent risk of self-harm.

Example:

- Exhibits one or more warning signs of suicide.
- No indication of immediate possession of firearms or other lethal means of suicide.

IMMINENT RISK

There is reason to be concerned about the person, and there may be signs of a concrete plan, lethal means, or attempt at self-harm.

Example:

- Exhibits one or more warning signs of suicide, especially expression of intent, desire, and/or a plan to harm oneself.
- Alleged to or has lethal means or a weapon.*
- Attempts made to harm oneself or actual harm incurred to oneself.

*Do not attempt to approach or reason with someone who is alleged to have or is wielding a weapon. Call 911 immediately.

Step 2: Intervene

ACUTE DISTRESS

Find a safe and private location, such as a lunch tent or conference room, to have a conversation.

- You don't need special training to have an open, authentic conversation about mental health – and often, just talking about it can be the first important step in understanding where someone is with their mental health, and helping them get support or treatment if needed.
- Ask directly about suicide. For example: "Are you having thoughts of suicide?"
- Encourage them to call 988. (988 Suicide and Crisis Lifeline). Call with them and drop off the line once they are connected.
- Text TALK to 741741 to text with a trained crisis counselor from the Crisis Text Line for free, 24/7.
- Document the situation and your actions for follow-up

IMMINENT RISK

Attempt to escort them to mental health services or an emergency room.

- Call emergency first responders e.g. 911 and follow [insert company/organization emergency protocols – include link here].
 - If you are not able to call 911 because you're interacting with the person, request that a team member make the call immediately.
- Follow [company/organization workplace violence procedures – include link here where available]
- Document the situation and your actions for follow-up
- Ensure your own safety and the safety of others nearby.

Step 3: Notify Appropriate Colleagues and Determine Next Steps

NOTIFY. As soon as possible, inform [insert name of responsible project/office manager, health and safety manager, and/or HR manager], or ask a team member to do so. That person should then notify up the reporting chain to [the senior most responsible general manager, health and safety manager, and HR manager] as agreed within your organization.

IF POSSIBLE, LEARN MORE. Without interfering with the person's health and safety (and that of everyone around them), the [insert name of responsible project/office team member] should begin a process to understand what happened from those closest to the event. What preceded or accompanied the concern? What did those who identified the concern observe? What is their relationship with the person? What happened leading up to the incident? How did they intervene? This information may be useful to support emergency first responders and for a response team to best support the individual.

CONSIDER HAVING A CRISIS RESPONSE TEAM: A pre-established crisis response team or communication chain can be helpful for bringing together the right resources quickly, handling sensitive information appropriately, and for responsive and thorough decision-making on next steps. Depending on your organization, a health and safety crisis response team, a mental health-specific team, or another quick-response team may be most appropriate.

SET UP A CALL with [appropriate colleagues or Crisis Response Team] as soon as possible after the situation is identified and after any imminent risk to health and safety has been addressed. The goals of the call should be to:

- Share appropriate information about the person, the incident, and what actions were taken with appropriate colleagues who can help make decisions and provide resources.
- Develop plans for supporting the person and everyone affected in the hours and days to follow. Identify a caring contact person for the person. Consider possible support structures for the medium- and long-term.
- Develop a compassionate plan for understanding and managing any challenges in the workplace that might have preceded or contributed to the incident, and a plan for a caring contact to the person moving forward.
- Designate a point person to schedule a follow-up call with the same group within a reasonable timeframe to update.
- Ensure appropriate procedures are followed.

Depending on the situation, thoughtful communication about the event should happen in a timely manner, drawing on expertise in suicide prevention and mental health (see Appendix: Additional Resources). It is important to treat the individual's status with confidentiality and on a need-to-know basis with sharing only minimum level of details. It should be treated in similar manner to a physical health event that others witnessed or were involved in helping with (with more emphasis on privacy); e.g., in case of heart attack, the follow up communication to ppl who were there might be something like "Thank you for your support on 11/15. Dave is now doing well after receiving medical support." Potential recipients of communication should include:

- Directly affected employees
- Site leadership
- Trade partners and subcontractors
- Clients, as appropriate
- External agencies, if required

Step 4: Post-Event Follow-Up

HOLD A FOLLOW-UP CALL with the [Crisis Response Team or similar] to discuss status of planned actions and remaining support needed for the individual or others. Conduct a debrief with involved staff to review the response and identify improvements. Identify who is responsible for actions moving forward.

FOLLOW UP WITH THOSE AFFECTED.

- If the event results in an absence and then return to work for the affected person, work with them to identify appropriate support for their return.
- Provide access to counseling and support services for the broader team.
- Update protocols and training as needed based on lessons learned.
- Communicate any changes to all relevant staff.

Appendix: Additional Resources

If you, a family member, or a coworker are in crisis, you can use these resources.

- The National Suicide Prevention Lifeline - Call or Text 988
- Veterans Crisis Line - Call 988 and press 1 / Text HELP to 838255
- Trevor Project (LGBTQ+): Call 866-488-7386 / Text START to 678678
- National Alliance on Mental Illness (NAMI) Helpline: Call 800-950-NAMI (6264)
- The Crisis Text Line: Text HOME to 741741 for free, 24/7 support from a crisis counselor.
- [Insert name of Employee Assistance Program]
- [Insert name of Responsible Team or Employee]
- [Trade partner: Please refer back to your employer or call the National Alliance on Mental Illness (NAMI) Helpline at 1-800-950-NAMI (6264).]
- For information on suicide prevention or to support those who lost someone to suicide, visit American Foundation for Suicide Prevention (www.afsp.org).

IF AN EMPLOYEE HAS DIED BY SUICIDE, the After a Suicide guide provides a framework, tools, and best practices for responding effectively and compassionately in the aftermath of a suicide on or connected to a construction workplace.