

Mental Well-Being in the Construction Industry



Group Alignment



Mental health – A state of well-being in which the individual realizes their own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to their community.

Mental health challenge – A broad term that includes both mental disorders and symptoms of mental disorders that may not be severe enough to warrant the diagnosis of a mental disorder.

Mental wellness, mental well-being – A state that allows a person to perform well at work, in their studies, and in family and other social relationships.

Mindfulness – Being conscious and accepting of the present moment while acknowledging one's thoughts, feelings, and bodily sensations.

Recovery – The process of change through which individuals improve their health and well-being, live a self-directed life, and strive to reach their full potential and personal journey with the goals of hope, empowerment, and autonomy.

Stigma – Negative attitudes (prejudice) and behaviors (discrimination) carried by a group towards another group, person, or circumstance.



Words Matter

Word Cloud

The Problem – 20,000 ft. view





CONSTRUCTION SAFETY
CONSCIOUSNESS | ALIGNMENT | RESPECT | EMPOWERMENT

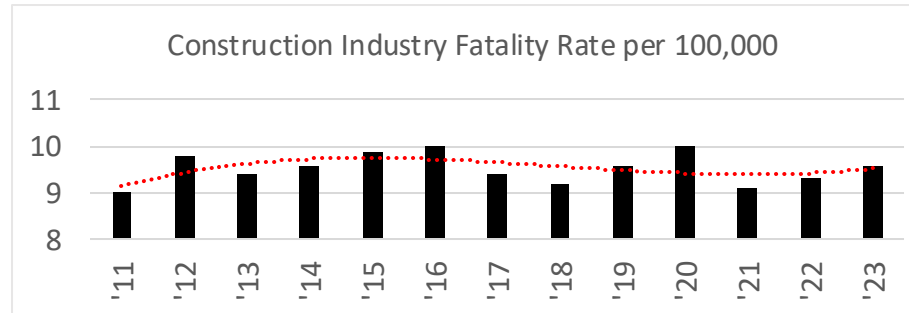
1 in 5, or **20%** of human beings are
struggling with a mental health
challenge.

An Industry Problem

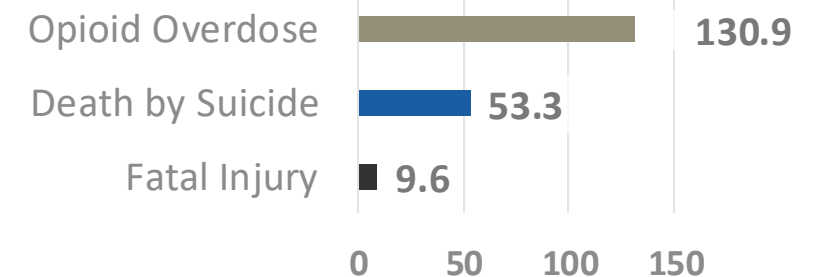
Construction safety has improved...to a point

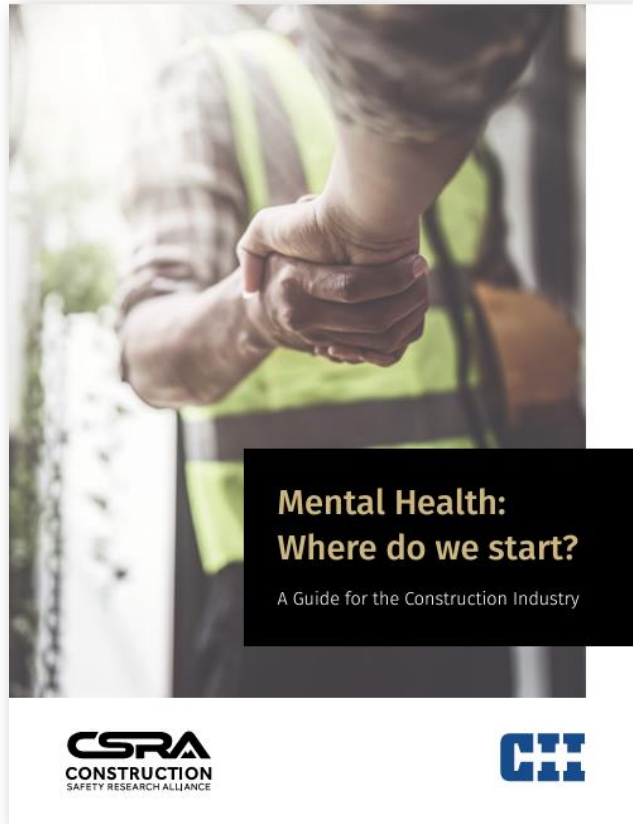


The safety plateau is real.
How do we overcome it?



What factors affect critical decision-making at the point of work?





The top three stressors were found to be:



Financial Stress



Job Demand



Factors Outside Work

The Problem – Ground level





No one person should have to carry too much weight...

Lunch time stand down: We do not want you to get sick, get hurt, or die. We want you to get home to your loved one(s)



3-hours later at the end of the shift: I didn't get sick, get hurt, or die. I have no one to go home to, "I drink to much"



Wait a second ... I thought our focus was on getting workers home safely...

It seems, that we need to invest resources directed at supporting workers so they can get to work safely...

My Journey



Lean Practices in Construction 2015

8 Wastes

The 8 Wastes are eight types of process obstacles that get in the way of providing value to the customer.



Defects

Efforts caused by rework, scrap, and incorrect information.



Overproduction

Production that is more than needed or before it is needed.



Waiting

Wasted time waiting for the next step in a process.



Non-Utilized Talent

Underutilizing people's talents, skills, & knowledge.



Transportation

Unnecessary movements of products & materials.



Inventory

Excess products and materials not being processed.



Motion

Unnecessary movements by people (e.g., walking).



Extra-Processing

More work or higher quality than is required by the customer.



Skill	Practice	Emotional waste if not practiced
Lead by Example	'Walk the talk' Make safety a core value and make sure everyone owns safety.	<i>Uncertainty</i> due to being told what to do and how to act, but watching others, particularly their leaders, not following the rules.
Engage and Empower Team Members	Encourage and empower crew members to identify, report, and remove hazards - and to come up with solutions.	<i>Frustration</i> at not being asked for ideas on how to do task even though they may know a safer and more efficient way to do it.
Actively Listen and Practice 3-way Communication	Listen to hear and understand what crew members are telling you and make sure they understand what is being said or asked.	<i>Annoyance</i> at not being listened to when raising an issue and <i>anxiety</i> due to not understanding the desired outcome of the request being made.
Develop Team Members by Teaching, Coaching, & Feedback	Act as a teacher and coach and provide constructive feedback using the FIST principle: Facts, Impact, Solutions, and Timely.	<i>Apprehension</i> and <i>fear</i> of being ignored or ridiculed when they ask for more direction on how to complete a task.
Recognize Team Members for a Job Well Done	This can be done in private or in public if the employee is comfortable with it.	<i>Resentment</i> from never being recognized for going above and beyond what's expected.

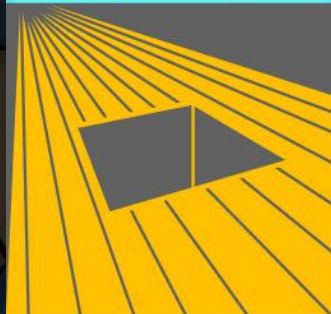
CPWR FSL
2016

Foundations for Safety Leadership

Introduction



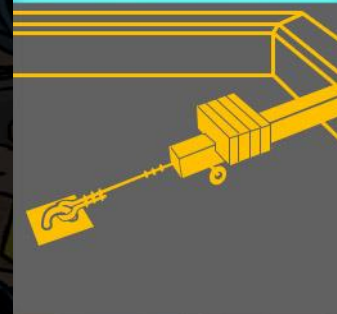
Cover Up!



It's Too Hot



To Check



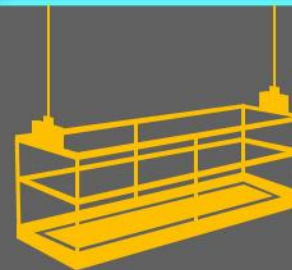
Gimme Space



The Right Tool



Do We Have To?



Fritz's Shortcut



5 *LEADER*ship Skills

Leads by example

Engages and empowers team members

Actively listens and practices three-way communication

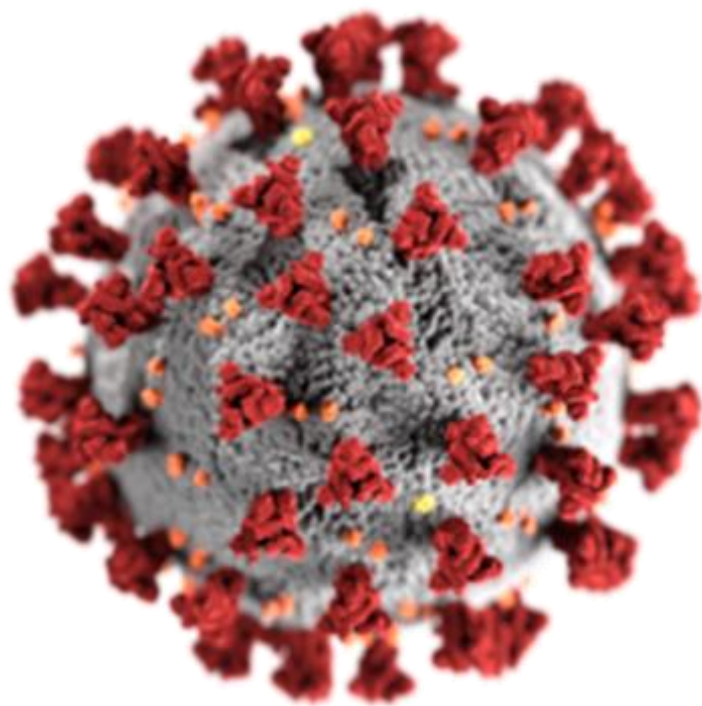
DEvelops team members through teaching, coaching, & feedback

Recognizes team members for a job well done

MHFA
2020



MHFA
2020



Regulatory Mandate



OSHA's Form 300 (Rev. 01/2004)
Log of Work-Related Injuries and Illnesses

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

You must record information about every work-related death and about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, lost work time, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR Part 1904 through 1904.12. You have to use this form for a single establishment. You must complete an injury and illness record for each injury or illness incident on this form.

U.S. Department of Labor
Occupational Safety and Health Administration
Form approved 10/28/04

Year 20____

OSHA's Form 300A (Rev. 01/2004)
Summary of Work-Related Injuries and Illnesses

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

U.S. Department of Labor
Occupational Safety and Health Administration
Form approved 10/28/04

Year 20____

OSHA's Form 301
Injury and Illness Incident Report

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

U.S. Department of Labor
Occupational Safety and Health Administration
Form approved 10/28/04

This Injury and Illness Incident Report is one of the first forms you must fill out when a recordable work-related injury or illness has occurred. Together with the Log of Work-Related Injuries and Illnesses and the accompanying Summary, these forms help the employer and OSHA develop a picture of the extent and severity of work-related incidents.

Within 7 calendar days after you receive information that a recordable work-related injury or illness has occurred, you must fill out this form or an equivalent. Some state workers' compensation, insurance, or other reports may be acceptable substitutes. To be considered an equivalent form, any substitute must contain all the information asked for on this form.

According to Public Law 91-596 and 29 CFR 1904, OSHA's recordkeeping rule, you must keep this form on file for 3 years following the year to which it pertains.

If you need additional copies of this form, you may photocopy and use as many as you need.

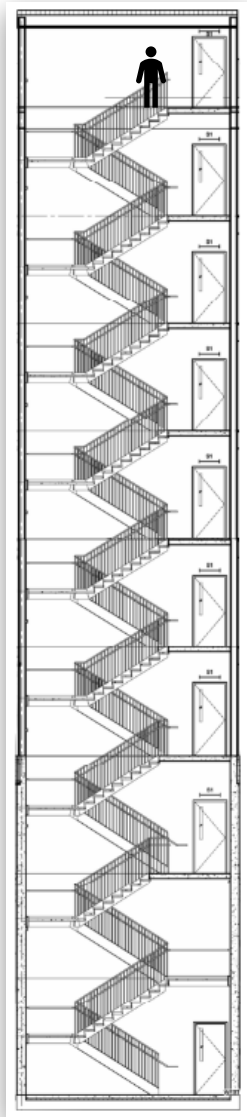
Completed by: _____
Title: _____
Phone: _____ Date: ____/____/____

Public reporting burden for this collection of information is estimated to average 20 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing this collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Washington, DC 20503. Do not send this collection of information to the office.



