

















LIFELINES SCOTLAND

EVALUATION 2020 – 2022







Contents



Welcome	3
How we got here	4
What we want to do	5
Our approach	6
What we've done	
Website	
Training	10
Integrated Learning	
Advisory and consultation services	19
Reflections and looking forward	20
Appendices	
1: Research behind our approach	23
2: Evaluation – methodology, data analysis and results by service	28

Authors

Gill Moreton, Marianne Gelister, Dr Graeme Grandison

Acknowledgements

We would like to thank all the emergency service staff and volunteers who have worked with us over the last two years. We are grateful to the wellbeing teams within each service who helped organise the training courses and invited us to contribute to their organisation's wellbeing and mental health strategies. And we extend special thanks to the people who provided the feedback that informs this report. Your commitment to the caring for the public and to supporting each other, continues to inspire us.

Published by Lifelines Scotland (LSER1-10/22)







Email lifelines@nhslothian.scot.nhs.uk
Phone 0131 451 7400
Website www.lifelines.scot
Twitter @LifelinesScot













Welcome



Thank you for your interest in Lifelines Scotland.

We're a national NHS project, hosted by the Rivers Centre in NHS Lothian. The Rivers Centre has provided evidence-based treatment for people with post traumatic injuries since 1997; supporting both the public, and the emergency responders who come to their aid. We're passionate about the work we've been doing with government, statutory, voluntary and charitable partners to support the emergency service community in Scotland.

As a team treating emergency service staff and volunteers for the last 20 years, we have seen frequently how a psychological injury can be compounded by feelings of confusion and shame about being injured and disappointment at the support received from the organisation. Lifelines Scotland is our attempt to address these issues.

Using clinical wisdom and international research in the field of traumatic stress and emergency responders we've developed a best practice model based on some key principles that we've called the Lifelines 10 Essentials.

We've taken a public health approach, creating resources and learning opportunities for individual staff, volunteers, their family and friends. We recognise that resilient staff need resilient systems and structures and so have worked with emergency service organisations to provide consultation and share best practice.

We want to be part of the larger national conversation about mental health and wellbeing so have worked alongside colleagues from Public Health Scotland and NHS Education for Scotland to have an integrated national training plan for trauma informed care, mental health improvement and suicide prevention.

This document outlines what we've done so far, how it's gone and our plans for the future.

"Using our clinical wisdom and international research in the field of traumatic stress and emergency responders we've developed a best practice model based on some key principles that we've called the Lifelines 10 Essentials"

GILL MORETON, PROJECT LEAD



GILL MORETON, PROJECT LEAD

ju Moret

OCTOBER 2022

How we got here



Phase One: 2016 - 2017

Scotland's Volunteer Emergency Responders

In 2016, the Scottish Government funded the team at the Rivers Centre for Traumatic Stress in NHS Lothian to develop a project to promote the wellbeing and resilience of Scotland's volunteer emergency responders.

Working in partnership with the volunteer responder organisations, the Lifelines project team created a range of web-based resources on self-care and peer support and delivered training courses across Scotland on Staying Well and Supporting Colleagues.

In 2017, an online training module, the Staying Well Road Trip was created and made available through the Lifelines website.

Phase Two: 2019 - July 2022 Scotland's Emergency Service Community

In 2019, the Scottish Government funded the extension of the existing Lifelines Scotland online resources to all emergency service staff and volunteers (current and retired) and their families. A new website was developed with resources tailored for each service group, for staff (throughout their career and beyond retirement) and for family and friends. It hosted resources on self-care, supporting others and how to access support when needed as well as service-specific version of the online e-module, the Staying Well Road Trip.

As well as creating the online resources, the project clinical lead provided consultation and advice to the services.

In April 2021 Police Scotland, Scottish Ambulance, Scottish Fire and Rescue and the Fire Fighter's Charity joined the Scottish Government in funding a training programme in resilience and peer support. Four part-time training advisors joined the Lifelines team.

In April 2022 this funding was increased to provide a full-time training advisor for each organisation and additional project support.

We are currently working with the services to embed the Lifelines course content into their core curricula and the project lead continues to provide best practice advice and consultation on staff wellbeing.







Staffing by WTE (Whole Time Equivalent)

Jan 2020-March 2021

0.6 Project Lead

0.5 Project Support

April 2021 - March 2022

0.6 Project Lead

1.0 Project Support

2.2 Training Advisors

April 2022 - present

0.7 Project Lead

1.0 Project Support

3.0 Training Advisors

0.4 Administrator

What we want to do



Over the last three decades there has been increasing interest in the mental health needs of the emergency service community and a range of interventions developed to address these needs.

Many of these have been trauma-focused, often using formal peer support programmes to provide support in the aftermath of a traumatic stressor. Other interventions have sought to increase access to support for those individuals experiencing poor mental health.

Lifelines shares this goal of providing support when it is needed but we want to get upstream, and help people stay safe and well.

We want to equip the Scottish emergency service community with the skills and knowledge necessary to bolster individual, team, and organisational wellbeing.

Our approach is guided by the Lifelines 10 Essentials, a distillation of clinical experience and academic research that you can read more about in appendix 1.

The Essentials provide an evidence-based foundation for our work.



We've made a film on our website, The Lifelines 10 Essentials, as spoken by a selection of Scotland's Emergency Responders...

The Lifelines 10 Essentials

- #1 We all have mental health and responders are not invincible.
- Emergency responders are at risk of psychological injury. It's an occupational hazard.
- #3 Health and safety assessments should include psychological risk.
- Getting psychologically injured doesn't mean you're weak or a failure.
- Psychological injury is not inevitable. Most responders, most of the time, will cope well.
- #6 Psychological injuries can heal.
- **#7** Stigma stops people getting help.
- Workplace stress is as big a threat to wellbeing as trauma exposure.
- Good management and leadership protect responders.
- Support from colleagues, family and friends keeps responders well.

Our approach



- To promote a national conversation about the wellbeing of current and retired emergency service staff, volunteers, and their families.
- A public health focus on prevention and early intervention reaching the widest possible audience.
- To recognise that psychological injury is a risk for emergency service staff and volunteers so we can anticipate and mitigate its impact, challenge stigma and help people access support if they are injured.
- To maximise the social support that already exists between colleagues and within organisations by training as many people as possible to be a supportive colleague or manager.
- To provide dedicated web resources for emergency service staff and volunteers based on clinical experience and best practice. Our website complements the training packages and acts as a bridge to further sources of support, advice, and information from within the emergency service organisations and beyond.
- To create resources for family and friends (and also employers with staff who volunteer as responders) in recognition of the essential role they play in the emergency service community and the potential impact on their wellbeing.
- To work with organisations so that an understanding of psychological wellbeing and resilience is integrated and mainstreamed within policies and procedures.
- To embed training in resilience, peer and post trauma support in the services' core curricula from recruitment to retirement and for those in leadership roles creating bespoke materials and providing a train-the-trainer model.
- To deliver multi-agency learning opportunities to reinforce the mutual support and trust that exists across the emergency service community in Scotland.











Website: Development

In November 2020 we launched a new website with bespoke areas for ambulance, fire, police and volunteers.

The website reflects our asset-based approach with sections on Why I'm OK most of the time, When I might need some help and Information for family, friends and other supporters, with additional information about Finding Help and Training. Each section contains information and advice provided in a range of media, including films from emergency staff and volunteers and a Lifelines Playlist.

The content of the website is intended to both act as a standalone resource for people seeking information and support for their own or other's wellbeing, and one which can augment the learning delivered through the Lifelines Scotland training courses.

We promoted the website through our partners in the emergency service organisations and charities and through social media. Between November 2020 and February 2021, we engaged a specialist media agency for a campaign to reach people outside the services, including family, friends, employers, and retirees.

We have sought to improve and develop the site to keep it fresh and relevant to new and returning users alike with additions including a Learning Toolkit (see page 18) and a range of 'Quick Guides', which provide bitesize information on a variety of topics.



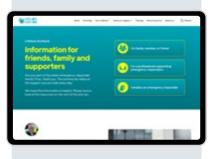
In October 2021, 12 months after the Lifelines site went live, the Blue Light Together website was launched as an online resource for the UK emergency service community. We worked closely with the Blue Light team to ensure this new site acknowledged and linked to the existing Lifelines website to avoid any confusion for Scottish users.











Website: Usage



Usage data for the Lifelines website is gathered through Google analytics, which allows for tracking and reporting of website traffic in areas such as visitor numbers, most viewed pages, and location of users.

Between November 2020 to July 2022...



29,400 website visits 83,300 page views

representing an average of 1,470 visits and 4,165 page views per month.

Service specific page views...