004:00:00

OSHA 29 CFR
1904.40(a)
Basic requirement.
When an authorized
government
representative asks for
the records you keep
under part 1904, you
must provide copies of
the records within four
(4) business hours.



00:09:59

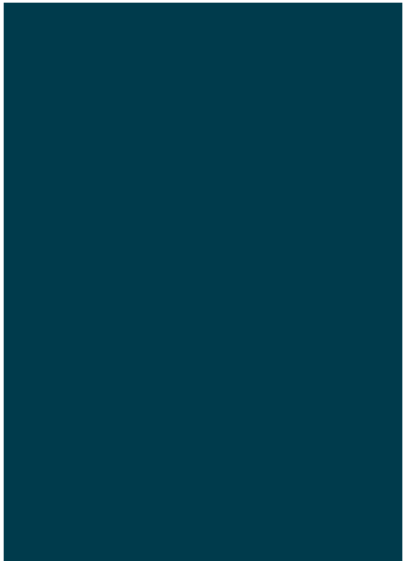
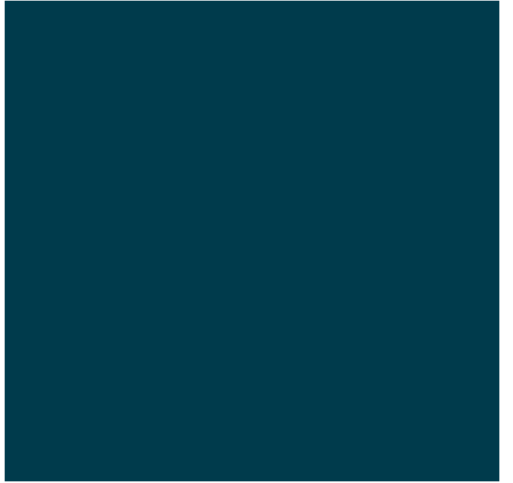


OSHA LOI 2/23/05
“....The purpose of
this standard is to
ensure that
employees will not
suffer the adverse
health effects that
can result if toilets
are not available
when employees
need them...”

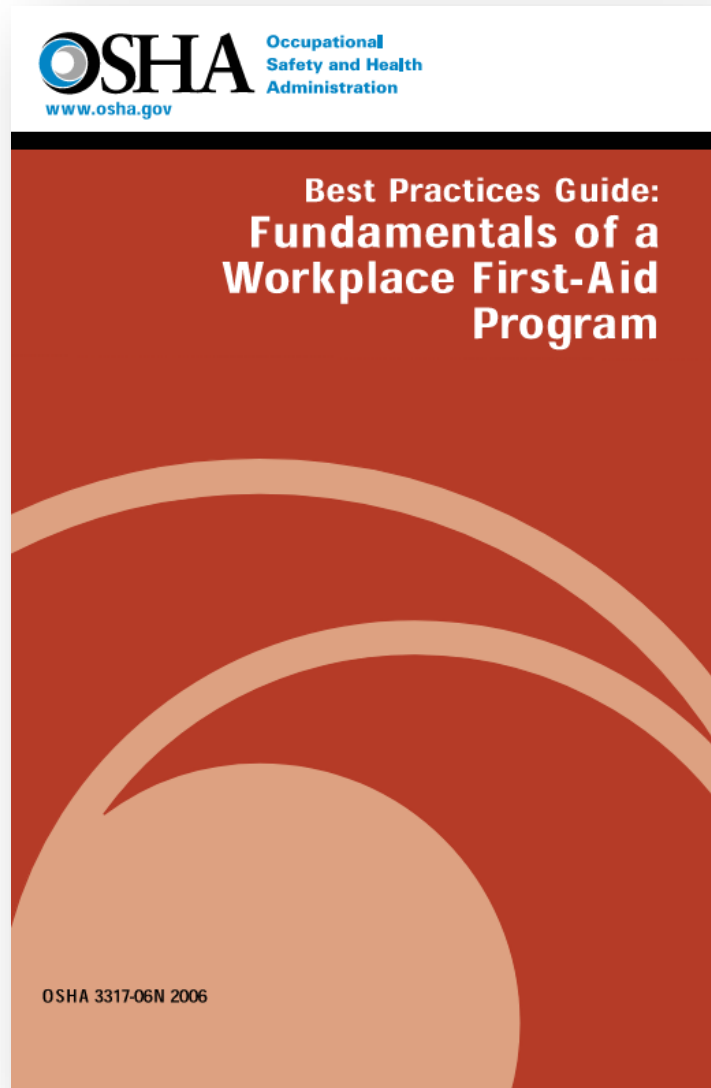


00:04:00

OSHA LOI 1/16/07
“...The basic purpose of these standards is to assure that adequate first aid is available in the critical minutes between the occurrence of an injury and the availability of physician or hospital care for the injured employee...”



TIMING IS EVERYTHING



Introduction and Purpose

First aid is emergency care provided for injury or sudden illness before emergency medical treatment is available. The first-aid provider in the workplace is someone who is trained in the delivery of initial medical emergency procedures, using a limited amount of

Introduction and Purpose

First aid is emergency care provided for injury or sudden illness before emergency medical treatment is available. The first-aid provider in the workplace is someone who is trained in the delivery of initial medical emergency procedures, using a limited amount of equipment to perform a primary assessment and intervention while awaiting arrival of emergency medical service (EMS) personnel.

2006

- Assigns and trains first-aid providers who:
 - receive first-aid training suitable to the specific workplace
 - receive periodic refresher courses on first-aid skills and knowledge.

¹ CSP 03-01-002 - TED 8.4 - Voluntary Protection Programs (VPP): Policies and Procedures Manual Notice, 54 Federal Register 3904-3916. Available at www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=DIRECTIVES&p_id=2976

Behavioral Health



TIMING IS EVERYTHING

OSHA INSTRUCTION

U.S. DEPARTMENT OF LABOR

Occupational Safety and Health Administration

DIRECTIVE NUMBER: CPL 02-00-135 **EFFECTIVE DATE:** December 30, 2004

SUBJECT: Recordkeeping Policies and Procedures Manual

ABSTRACT

Purpose: This Instruction transmits enforcement information and provides changes and additions to CPL 02-00-131/CPL 2-0.131 of January 1, 2002, Chapter 1; Paragraph V; Federal Program Changes and Chapter 5, Frequently Asked Questions on OSHA's recordkeeping regulations.

Scope: OSHA-wide

Cancellations: Paragraph C.2.n.(2)(b), and Paragraphs C.2.n.(3), (4), and (5)(a) in Chapter IV of OSHA Instruction CPL 2.103, Field Inspection Reference Manual (FIRM), September 26, 1994; Paragraph L.5. of OSHA Instruction CPL 2.106, Enforcement Procedures and Scheduling for Occupational Exposure to Tuberculosis, February 9, 1996; OSHA Instruction CPL 2.103, Field Inspection Reference Manual (FIRM), September 26, 1994; Paragraph E.6. of OSHA Instruction STD3-1.1, Clarification of Citation Policy, June 22, 1987; and OSHA Instruction STP 2-1.173, Final Rule on Reporting of Fatality or Multiple Hospitalization Incidents, June 7, 1994.
OSHA Instruction CPL 02-00-131 of January 1, 2002.

References: All 29 CFR Part 1904 SAVES of OSHA Instruction CPL 2.35, CH-1 and CH-5, Regulatory and General Industry SAVES, September 1, 1979; OSHA Instruction CPL 2.80, Handling of Cases to be Proposed for Violation-by-Violation Penalties, October 21, 1990; OSHA Instruction CPL 2.103, Field Inspection Reference Manual (FRIM), September 26, 1994; OSHA Instruction CPL 2.111, Citation Policy for Paperwork and Written Program Requirement Violations, November 27, 1995; and OSHA Instruction CPL2-2.33, 29 CFR 1913.10, Rules of Agency Practice and Procedure Concerning OSHA Access to Employee Medical Records- Procedures Governing Enforcement Activities, February 8, 1982.

State Impact: State adoption is required in part. See Chapter 1, Paragraph V.

Action Offices: National, Regional, Area Office, and State Plan States

Enforcement Date: See Chapter 1, Paragraph IX



12/30/04

CPL 02-00-135

- “Privacy case”
- Exemption from presumption of work relatedness unless worker voluntarily presents a medical opinion establishes work relatedness
- Q-12

Regulatory mandate - none

Signs and Symptoms | Resources



Suicide



 DIMEO

WARNING SIGNS OF SUICIDE:

The behaviors listed below may be some of the signs that someone is thinking about suicide.

TALKING ABOUT:



- ▷ Wanting to die
- ▷ Great guilt or shame
- ▷ Being a burden to others

FEELING:



- ▷ Empty, hopeless, trapped, or having no reason to live
- ▷ Extremely sad, more anxious, agitated, or full of rage
- ▷ Unbearable emotional or physical pain

CHANGING BEHAVIOR, SUCH AS:



- ▷ Making a plan or researching ways to die
- ▷ Taking dangerous risks such as driving extremely fast
- ▷ Withdrawing from friends, saying goodbye, giving away important items, or making a will
- ▷ Displaying extreme mood swings
- ▷ Eating or sleeping more or less
- ▷ Using drugs or alcohol more often

If these warning signs apply to you or someone you know, get help as soon as possible, particularly if the behavior is new or has increased recently.

988 Suicide & Crisis Lifeline
Call or text 988
Chat at 988lifeline.org

Crisis Text Line
Text "HELLO" to 741741



www.nimh.nih.gov/suicideprevention

NIMH Identifier No. OM 22-4316

Talking about:

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- Being a burden to others

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988 Suicide & Crisis **LIFELINE**

**Dial 988 for
24/7
emotional
support
anywhere
in the U.S.**



Call 988



Text 988



Visit 988lifeline.org/chat



to reach a caring counselor.

WHAT IS 988?

The 988 Lifeline is a national network of local crisis centers that provides free and confidential emotional support to people in a suicidal crisis or emotional distress 24 hours a day, 7 days a week in the United States.

What Happens When You Call The 988 Lifeline?

First, you'll hear an automated message featuring additional options while your call is routed to your local 988 Lifeline network crisis center.

We'll play you a little music while we connect you to a skilled, trained crisis worker.

A trained crisis worker at your local center will answer the phone.

This person will listen to you, understand how your problem is affecting you, provide support, and get you the help you need.

**988 Lifeline Center calls
are free and confidential,
and we're available 24/7.**



[ABOUT US](#) ▾[GET HELP](#) ▾[GET INFORMED](#) ▾[GET INVOLVED](#) ▾[DONATE NOW](#)[PLEDGE TO STAND UP](#)[CALENDAR](#)

NEEDS ANALYSIS

**Needs Analysis &
Implementation Tool**

**Herramienta de análisis de
necesidades e implementación**

This **Needs Analysis & Implementation Tool** was developed by the Construction Industry Alliance for Suicide Prevention (CIASP) to aid companies in evaluating how they address mental health and suicide prevention in the construction workplace. It will also help determine how prepared they and their employees are to handle a mental health or suicide crisis.

Preventing Suicide in the Construction Industry

July 13, 2022



TRAINING

[Request a LEARN Training](#)

[Fundamentals of Community-Based Suicide Prevention](#)

[Health Care Providers](#)

[Pharmacy Professionals](#)

[Best Practices for Workplace Suicide Prevention](#)

Construction Industry

[Washington Firearm Retailers](#)

[Veterinary Professionals](#)

[Suicide Prevention Training for First Responders](#)

[Suicide Prevention and Older Adults](#)

ADDITIONAL RESOURCES

[988 Community Education and Awareness Toolkit \(ny.gov\)](#)

<https://www.naminh.org/suicide-prevention/>

<https://zerosuicide.edc.org/>

If you or someone you know is struggling emotionally, please reach out and get support:

- [Veterans Crisis Line](#) – Veterans and their loved ones can call 988 and Press 1, [chat online](#), or send a text message to 838255 to receive confidential support 24 hours a day, 7 days a week, 365 days a year. Support for [deaf and hard of hearing](#) individuals is available.
- [Crisis Text Line](#) – Free, 24/7 support for those in crisis. Text 741741 from anywhere in the US to text with a trained Crisis Counselor.
- [The National Maternal Mental Health Hotline](#) provides free 24/7 confidential support, resources and referrals to pregnant and postpartum mothers facing mental health challenges (and their loved ones). Call or text 1-833-TLC-MAMA (1-833-852-6262).
- [Trans Lifeline](#) – Call 1-877-565-8860 for a hotline staffed by transgender people for transgender people. Trans Lifeline volunteers are ready to respond to whatever support needs community members might have.
- [Disaster Distress Helpline](#) – Call 1-800-985-5990 for a 24/7 national hotline dedicated to providing immediate crisis counseling for people who are experiencing emotional distress related to any natural or human-caused disaster.
- [The Trevor Project](#) – A national 24-hour, toll free confidential suicide hotline for LGBTQ youth. If you are a young person in crisis, feeling suicidal, or in need of a safe and judgment-free place to talk, call 1-866-488-7386 to connect with a trained counselor.
- [The LGBT National Help Center](#) – Call 1-888-843-4564. Open to callers of all ages. Provides peer-counseling, information, and local resources.

Substance Use Disorder



What are the signs of a substance use disorder?

According to the American Psychiatric Association's [*Diagnostic and Statistical Manual of Mental Disorders*](#), the signs of substance use disorder include:

- Taking the substance in larger amounts and for a longer amount of time than you're meant to if it's a prescription.
- Having a strong desire or urge to use the substance.
- Having unsuccessful efforts to cut down on or manage substance use.
- **Spending a lot of time obtaining or using the substance or recovering from its effects.**
- **Having issues fulfilling responsibilities at work, school or home due to substance use.**
- Continuing to use the substance, even when it causes problems in relationships.
- **Giving up social, occupational or recreational activities because of substance use.**
- Using substances again and again, even when it puts you in danger.
- Continuing substance use despite an ongoing physical or psychological problem that's likely caused or worsened by the substance.
- Developing tolerance (need for increased amounts to get the same effect).
- Experiencing withdrawal symptoms, which can be relieved by taking more of the substance.

Seeking medical care as soon as you have signs of substance use disorder is essential.

How does a substance use disorder develop?

Studies found that many factors may be involved in the development of an SUD. These could include:

- Social pressure.
- Curiosity of substance effects.
- Performance enhancement (to do better at work or school).
- **Emotional escape (like relief from stress, anxiety, trauma, fear or depression).**

The progression to a substance use disorder often follows this pattern:

- **Experimental use (or prescription use):** Trying a substance once or using the substance as directed.
- **Occasional use:** Taking a substance socially or using prescriptions not as directed.
- **Heavy use:** Taking a substance routinely, with few to no days off of the substance.
- **Substance use disorder:** You take the substance daily or multiple times daily. There are rarely times when you're not using a substance.

This is just an example, as this condition looks very different and ranges in severity from person to person.

Can substance use disorder be prevented?

You can't prevent all cases of substance use disorder because there are a lot of factors (many of which are outside of your control) that could play a role in how the condition develops. However, you can take steps to reduce your risk.

Education in schools, communities and families may reduce your risk of using a substance or misusing a prescription medication for the first time. Other ways to prevent SUD include:

- **Following instructions for prescription medications. Don't take more than instructed. Opioid use disorder, for instance, can start after just five days of misuse.**
- **Never sharing your prescription medication with someone else or selling your medication. Always store it in a safe place away from children.**
- **If you have leftover prescription medications (like opioids) at the end of your treatment, find a community drug take-back program or pharmacy mail-back program to safely dispose of them.**

The risk of substance use increases during times of stress and change. For an adult, a divorce, loss of a job or death of a loved one may increase the risk of substance use. For a teenager, moving, family divorce or changing schools can increase their risk. It's important to turn to healthy coping mechanisms during these times of change, like exercising, meditating or learning a new hobby. Consider seeing a mental health professional if you're having difficulty managing stress.



FARNUM PARTNERS WITH CMC TO OFFER 24/7 DOORWAY COVERAGE



Substance use treatment services available after hours and on weekends

Published 2/6/2023

Catholic Medical Center (CMC), the state-contracted provider of The Doorway of Greater Manchester, has partnered with Easterseals NH Farnum to be the Extended Doorway. Individuals seeking immediate substance use treatment services for themselves, patients or loved ones can now access care in Manchester after hours and throughout the weekend.

CMC's Extended Doorway is open at Farnum from:

- 5 PM to 8 AM Monday through Friday
- 5 PM Friday through 8 AM Monday and on holidays

Services can be accessed by calling Farnum directly at 603.622.3020, visiting Farnum's 140 Queen City Avenue location or calling the state's 2-1-1 number.

"The Extended Doorway gives people in substance use crisis an immediate entry-point to care, no matter the day or time," said Tim Soucy, CMC Vice President of Mission Integration. "We're pleased to partner with Farnum to extend The Doorway's hours."

"As the Extended Doorway for Catholic Medical Center, we are able to catch people at the peak of their motivation to get help," said Annette Escalante, Farnum Senior Vice President. "They're not having second thoughts because it's 2 AM on a Friday and there's no one to call. They can access care right when they need it. We'll pick up the phone and answer the door. We're here to help."

When someone connects with Farnum through the Extended Doorway, staff will work with The Doorway to provide case management and care coordination to eligible individuals. The Doorway of Greater Manchester, located at 60 Rogers Street, suite 210, is open Monday through Friday, 8 AM to 5 PM and can be reached at 603.606.1090 or by calling 2-1-1.


In addition to being Catholic Medical Center's Extended Doorway, Farnum provides after-hours access to respite beds for the statewide Doorway programs through 2-1-1.

Through its contract with CMC and funding from other partners, Farnum is expanding its impact for people in recovery. Recently, the treatment center was awarded funds from the State of New Hampshire to provide medically monitored withdrawal management services to individuals with low incomes, regardless of insurance status.


But ... Keep hope alive




The Time Might be Right ...

 U.S. DEPARTMENT OF LABOR

Occupational Safety and Health Administration

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CONSTRUCTION INDUSTRY

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Compliance ▼

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ACCSH ▼

Other Resources ▼

About DOC ▼



Contact Us

Directorate of Construction

Timothy Irving, Director (Acting)

- [DOC Staff](#)

Contact Us

U.S. Department of Labor/OSHA - DOC
200 Constitution Ave., N.W., Room N3468
Washington, DC 20210
Ph: 202-693-2020
Fax: 202-693-1689

Things we can do

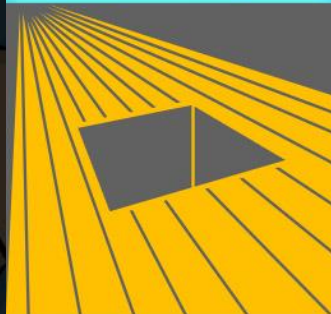


Foundations for Safety Leadership

Introduction



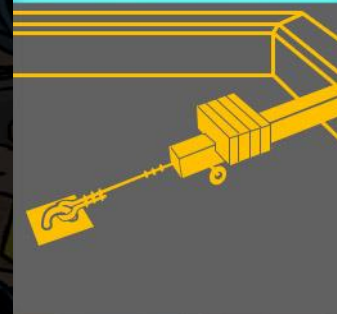
Cover Up!



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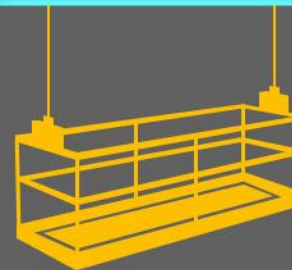
Gimme Space



The Right Tool



Do We Have To?



Fritz's Shortcut



5 *LEADER*ship Skills

Leads by example

Engages and empowers team members

Actively listens and practices three-way communication

DEvelops team members through teaching, coaching, & feedback

Recognizes team members for a job well done

Foundations for Safety Leadership

55



Actively listen

How to Actively listen and Practice 3-way Communication

- Treat team members with respect when they are speaking
- Pay attention to non-verbal cues such as body language and eye contact
- Listen to **hear** what is being said vs. to come up with a response.
- Ask clarifying questions

Foundations for Safety Leadership

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**How To
Develop Team
Members
through
Teaching,
Coaching, and
Feedback**

*Use the **FIST** Principle:*

Describe the	<u>F</u>ACTS
Explain the	<u>I</u>MPACT
Provide	<u>S</u>UGGESTIONS
Be	<u>T</u>IMELY



How to Recognize Team Members for a Job Well Done

- Give recognition separately from other types of feedback
- Regularly give praise in private
- Be specific about why you are praising the person
- Give praise publically if the person is comfortable with it

First Aid Training



Psychological First Aid

■ Core Actions

Psychological First Aid Core Actions

1. Contact and Engagement

Goal: To respond to contacts initiated by survivors, or to initiate contacts in a non-intrusive, compassionate, and helpful manner.

2. Safety and Comfort

Goal: To enhance immediate and ongoing safety, and provide physical and emotional comfort.

3. Stabilization (if needed)

Goal: To calm and orient emotionally overwhelmed or disoriented survivors.

4. Information Gathering: Current Needs and Concerns

Goal: To identify immediate needs and concerns, gather additional information, and tailor Psychological First Aid interventions.

5. Practical Assistance

Goal: To offer practical help to survivors in addressing immediate needs and concerns.

6. Connection with Social Supports

Goal: To help establish brief or ongoing contacts with primary support persons and other sources of support, including family members, friends, and community helping resources.

7. Information on Coping

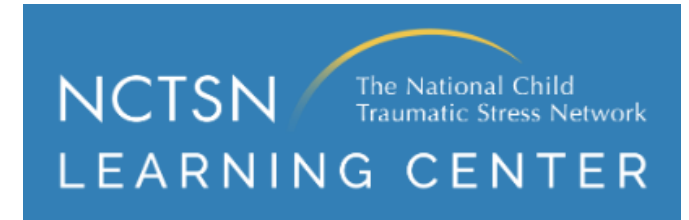
Goal: To provide information about stress reactions and coping to reduce distress and promote adaptive functioning.

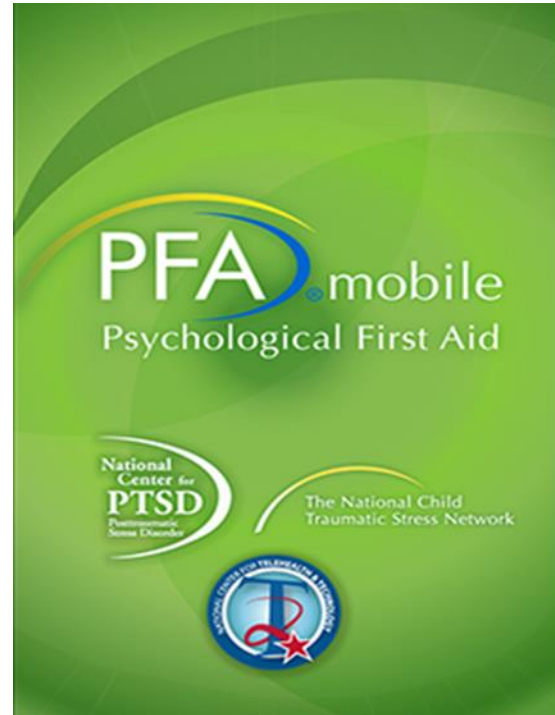
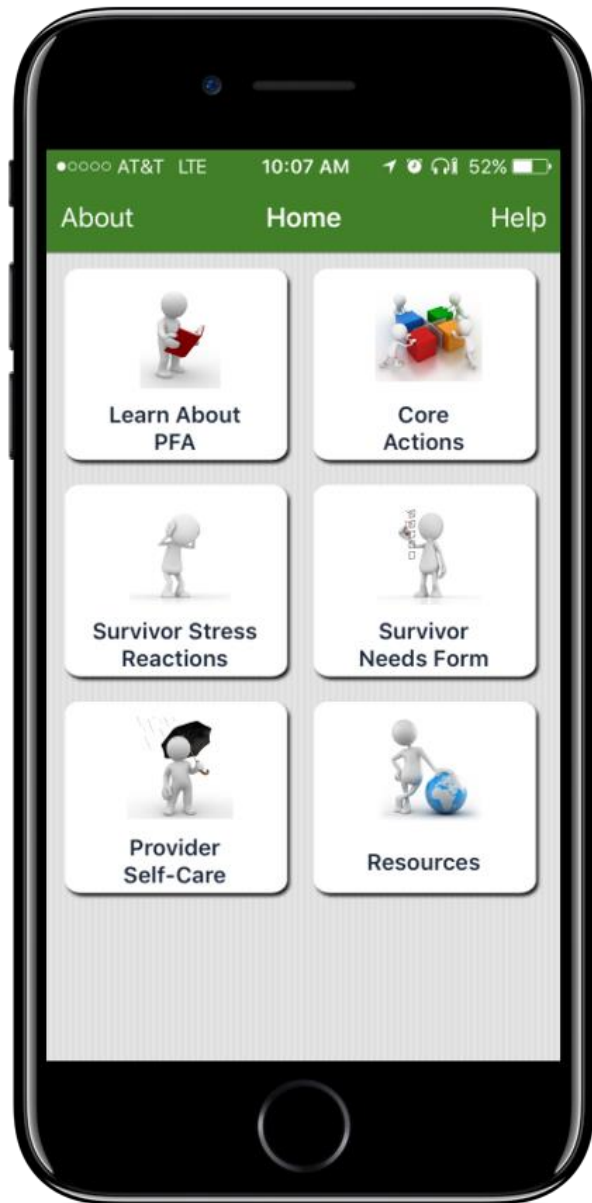
8. Linkage with Collaborative Services

Goal: To link survivors with available services needed at the time or in the future.