(% of the total page views for the site)



Lifelines Ambulance: 13%



Lifelines Fire and Rescue: 13%



Lifelines Police: 11%



Lifelines Volunteer Responders: 9%

Topic areas





Around 10% of users visit the pages falling under the "Why I am ok most of the time" banner, with around 12% under "When I might need some help". The similarity in figures suggests a benefit to the breadth of site content being provided.

How users arrive at site...

www.lifelines.scot

URL into browser:47%

Social media: 15%

Search engines: 19%



Other websites: 11%

These represent great opportunities to grow website usage and going forward we will continue to use our social media platforms to promote our web resources.



Website: Reception

Since launching the site, we have been collating feedback through a variety of channels.

We have collected information about website usage from direct messages, training surveys, social media, and a pop-up survey, and have received some great feedback. 98% of people attending a Lifelines training courses were familiar with the website content, and many provided us with positive comments.

The pop-up feedback survey has not been well used, with only 1% of visitors to the site completing it. It is notoriously difficult to make website feedback surveys noticeable, but non-invasive, to users and our low response rate is not unusual. Given the low return rate the following figures should be interpreted with caution, however, 96% of the users completing the feedback survey reported the site was helpful.



Excellent, clear, easily relatable information and advice for emergency responders. Thank you

I think it's great, the design and layout are easy on the eyes, simple to follow and not information overload. You can also get lost in a deep dive as it's very informative and thorough.

Brilliant resource. Lifesaving advice. Lived experience. Professional support. You're never alone

I have also passed it on to my wife, as it explains some of the reasons why I am the way I am with the family (in a safety conscious way!) and how I try and cope with the job in a better way than I could ever try and articulate

Training: Summary



Our courses have been designed to meet the needs of the emergency service community in Scotland and aim to promote resilience by learning about the factors that protect people in high risk roles and how we can look after ourselves and others in challenging situations.

The online service-specific Staying Well Road Trips were launched in November 2020 and are accessed through the website. The Road Trip is the foundation of the Lifelines courses and by July 2022 had been taken 3476 times. In May 2022 we launched a guide to taking the Staying Well Road Trip with a group of colleagues.

Our courses are designed to be completed sequentially with learning from each course assimilated into the next as presented on page 11.

The training schedule and attendees were agreed with each service group and are summarised here:

- Ambulance (May 2021 July 2022): Open to all staff (operational, control and support), specialist teams, undergraduate student paramedics, Mobile Testing Unit staff and volunteer Community First Responders
- Fire (June 2021 July 2022): Open to all staff (operational, control and support), trainees, On Call fire fighters and Wellbeing Champions
- Police (June 2021 July 2022): Offered to staff in Cyber Crime, Forensic Services, Control, Specialist Crime Division, Association of Police Superintendents, Wellbeing Champions, Police Federation representatives and peer supporters for the Retired Police Officers Association
- Volunteers (October 2021 March 2022): Offered to Scottish Mountain Rescue, Scottish Flood Forum, RNLI, St Andrews First Aid, BASICS, British Red Cross and Coastguard

The Covid-19 pandemic had a significant impact on the delivery of training. The services and their staff were under extreme pressure and ironically had less capacity than usual to attend courses aimed at supporting resilience. 156 courses were cancelled, 49 of these between September and November 2021, which included the period when Scotland hosted COP26.

The pandemic also meant that most courses were delivered online, via Microsoft Teams. Remote learning has brought advantages and disadvantages (see page 21) but feedback indicates that the Lifelines' training advisors created a safe and supportive communal learning environment.

Attended an excellent course provided by Lifelines. It's a must!

It's the first training of its kind that I have experienced, and I can't recommend it highly enough



Relaxed, which helped me focus what was being said. Informative, I was glad to be able to learn new skills to help myself & others. Friendly, everyone on the group meeting was friendly & approachable.

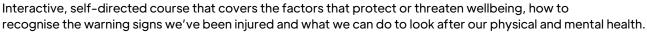
I thought Teams worked well too both in the course delivery and break-out sessions - being on screen rather than in a meeting room didn't detract from or dilute the message in any way for me.



Training: Our courses

Staying Well Road Trip – A guide to resilience for responders in Scotland

Duration: 30-40 minutes





Staying Well - Understanding Resilience and Self-Care

Duration: 3 hours (with break)

This session is an opportunity to meet with others and to learn more about what keeps us well.

We discuss the things that threaten our wellbeing in our roles and what protects us, and how to stock our Psychological 1st Aid kits. We learn about the impact of trauma and stress so we can recognise when we might need some help and where we can find this.