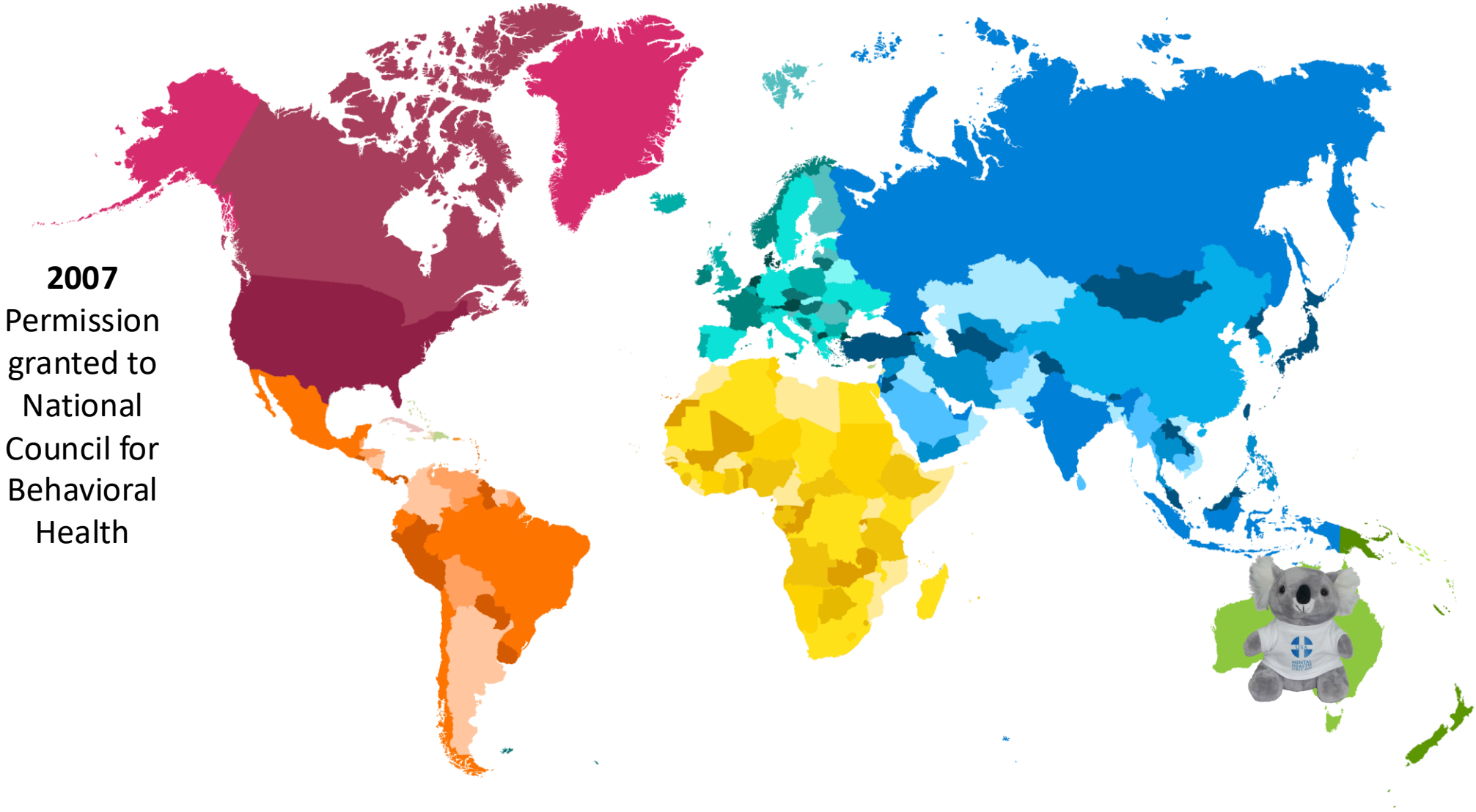
These core actions of Psychological First Aid constitute the basic objectives of providing early assistance within days or weeks following an event. Providers should be flexible, and base the amount of time they spend on each core action on the survivors' specific needs and concerns.

Online training





Mental Health First Aid™

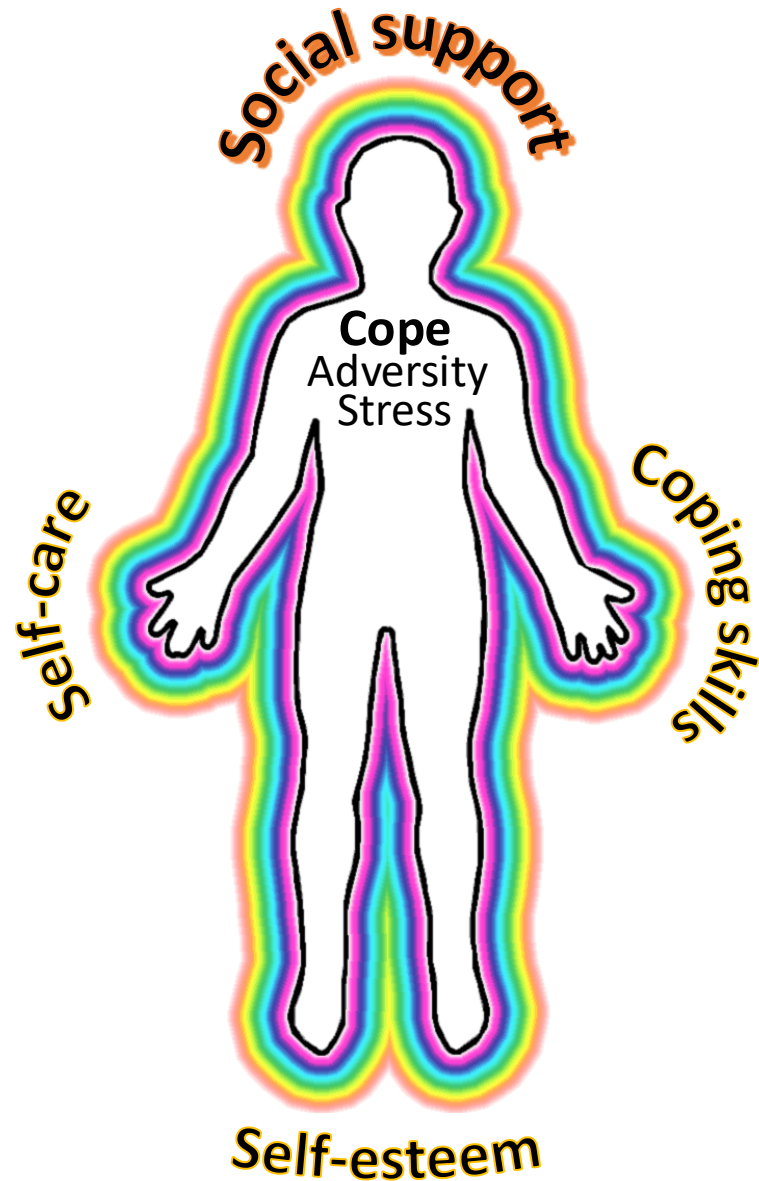


2007
Permission
granted to
National
Council for
Behavioral
Health

2001
Betty
Kitchener
and Anthony
Jorm

2002
First MHFA
Manual
Published

Provides information on how to assist people with mental health problems **mental health problems** is a broader term that includes both mental disorders and symptoms of mental disorders that may not be severe enough to warrant the diagnosis of a mental disorder



Coping usually involves adjusting to or tolerating negative events or realities while you try to keep your positive self-image and emotional equilibrium.

Self-care – The active practice of seeing to your own physical and mental health needs, particularly during or after a stressful event.

Self-esteem - People with healthy self-esteem feel good about themselves and life, and are able to handle life's ups and downs. They value their achievements and like themselves.

Self-help – The practice of improving yourself or coping with your own problems using resources and strategies you access on your own.



BEING FULLY
PRESENT

(active) EMPATHETIC
LISTENING

OPTIMISTIC
ATTITUDE

- Important for you to suspend judgment or biases
- Assess your own preconceived notions....
- Avoid premature conclusions based on your life experiences
- Help them can better understanding
- Permit them to retain ownership of the challenge
- Show them that you are listening without judgment

MENTAL HEALTH FIRST AID **ACTION PLAN**

Approach the person, assess and assist with any crisis

Listen and communicate non-judgementally

Give support and information

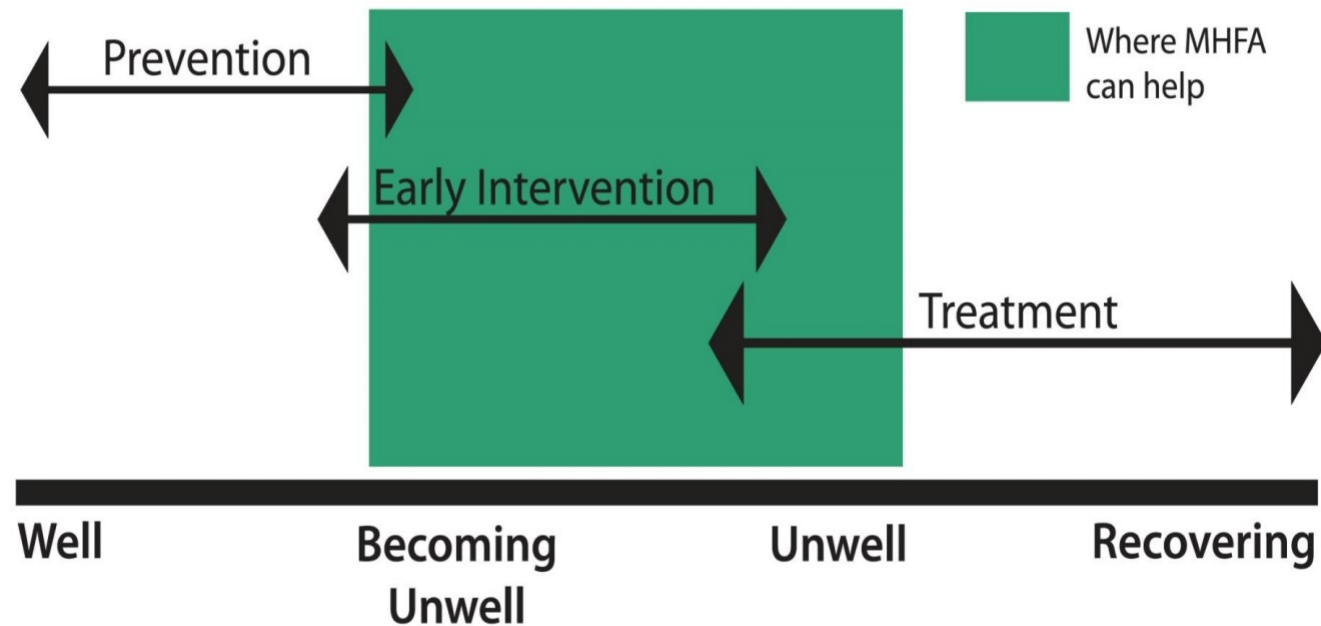
Encourage the person to get appropriate professional help

Encourage other supports



**MENTAL
HEALTH
FIRST AID**
Australia

Spectrum of Mental Health Interventions



Spectrum of mental health interventions from wellness to mental disorders and through to recovery, showing the contribution of MHFA

RESEARCH HAS SHOWN THAT **MHFA TRAINING IS ASSOCIATED WITH:**



KNOWLEDGE

Improved knowledge of mental illnesses, their treatments and appropriate first aid strategies.