Supporting your Colleagues

Duration: 6.5 hours (with break)

We know that relationships based on camaraderie, trust and respect act as a buffer against the challenges of working / volunteering for an emergency service. This workshop looks at what we can do to strengthen these supportive relationships. You will learn how to have helpful conversations with colleagues, how to recognise signs that someone may be struggling and what to do when you are worried about someone.

Supporting your Team (for managers)

Duration: 6.5 hours (with break)

Good leadership is associated with staff wellbeing, morale and good mental health. Strong teams and peer support keep people well. This workshop looks at what we can do to build strong teams and strengthen these supportive relationships. You will learn how to have helpful conversations with colleagues, how to recognise signs that someone may be struggling and what to do when you worried about someone.

Post trauma support: Providing Psychological First Aid

Duration: 6.5 hours (with break)

Emergency service staff and volunteers are frequently exposed to potentially traumatic experiences in the course of their work. This workshop will help you understand trauma and traumatic stress so you can recognise when you and your colleagues may be at risk of psychological injury. It will equip you to give Psychological First Aid, the international best practice model for supporting people following trauma exposure.



Training: Overview

Delivery of courses from March 2021 to July 2022

Courses delivered







Staying well - 144, Supporting your colleagues/team - 96, Post Trauma Support - 33

Courses cancelled: 236 Ambulance: 55

Fire: 50

Police: 19

Volunteers: 32

Total attendees (Staying well)



Ambulance - 383, Fire - 610, Police - 378, Volunteers - 35

Total attendees (Supporting your colleagues/team)



Ambulance - 133, Fire - 336, Police - 173, Volunteers - 22

Total attendees (Post trauma support)



Ambulance - 66, Fire - 143, Police-= 66, Volunteers - 21

Total courses completed by attendees

Staying well road trip

Ambulance - 853

Fire - 1181

Trips (total page views)

Police - 984

From November 2020 to July 2022

Volunteers - 456 (+ 3227 trips on original volunteers road trip 2017- 2020)



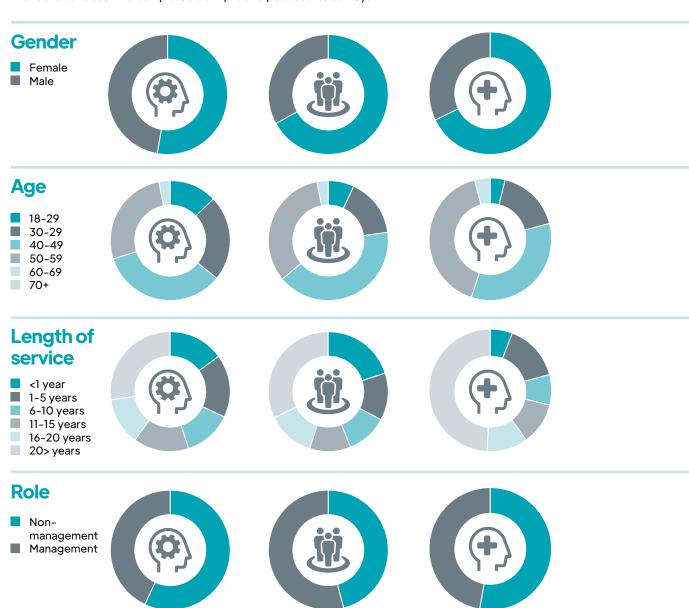
Training: Survey data

(May 2021 to July 2022)

SUR	VEYS RETURNED	Total attendees	Pre-course surveys	Post-course surveys	Paired surveys*
	Staying well	1406	813 (58%)	410 (29%)	331 (24%)
	Supporting your colleagues/team	664	284 (43%)	192 (29%)	134 (20%)
(+)	Post trauma support	296	131 (44%)	120 (41%)	80 (27%)

Our survey results are based on the attendees who completed both pre and post course surveys allowing us to assess the impact of the training. This number is smaller than the total of post-course responses because we were not able to include the people who had not completed the pre-course survey.

^{*}Paired: attendees who completed both pre and post course surveys





Training: Evaluation

Attendees were asked to complete an online survey before and after each Lifelines courses and the results are displayed from page 15, with full service data in appendix 2. The questions map onto the planned learning outcomes for each course

The evaluation is based on the Kirkpatrick model, a widely adopted method for evaluating training and learning programmes, which places a substantial emphasis on their relevance to the learner's job role.

The current evaluation is grounded in levels 1 and 2 of the model; exploring Learning impact (determining what has been learnt by attendees) and Reaction (determining how valuable attendees found the training).

The results show significant improvements on all outcomes.

WHAT SOME ATTENDEES SAID...

Opened my eyes into the subject of mental health and being a good manager... insightful and life-saving training

The concept of
Psychological 1st Aid
is something I will
take forward on to the
Incident ground

Lifelines' resilience course gave me tools to manage my mental health and resilience at work

These courses are already helping with the welfare calls I make to staff

IMPROVEMENT HIGHLIGHTS...



After Staying well course...



Increased knowledge of how to stay well and of the factors which can affect resilience

After Supporting your colleagues course...



More able to support colleagues, respond when they're in crisis and aware what help is available.

After Post trauma support course...



Can deliver Psychological 1st Aid and understand the factors which influence our ability to cope and recover following trauma.



Training: Learning impact

Before and after the training session attendees are asked to complete online surveys with questions that assess their knowledge and confidence in relation to the identified learning outcomes for each course. The tables show mean scores for each learning outcome.

Staying well: Learning outcome (n = 331)	Pre-Course	Post-Course	Significant Improvement
1. Understanding of the factors that contribute to good mental health.	3.98	4.64	Yes (p<.001)
2. Knowledge of the protective and risk factors which can affect the resilience of Emergency service staff.*	3.54	4.57	Yes (p<.001)
3. Ability to recognise signs of stress and distress in ourselves and others.	3.88	4.54	Yes (p<.001)
4. Understanding of the factors that support the wellbeing of individuals and teams.	3.71	4.53	Yes (p<.001)
5. Knowledge of the support available for you and your colleagues.	3.68	4.49	Yes (p<.001)
6. Understanding of the tools to build a psychological first aid kit.*	3.46	4.65	Yes (p<.001)

Supporting your colleagues/team: Learning outcome (n = 134)	Pre-Course	Post-Course	Significant Improvement
Understanding how social and peer support contribute to wellbeing and good mental health.	3.90	4.72	Yes (p<.001)
2. Ability to recognise signs of stress and distress in others, including common mental health problems.	3.75	4.57	Yes (p<.001)
3. Understanding and having opportunity to practice listening skills and supportive conversations.*	3.60	4.62	Yes (p<.001)
4. Ability to recognise risk and respond when people are in crisis.	3.67	4.57	Yes (p<.001)
5. Knowledge of what support is available and how to link people to help.*	3.66	4.66	Yes (p<.001)
6. Knowledge of how to take care of yourself when supporting others.	3.72	4.67	Yes (p<.001

Post trauma support: Learning outcome (n = 80)	Pre-Course	Post-Course	Significant Improvement
1. The ability to identify the kinds of experiences that may be traumatic.	4.08	4.69	Yes (p<.001)
2. Knowledge of the different ways that people can be affected.	3.81	4.72	Yes (p<.001)
3. Understanding the factors which influence our ability to cope and recover.*	3.31	4.63	Yes (p<.001)
4. Increased confidence in recognising when people's responses and reactions may be trauma related.	3.48	4.54	Yes (p<.001)
5. Ability to deliver Psychological First Aid.*	3.02	4.66	Yes (p<.001)
6. Recognising when people need additional support and knowing how to access this.	3.69	4.62	Yes (p<.001)

^{*}Most improved learning



Training: Reaction

We asked our attendees the following questions about the course content and training delivery. Those completing the post course surveys gave overwhelming positive feedback on the following measures:

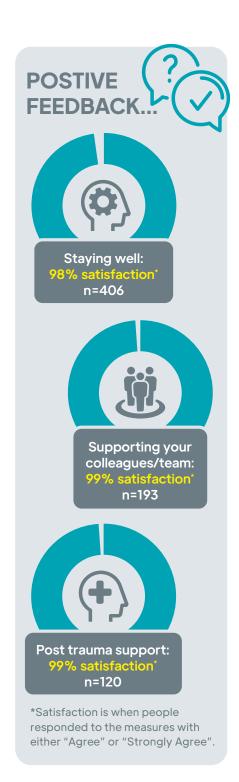
- 1 The information provided was clear and easy to understand
- 2 The information was presented at a pace I could follow
- 3 The information covered was of an appropriate standard
- 4 The information covered was relevant to my service
- 5 The information covered was relevant to the job I do
- 6 The information covered was relevant to my personal life
- 7 The training supported my needs well
- 8 The quality of teaching was of an appropriate standard
- 9 There as enough time allocated to discussion/questions
- 10 There was enough time allocated to the presentation

WHAT SOME ATTENDEES SAID...