CONFIDENCE

Confidence in providing first aid to a person experiencing a mental health problem.



DE-STIGMATISING

Decreases in stigmatising attitudes.



INCREASED SUPPORT

Increases in the amount and type of support provided to others.

Collaboration - Associations





CONSTRUCTION SAFETY

CONSCIOUSNESS | ALIGNMENT | RESPECT | EMPOWERMENT

The Bright Idea

After 5 years of pursuing a misplaced initiative to align individual company procedures and programs that workers would use

We committed to a paradigm shift Address the needs of the workforce through a **shared** message, outreach initiative, and feedback loop.

At the core, we are changing the industry not our individual companies.



Our Shared Values

Safety is a shared responsibility, **not a differentiator**

Safety is about improving the jobsite experience to ensure physical wellness and mental well-being

... empowering the workforce to advocate and drive the results they deserve to see, on all our sites (forward / upward accountability).



Blue Sky It

What do you include in a **shared** orientation?

What are the most basic components of safety that we can agree on?

Is this more than an orientation?

How do we pay for it and who owns it?



CONSTRUCTION SAFETY
CONSCIOUSNESS | ALIGNMENT | RESPECT | EMPOWERMENT

What are the Pillars?



Consciousness

- Huddles, self-awareness, situational awareness



Alignment

- Shared orientation, employer onboarding, training verification



Respect

- Belonging. TWH, mental/behavioral health, reduce stigma



Empowerment

- Speak up for safety and the working mind, leadership, timely feedback, open communication

Cascading the shared message ...

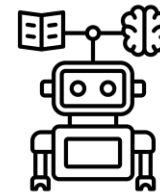
RFP for **Shared** Orientation Video

- Knowledge of construction
- Experience with safety orientations
- Creative vision and scheduling
- WBE



RFP for Software Platform with shared database

- Worker enrollment with privacy controls
- Training credential database
- Orientation video with knowledge checks
- Ability to open API and integrate with other platforms

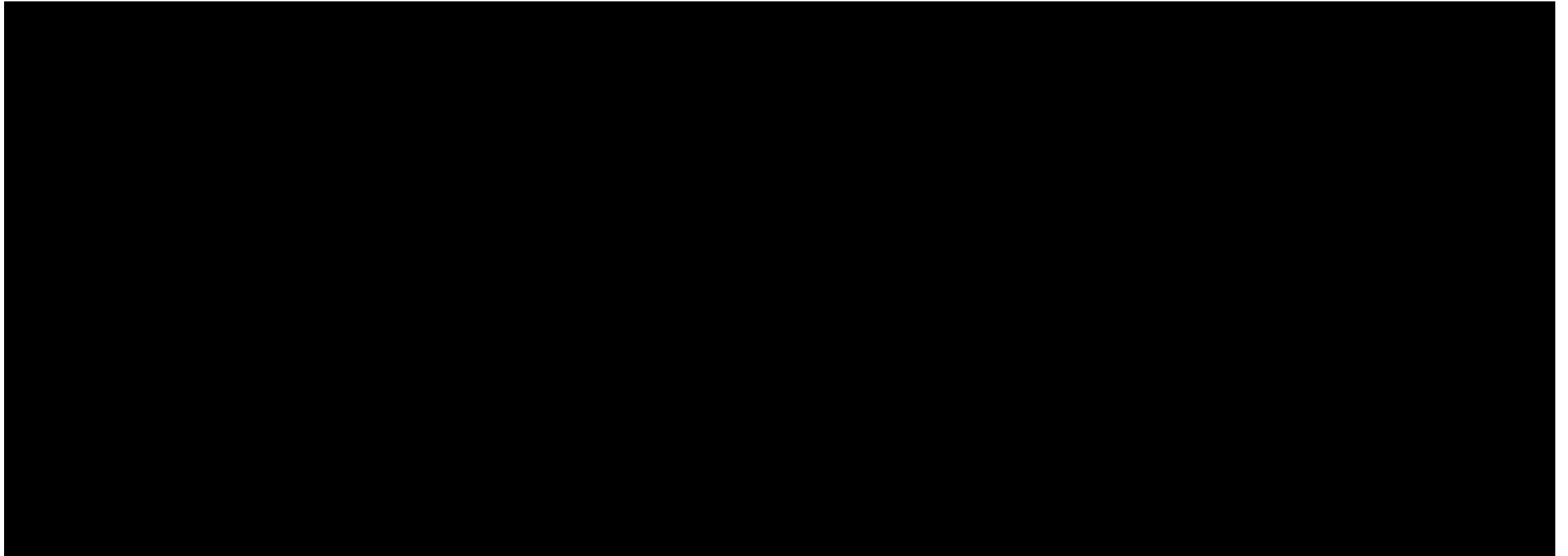


Translation

... a snippet



CONSTRUCTION SAFETY
CONSCIOUSNESS | ALIGNMENT | RESPECT | EMPOWERMENT



CARE Construction Safety Program Steering Committee



CONSTRUCTION SAFETY
PROGRAM



CORDERMAN
& COMPANY



DELLBROOK JKS



DIMEO

ERLAND

Gilbane



LEE KENNEDY
CONSTRUCTION SAFETY

MORIARTY



SHAWMUT

WALSH BROTHERS
CONSTRUCTION SAFETY



W.T. HULSE CONSTRUCTION

ASTIGS

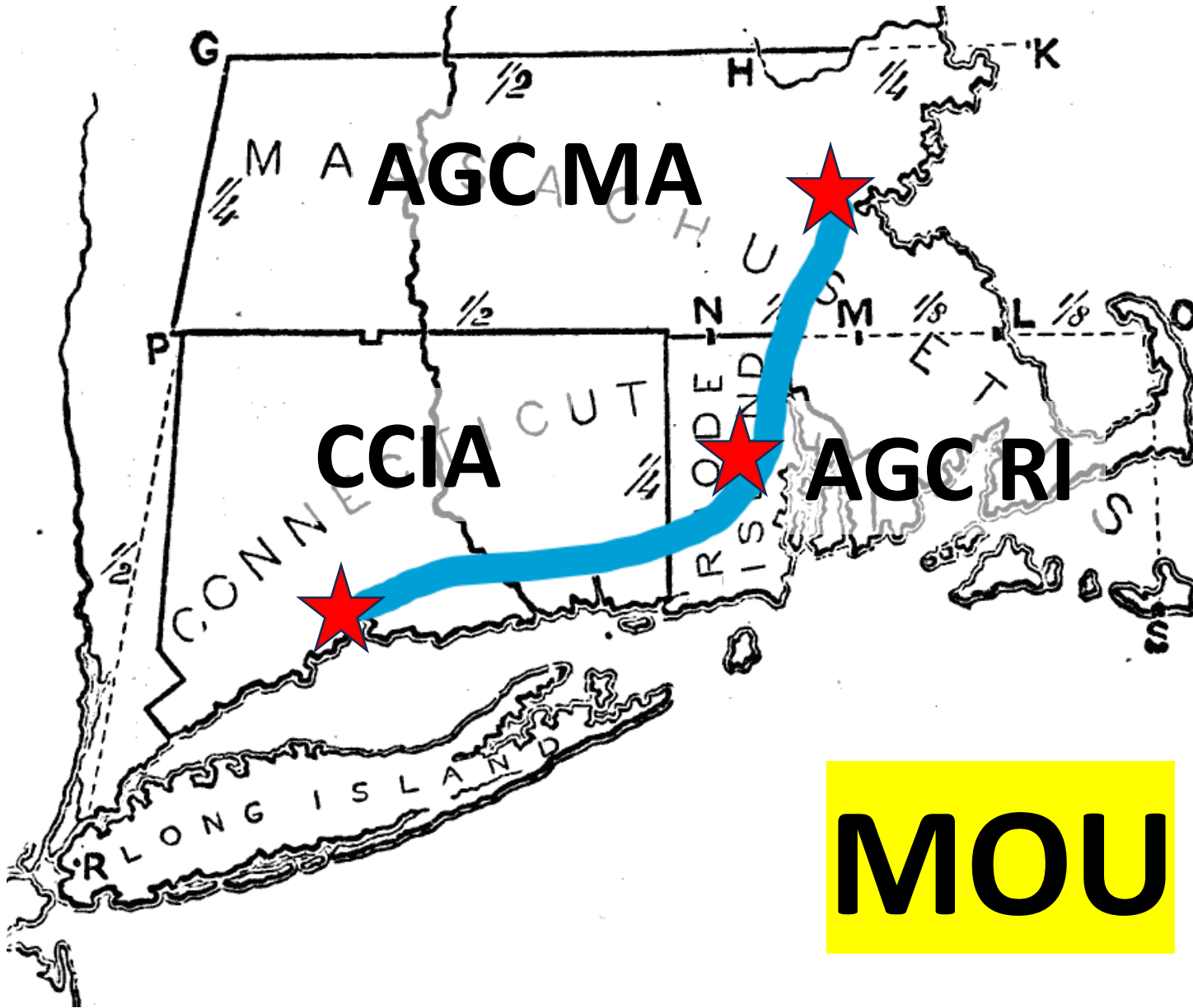


PepTalk



Collaboration – Mgt Labor





MOU



New Haven
Building
Trades

Campaigns

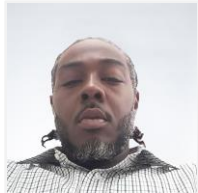


Introduction

Setup

- Interns were asked to present a 5-minute weekly toolbox talk to the DCC project team, project subcontractor crew leaders, and Blakely Builders crew
- They created a Toolbox Talk and 1-minute video supporting their toolbox talks
- Topic: Mental Health Awareness in the Construction Industry

Resources



William Williams

Safety Intern

William spent 5 years as a union Ironworker and is currently a senior at RI College pursuing degrees in Psychology and Behavioral Health Studies. He worked with interns during the challenge period.



Bob Kunz

Corporate Safety Director

Developed and managed the challenge and served as an additional resource.



Michael Currier, LICSW

Guest Speaker

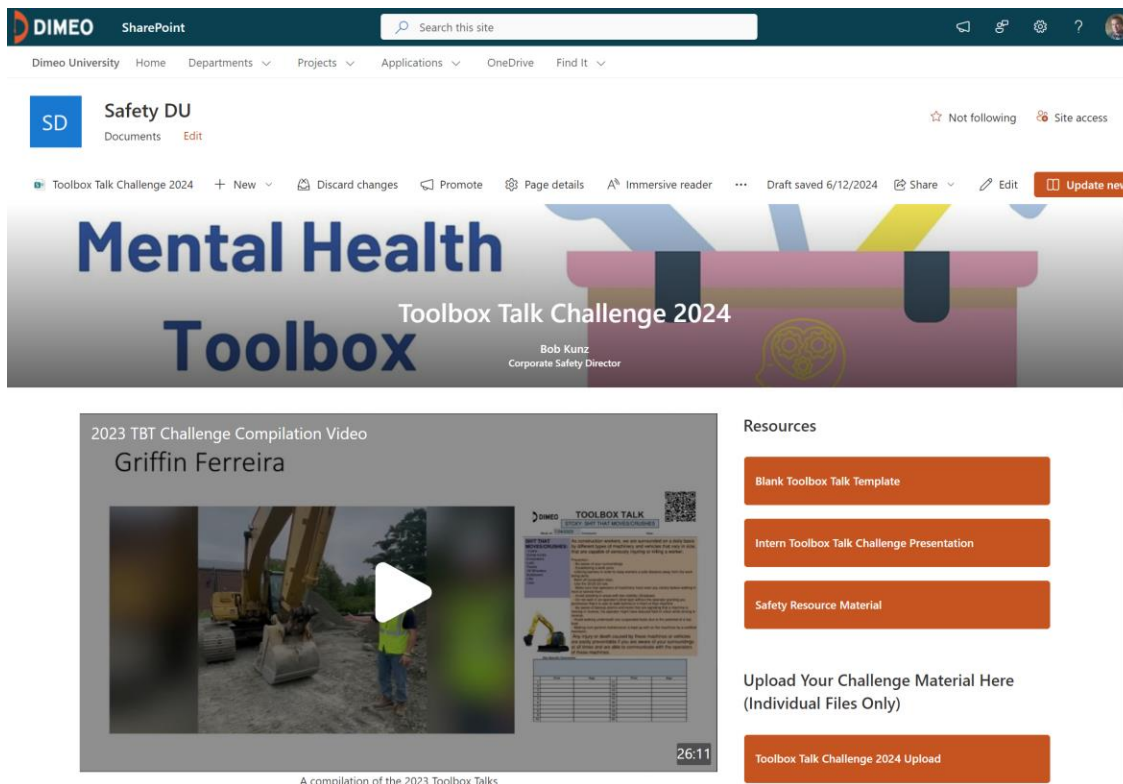
Provided a 60-minute "Intro to Mental Health/Substance Use Disorder in the Construction Industry" and opioid overdose signs/symptoms and response training at the Intern Kickoff Meeting as a starting point for the challenge.



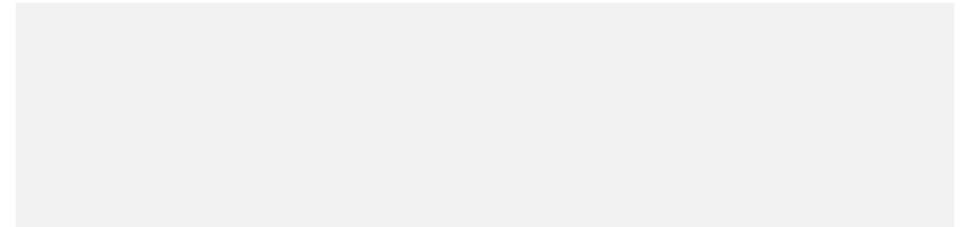
Michael Currier of Building Futures RI
May 31, 2024

Executing the Challenge ...

- Intranet – A SharePoint post was developed for resource sharing and submission uploading
- Dedicated resource - William Williams developed topical resources and was available to interns
- Community – The interns worked together and with project teams to complete the challenge



SharePoint Resources



Refining the Message

Team Participation





TOOLBOX TALK

Taking Care of Yourself



Week of: 7/22/24

Contractor: _____

Date: _____

Independent thinking:

Do you take stress home from work with you?
What are some healthy ways you cope with stress and emotions?
What are some unhealthy ways you cope with stress and emotions?
Think about how you answer these questions. Think about how this stress isn't just impacting you, but the people around you, your friends, family, relationships or even your children. While you think you keep your feelings to yourself, your stress is maybe affecting the people around you.



grat-i-tude

noun

/grade tööd/

.... the quality of being thankful;
readiness to show appreciation
for and to return kindness

"She expressed her gratitude to
the committee for their support"

How can we cope with this stress?

Journaling is a fast and convenient way to help get out your emotions. This allows you to vent your frustrations but also reflect on the positives in life. There is no one size fits all, find what works best for you. The act of writing this down and prioritizing can be key in relieving these stressors.

Reflect on the positives: Acknowledging what you're grateful for can set problems into perspective and shake off the unwanted emotions. This helps you find joy in your day to day life as well as show appreciation to where it is due.

Steps to begin journaling:

- 1) Dedicate a notebook or notes folder in your phone.
- 2) Find a time of day that would be best to do this (in your car after work, during lunch, etc...)
- 3) Start your entry with the date
- 4) Write down three things that are frustrating you, stressing you out, or bogging you down
- 5) Write down three things that you are grateful for

Other techniques: Letter of self advice, Weekly-Yearly-Life Goals, Lessons Learned ...

Site Specific Comments:

	Print	Sign		Print	Sign
1			11		
2			12		
3			13		
4			14		
5			15		
6			16		
7			17		
8			18		
9			19		
10			20		



DIMEO TOOLBOX TALK
Cultura del Cuidado: Cuidate a ti mismo

Week of: 7/22/24 Contractor: _____ Date: _____

Pensamiento independiente:
¿Llevas estrés del trabajo a tu casa?
¿Qué maneras no sanas utilizas para manejar el estrés y tus emociones?
¿Qué maneras no sanas utilizas para manejar el estrés y tus emociones?
Piensa de qué manera contestas estas preguntas. Y piensa en la manera en la que el estrés no solo te afecta a ti, sino a los demás, a tus amigos, familia, relaciones o hasta a tus hijos. Mientras tu piensas que no compartes tus sentimientos, tu estrés probablemente está afectando a quien está a tu alrededor.

Dictionary
gratitud
noun (feminine)
sentimiento que obligo a una persona a sentir el beneficio
que que otro le hace o le quiere hacer y a
compartirle de alguna manera

Reflexión en lo positivo:
Reconocer lo que agradeces puede proporcionarte una
perspectiva nueva de los problemas y quitarle emociones
negativas. Esto te ayuda a darle un toque positivo a tu día a
día y darle atención a aspectos que lo necesitan.

Pasos para llevar un diario:
1. Dedica un cuaderno o un espacio en notas de tu teléfono
2. Encuentra un horario que más te convenga en tu coche después del trabajo, hora del
lunch, etc...
3. Empieza cada entrada con la fecha
4. Escribe tres cosas que te están frustrando, estresando, o bajando el ánimo
5. Escribe tres cosas que agradeces

Otras Técnicas: Carta de auto consejo, Objetivos semanales mensuales anuales, lecciones aprendidas
Site Specific Comments:

	Print	Sign		Print	Sign
1			11		
2			12		
3			13		
4			14		
5			15		
6			16		
7			17		
8			18		
9			19		
10			20		

Pg 2 is a
bilingual
version of
the toolbox
talk

National Opportunities





Naloxone Awareness Training



Why are construction workers at risk?

- Almost a quarter of all overdose deaths in construction involve legal prescription painkillers given by doctors to help with pain.
- Construction work can be tough on our bodies, causing pain from injuries or just hard work. Doctors sometimes prescribe strong painkillers like OxyContin or Vicodin. But these medicines are dangerous if not used correctly.



How can we prevent or mitigate opioid use?

1

Create a pain management plan with your medical provider.

2

Request non-addictive pain medications.

3

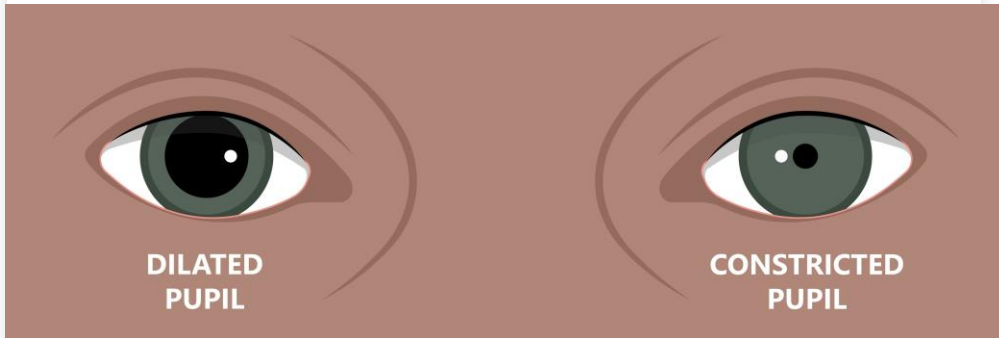
Request physical therapy/massage therapy or chiropractor

Signs of an overdose

Signs of an overdose may include:

- Not responding or being hard to wake up
- Breathing slowly or shallowly
- Lips or fingertips turning blue
- Very small “constricted” pupils
- Pale, sweaty skin
- Choking/gurgling sounds

It's important to act fast to save their life.



What is Naloxone (Narcan)?

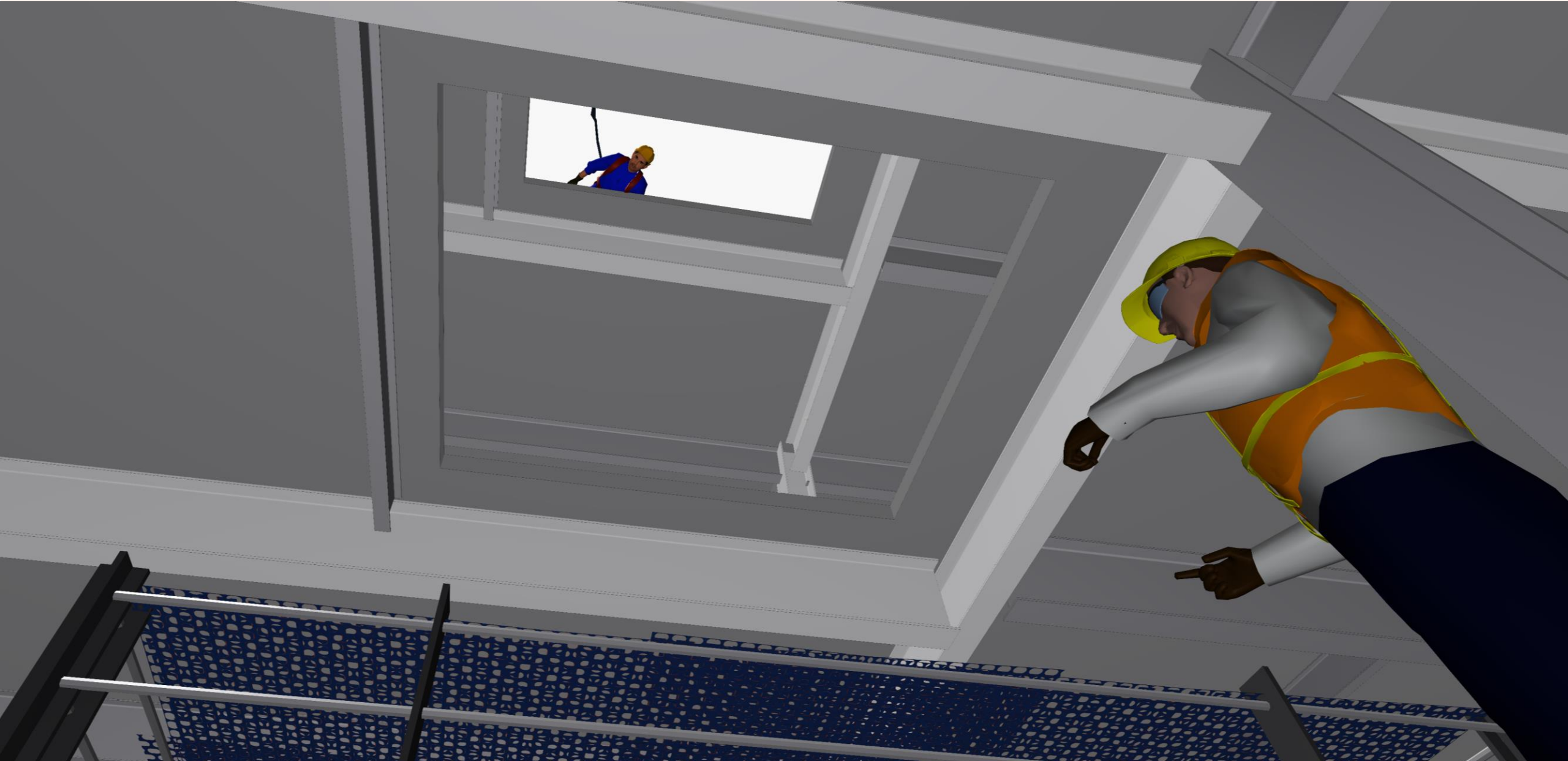
- Naloxone is an opioid antagonist that can reverse the effects of an opioid overdose. Usually available as a nasal spray medication.
- It works by blocking the effects of opiates on the brain and by restoring breathing. Naloxone will only work if a person has opiates in their system. It does not work for other drug induced overdoses.
- There are different brands of Naloxone. Narcan is a “brand” name of Naloxone.
- In most states, Naloxone nasal spray can be purchased over the counter at your local pharmacy.