Open and insightful learning and discussion, led and facilitated by knowledgeable staff.

The way it was delivered was, for me, spot on in terms of easy-to-understand language. Expertly delivered and encouraged openness and understanding.

The presentation and group discussion was brilliant, pitched very well and allowed some great chat.





Training: Feedback

Feedback has been collected in various formats throughout the rollout of the Lifelines courses including at the end of each session when attendees were asked for three words to describe their experience. These have been collated into 'word-clouds'.

supportive open insightful worthwhile helpful inspiring practical care great useful informative safeengaging enjoyable fun honest openness reassuring relaxed clear interesting positive beneficial powerful sharing empowering educational simple wellbeing confident supported

More in depth feedback was provided by training attendees on an ad-hoc and voluntary basis, in the form of written messages sent to Lifelines trainers by email and via Microsoft Teams. Consent was requested to use written feedback in this report, with any feedback being anonymised before inclusion.

A very good morning of reflection both personally and professionally. Expertly delivered and encouraged openness and understanding.

It was an excellent course which I thoroughly enjoyed and took a lot from it. The Trainers were superb.

Integrated Learning



In addition to delivering the Lifelines courses outlined previously, we have been working with the service organisations to embed training in resilience, supporting colleagues and post trauma support within their core curricula from recruitment to retirement and for those in leadership and specialist roles. This work is ongoing, but so far has included:

- Creating an adapted version of our 'Staying Well Road Trip' for use in groups
- Developing training packages for undergraduate paramedic degree courses
- Delivering training with new recruits to the Scottish Fire and Rescue Service
- Linking with the Emergency Services Training Coordination Group (ESTCG) and Scottish Multi-agency Resilience Training Exercise Unit (SMARTEU) to integrate staff wellbeing into tri-service incident command training.

The aim through each of these is to reach the widest proportion of the emergency service community, increasing awareness and challenging stigma around psychological injury and maximising the protective social support that exists between colleagues.

We want all staff and volunteers have the information they need to look after themselves and their colleagues.

Lifelines Learning Toolkit

There is a wealth of wellbeing initiatives and learning opportunities across the public sector in Scotland. To ensure an integrated collaborative approach, and to help individuals and organisations access these, we produced the Lifelines Learning Toolkit with information about courses in mental health, trauma awareness and suicide prevention being delivered by colleagues at NHS Education for Scotland and Public Health Scotland.







The instructional staff are helpful, knowledgeable and approachable

The team's knowledge and expertise has engaged and stimulated the students. It has been great to work collaboratively on resource development.

The group road trip was really easy to facilitate and sparked a lot of good discussions



Incredibly helpful to have all this information in one place, thank you!



Advisory and Consultation Services

We have developed strong working relationships with each of the Scottish blue light services, volunteer responder organisations and with partner bodies.

Lifelines Scotland team members have membership of several servicespecific and multi-agency groups to provide advice and consultation on staff wellbeing. These include:

- Scottish Fire and Rescue Service Mental Health and Wellbeing Group and the Document, Process, Learning and Development sub-groups
- Scottish Ambulance Service Workforce Wellbeing Group
- Retired Police Officers Association "Signposters" peer support project
- Your Safety Matters working group
- Out of Hospital Cardiac Arrest working group
- UK Search and Rescue Mental Health and Wellbeing working group
- Voluntary Sector Resilience Partnership
- Scottish Government's Volunteering Action Plan
- St Andrews First Aid peer support project

Through these groups we have contributed to the development of peer support and wellbeing champion projects, trauma care pathways and suicide prevention initiatives. We have helped review and update policies with the potential to impact the mental wellbeing of staff, including absence management procedures and health and safety risk assessments and are working with UKSAR to adapt the Mental Health at Work Commitment for volunteer emergency responder organisations.

We have responded also on an ad hoc basis, providing advice to Scottish Ambulance following a major incident and running drop-in sessions for ambulance managers during the winter of 2021/22.

The project lead has provided professional support to clinical colleagues working with emergency service clients, delivering presentations at professional conferences and consultation to the Psychological Therapies Lead at the Fire Fighters Charity.