Overdose Scenario – Site Conditions



Overdose Scenario – Nearby Worker Notices & Yells for Help



Overdose Scenario – Worker Overdoses



Overdose Scenario – Nearby Workers Provide Aid



Overdose Scenario – Site Conditions (Plan View)



Overdose Scenario – Dimeo Crew Notified & 911 Called



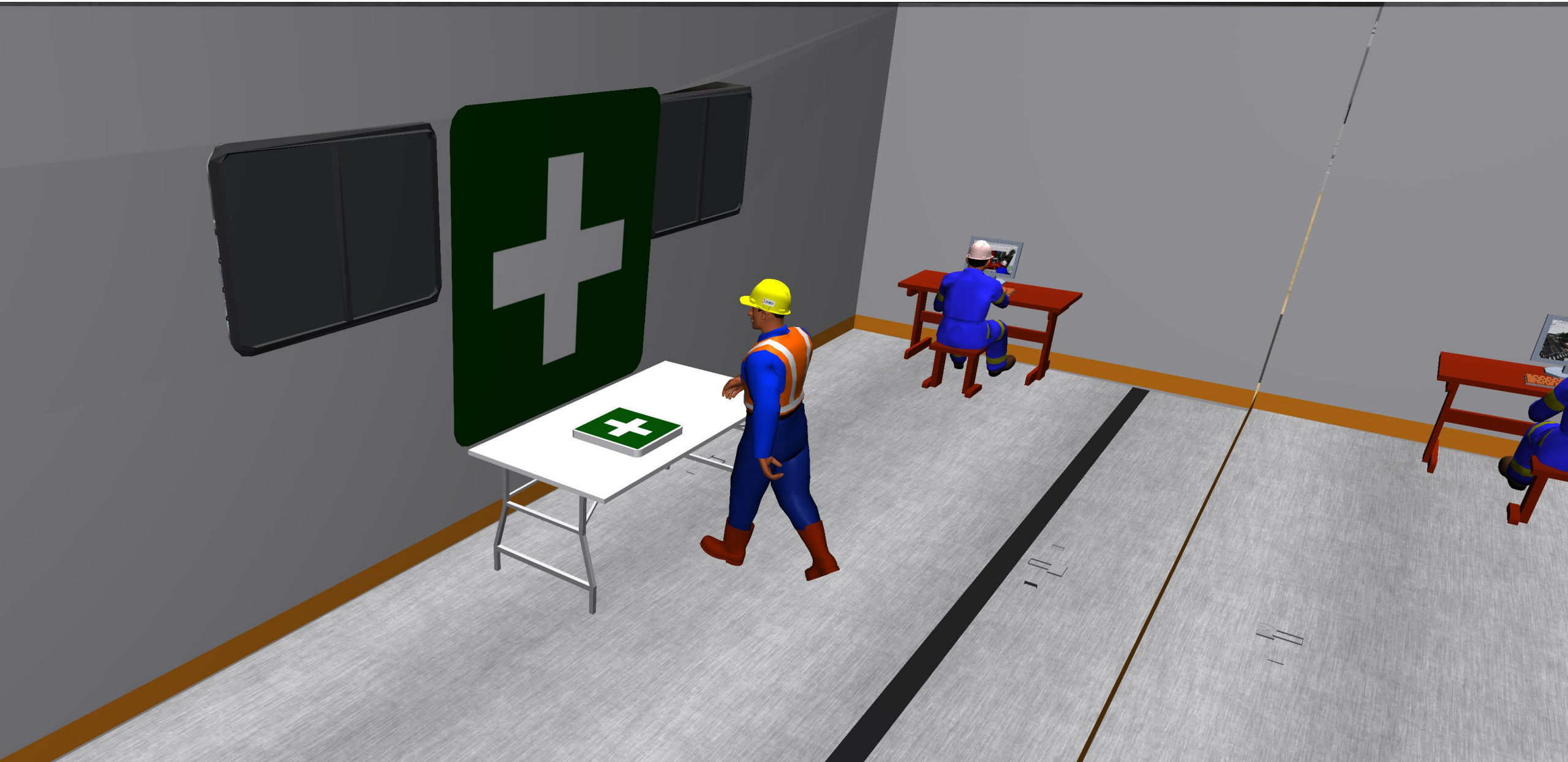
1:51
1:52
911 called

PC Overdose Scenario – Site Conditions (Plan View)

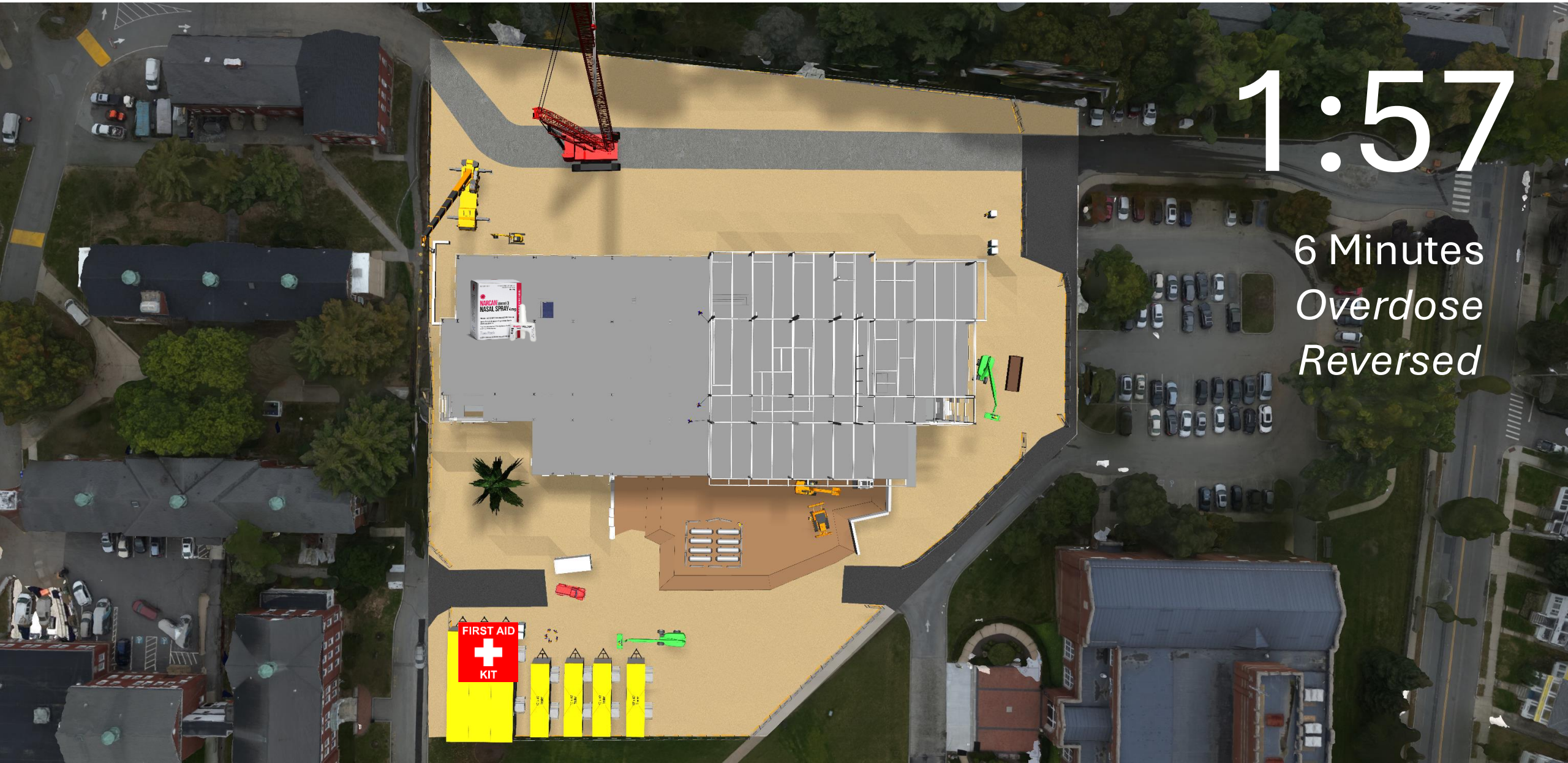


1:54

PC Overdose Scenario – Dimeo Employee Grabs First Aid Kit (Narcan)



Overdose Scenario – Site Conditions (Plan View)



1:57

6 Minutes
Overdose
Reversed

Overdose Scenario – Fall Protection Removed & Temp Ramp Built



Overdose Scenario – Providence Engine 2 Arrives



2:00

8 Minutes

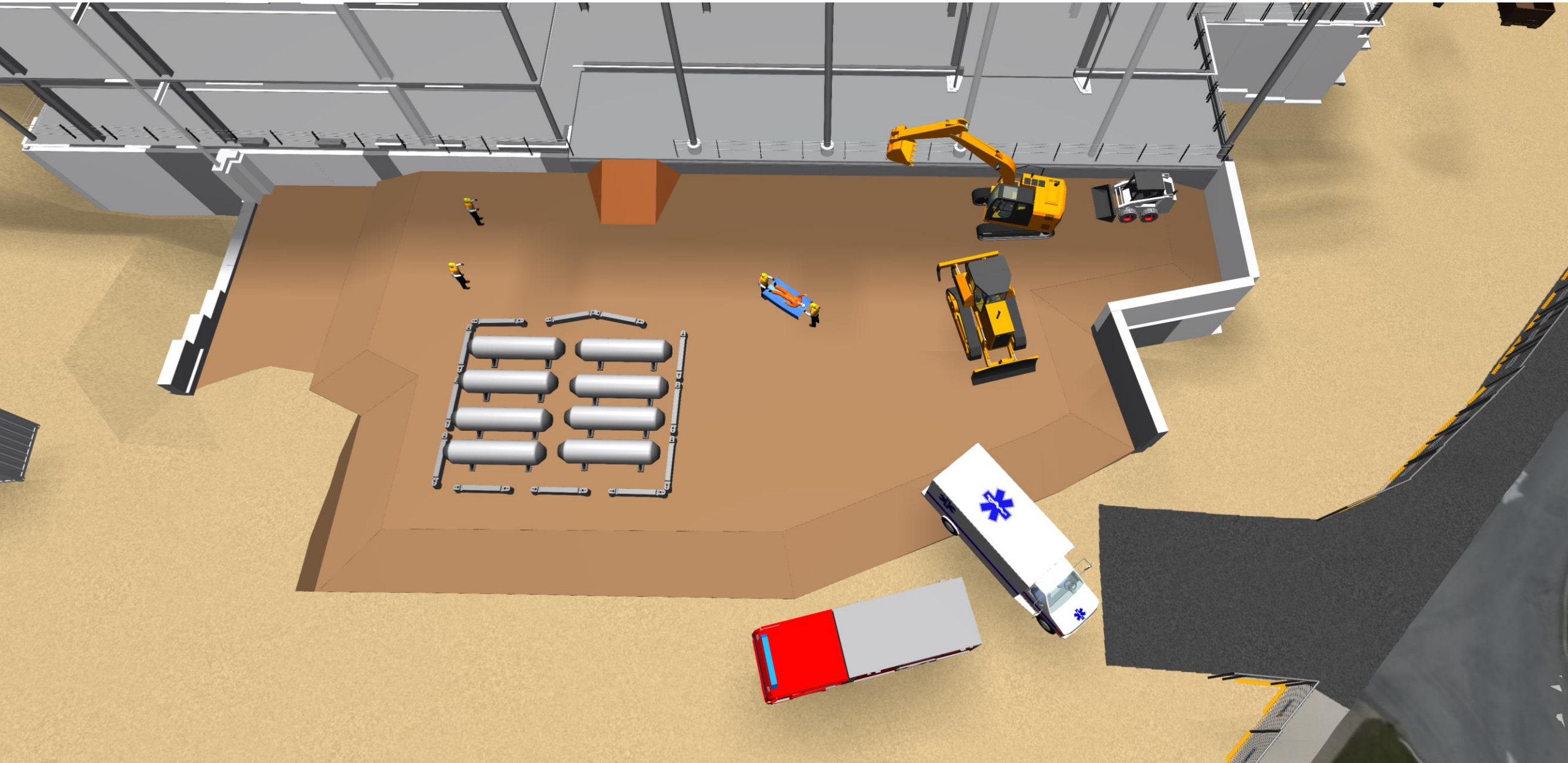
Overdose Scenario – Providence Engine 6 Arrives