Lifeline is a partner to the Health and Safety Executive's Working Minds Project.

Support in Service/Policy Development has been invaluable.

So much experience in the team and great knowledge of the blue light services.

Assistance with the Equality and Human Rights Impact Assessment review has been useful and welcomed.

The collegiality, expertise and creativity from the Lifelines team has been second to none.



Reflections and looking forward



Website evaluation

The pop-up survey on the site hasn't been well-used and some visitors have told us that they find it off-putting.

Looking forward...

We have deactivated the pop-up while retaining a feedback survey link on the site's footer.

Training: Demand and capacity

This first year of delivering our training courses (2021) coincided with a period of extraordinary demand for the emergency services in Scotland. With the continuation of the COVID-19 pandemic and its associated restrictions, services were under intense pressure due to a combination of increased workloads, reduced staff levels, sickness absence and staff exhaustion.

Operational demands, meant staff from ambulance, fire and police sometimes couldn't be released to attend training, and general service pressures meant some services struggled to provide the administrative support required to book staff onto courses. The length of the Lifelines courses was also highlighted as a challenge by the services. This meant that over the course of the year 156 courses were cancelled because of insufficient bookings, and many of the courses delivered were run with the minimum number of attendees. Attendance at the Lifelines courses was mostly optional and, in some cases, completed in delegate's own time rather than during work hours.

This pattern was mirrored in the volunteer responder community where the pressures of juggling work, home, volunteering and training meant that attendance at courses (especially online) dropped across the sector during this period.

Despite this, in the 12 months to the end of July 2022, the small Lifelines training team had delivered 271 courses which were attended by 2,366 delegates. Both these numbers, and the positive feedback from delegates, indicate a demand for training in this area. The challenge is how to deliver this.

Progress to integrate the Lifelines' course content into the services' core curricula was slower than hoped, in large part because of the demands on the Learning and Development teams who were striving to maintain core training and services during this period of reduced capacity and increased demand.

Looking forward...

We will continue to deliver our courses but will consider ways to increase attendance including making them multi-agency.

Looking forward...

We will focus on work with the organisations to mainstream staff wellbeing and to embed the course content into the core training curricula.



Training: Online delivery

The Covid-19 pandemic meant that most courses were delivered online, via Microsoft Teams, which brought advantages and disadvantages. The benefits are the equal access it provided for delegates to attend regardless of geographical location, saving time and money on travel and allowing connections to be made between colleagues across the country. The downsides were delegates' variable confidence using online platforms, less protected learning time away from the workplace, or for volunteer responders, the challenge of spending an evening doing online training after a working day in front of a screen.

There was also the challenge of monitoring delegates' responses to sensitive content, however feedback received from delegates and trainers indicates the latter were able to negotiate this effectively.

Looking forward...

We will continue to deliver training online using our experiences to minimise the challenges and maximise the benefits.

Training: Delegate mix

The Lifelines courses have thus far been delivered to colleagues from the same service, allowing for experiences and challenges unique to each organisation to be integrated and discussed in sessions. We have, however, adopted a blended approach with regards to the staff groups in attendance, with people from different organisational ranks and departments attending training together.

Feedback from attendees in relation to this approach has been mixed. There has been broadly positive feedback about training alongside people from other areas of the service with people commenting that it has generated a better understanding of role specific challenges faced by colleagues and the commonality of organisational stressors. This has been true also for volunteers from different organisations attending training together.

Managers have reported that training alongside their employees has allowed them to develop deeper understanding and greater respect for the challenges they face. Although some trainees valued attending courses alongside senior colleagues, others reported that it hindered their disclosure of either occupational stressors or mental health difficulties.

Looking forward...

We will continue to run courses for mixed staff groups and are planning multi-agency refresher courses.

Looking forward...

We may provide an option, particularly to new recruits and early career personnel, to attend peer only sessions.



Training: Volunteer emergency responders

Funding for a part-time Training Advisor for Lifelines Volunteers was provided by Scottish Government for the year April 2021 – March 2022 and we began training delivery in October 2021.

This shorter timeframe and the impact of the Covid-19 pandemic on volunteering (and training attendance) may explain the lower delegate numbers for this group. Many volunteers were home-working on computers all day and reluctant to spend their evenings or weekends doing online training. 24 courses had to be cancelled because of insufficient bookings.

We are not currently funded to deliver training to volunteer responder organisations but are using our knowledge of the issues they face to inform our training with volunteers working for the blue light organisations.