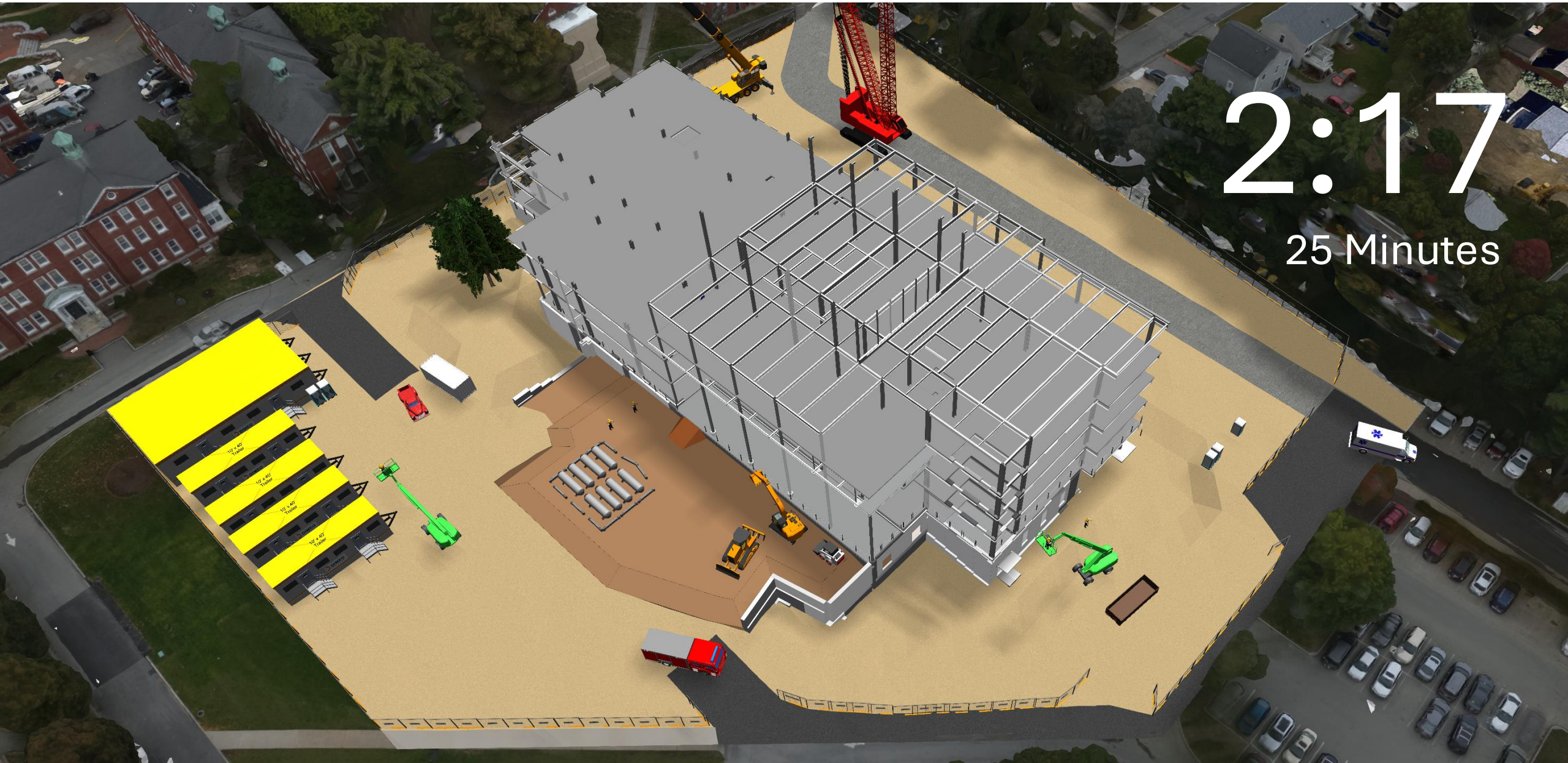
2:03

11 Minutes

Overdose Scenario – Transporting Worker to Ambulance



Overdose Scenario – First Responders Leaving Site

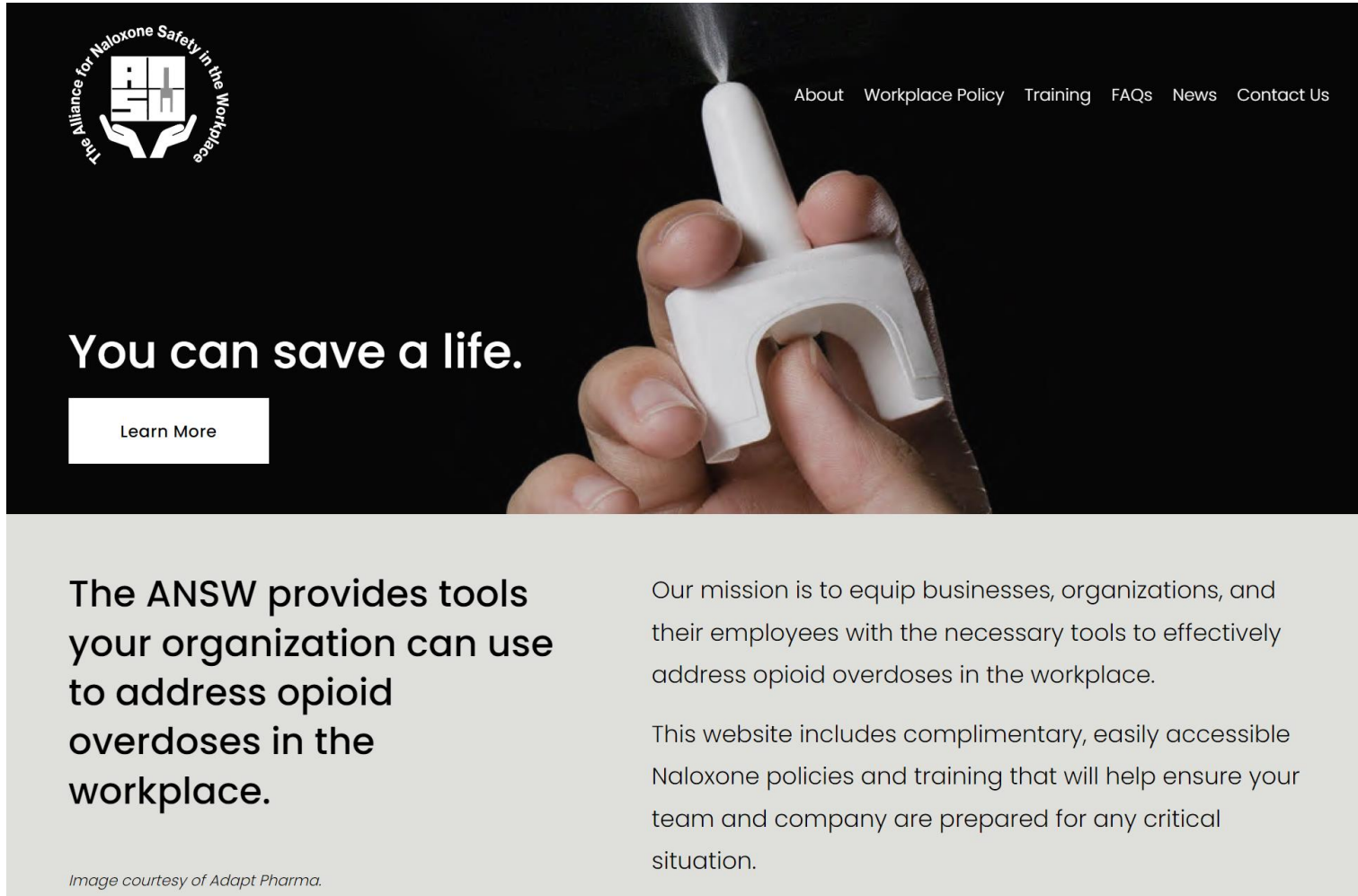


2:17
25 Minutes

Overdose Scenario – Lessons Learned

- Are there other potential victims?
- Employer didn't have emergency contact (union had ex-girlfriend)
- Provide additional Naloxone supplies (1 box of 2 blister packs no sufficient)
- Medical backpack
- Post-incident psychological first aid for bystanders and layperson responders
- Importance of a post-incident stand-down reinforced
- RTW process due to loss of consciousness

Resources



You can save a life.

[Learn More](#)

The ANSW provides tools your organization can use to address opioid overdoses in the workplace.

Our mission is to equip businesses, organizations, and their employees with the necessary tools to effectively address opioid overdoses in the workplace.

This website includes complimentary, easily accessible Naloxone policies and training that will help ensure your team and company are prepared for any critical situation.

Image courtesy of Adapt Pharma.

Prevent FIRST
DOSE

Prequalify urgent
care centers ...

Work with nurse
case managers

...

INTRODUCING

Using Naloxone Nasal Spray to Stop Overdoses

A new lifesaving course from MindForge
English & Spanish • 7-10 minutes




There's an opioid crisis happening across the construction industry.

One of the tools available to help combat opioid overdoses is a nasal spray called Naloxone (or NARCAN).

This video course aims to inform workers about the danger of opioid overdoses, how to identify them, and how to use Naloxone nasal spray to help save someone's life.

Access the course for FREE:

- 1 **Scan the code** to access the Naloxone Awareness Course.
 **Don't have the app?** You'll be asked to install it.
No camera? Download the MindForge app and enter the Join Code: **NARCAN02**
- 2 **Create a profile** or **log in** if you already have one.
- 3 Go to the **Assignments** tab to find the Naloxone course. The course is in English by default. Click **Language/Idioma** to switch to Spanish if needed.

First-time users: When creating your profile, use your **phone number**. It's easy to remember, and you can reset your password by text.

Current users: Open the MindForge app and tap the **Join+** icon. You can scan the QR code or enter the Join Code manually.

To download your certificate: Log in at **MindForge.studio** on the web. Go to **My Assignments**, then **Completed Courses**, and click the certificate to download the PDF.



WWW.ANSW.ORG

Produced by the The Alliance for Naloxone Safety in the Workplace and its founding members.



Opportunity for Dinner Table



In a crisis? Call or text 988.



THE PROGRAM

FIND YOUR SCHOOL

FIND HELP NOW

LOGIN

GET STARTED

EMPOWERING STUDENTS TO CONNECT

The Green Bandana Project increases student awareness of vital school-based mental health and suicide prevention resources and empowers students to seek help when they need it.

FIND YOUR SCHOOL

THE PROGRAM



Workplace Assessments



Dimeo Construction Company

Corporate Wellbeing Program Assessment



Table 3: Assessment Modules and Descriptions

Assessment Modules	Description
#1: Organizational Workplace Culture	Explores workplace culture, focusing on how work is organized, designed, and how physical risks are mitigated while enhancing wellbeing. Risk mitigation strategies will address trends in organizational structure and identify opportunities to improve efficiency, collaboration, safety, and employee satisfaction.
#2: Current & Future State – Gap Analysis	Examines measures, tracking, and collaboration to identify existing gaps and determine areas that require improvement. Risk mitigation strategies will ensure a thorough identification and validation of work

Executive Summary

This report presents the findings of the Corporate Wellbeing Program (CWP) Assessment conducted for Dimeo Construction Company (Dimeo) – a Construction Management Company based in Providence, RI. The assessment, which follows the ISO 45003:2021 guidelines, aims to integrate wellbeing considerations into Dimeo's core operations and foster a positive workplace culture.



Conducted by: Jared Hulbert, Chris Semlies,
& Babak Memarian
Distributed: March 05, 2025

Dimeo Construction Company, Inc.
75 Chapman Street
Providence, RI 02905

	be communicated, identifying responsible parties for implementation, and ensuring these programs are embedded and accessible throughout an employee's experience. Risk mitigation strategies emphasize effective communication, clear roles, and seamless integration to ensure widespread access and impact within the organization.
#5: Leadership Social Risk Factors	Evaluates leadership and management involvement in addressing social risks in the workforce. Risk mitigation strategies address leadership engagement in areas such as handling employee misconduct, fostering a feedback culture, nurturing positive relationships, supporting work- life balance, and boosting employee engagement through rewards, recognition, and growth opportunities.

Thank You