Looking forward...

We will continue to work with volunteer responder organisations to encourage access to our online resources and will restart training delivery if funding becomes available.

Evaluation

Face to face training allows for paper surveys to be completed before and after a session. Online training requires online surveys, and our 24% completion rate for paired questionnaires reflects the challenge of getting busy people to fill in a survey when they're not in a training venue.

In the next phase of the project we will be exploring how attendees have made use of their learning and what difference (if any) it has made to how they look after themselves and support their colleagues.

Looking forward...

We will collect feedback through both online sessions (recorded and transcribed, with consent) and face to face focus groups.



Our approach is guided by the Lifelines 10 Essentials which are a distillation of clinical experience and academic research on how we can best support the wellbeing of emergency responders. The Essentials are at the heart of our work, providing an evidence-based foundation for our interventions, from web resources to training and consultation.

Lifelines Essential #1: We all have mental health and responders are not invincible

As many as 1 in 4 people experience mental health problems, such as anxiety, depression, or PTSD each year^[1]. Often, these are short-term ailments from which they fully recover. In some cases, however, they can develop into more chronic, or long-lasting concerns. In this regard, emergency responders are no different to anyone else.

Research by the mental health charity Mind, has found that emergency service staff may be more likely than the general workforce to experience mental health problems, with as many as 88% of those surveyed reporting having experienced stress or poor mental health while working^[2].

Lifelines Essential #2: Emergency responders are at risk of psychological injury. It's an occupational hazard

High-risk jobs, regardless of setting, increase the likelihood of psychological injury, and emergency responding is no different. Emergency service personnel are commonly exposed to potentially traumatic incidents as a result of their role^[3, 4, 5], and are more likely than the general population to experience Post-Traumatic Stress Disorder (PTSD)^[6, 7, 8, 9].

A large-scale survey of police officers in the UK recently found that as many as 1 in 5 of those who have experienced traumatic incidents through work may be expected to subsequently experience PSTD or Complex PTSD^[10]. We know from the evidence, that there are certain aspects of call-outs which are more likely to make the incident traumatic. For example, incidents which are unpredictable, have a personal relevance to the responder, or where control of the situation is lost, are all more likely to be experienced as traumatic^[11, 12].

There is very little evidence, however, to suggest that certain types of people are pre-determined to be at greater risk for being psychologically injured at work. It is the role, and not the individual, which is a risk factor here.

However, it's not just about trauma exposure at work. Recent research suggests that emergency responders are more likely to develop symptoms of PTSD as a result of trauma exposure in their personal lives than in an occupational context. Moreover, personal trauma was predominantly associated with greater PTSD symptom severity in emergency responders than occupational trauma. [30]



Lifelines Essential #3: Health and safety assessments should include psychological risk

A recent national survey of police officers and staff found the majority of respondents (81%) reported having experienced at least one physical or psychological injury as a result of their work in the previous five years, with almost half (42%) experiencing a psychological injury or mental health issue.^[13]

Further research has found emergency service personnel to be twice as likely as other workers to identify work as their main source of mental health problems but less likely to take time off as a result^[1]. Trauma reactions are expected to be exacerbated where staff do not feel supported by their organisation^[11]. This is particularly pertinent in emergency service organisations where most staff may be expected to experience potentially traumatic work incidents^[14].

We believe that formally identifying psychological injury as a threat to health and safety (in the same way as we assess the risks of physical injury) would allow a more pragmatic approach. If we can be matter of fact about the possibility of psychological injury and the steps we can take to anticipate, address and mitigate this risk, then we will chip away at the stigma connected with psychological injury, and hopefully reduce this barrier to seeking support.

Lifelines Essential #4: Getting psychologically injured doesn't mean you're weak or a failure

It is a misconception that individuals who sustain psychological injuries do so due to personal failings or weaknesses. They are an occupational hazard for emergency responders.

The expectation for emergency responders to remain calm and stoic in the face of emotive incidents^[12] may give the impression that they are not affected by the incidents they attend. And when people are affected, then they may assume that this is a personal failing rather than an understandable response to the incident. Anyone can get psychologically injured, just as anyone can be physically injured. Working or volunteering in an emergency response role means exposure to potentially traumatic incidents. It's a part of the job.

Lifelines Essential #5: Psychological injury is not inevitable. Most responders, most of the time, will cope well

Having highlighted the risks faced by emergency responders it is important to say that becoming psychologically injured is by no means inevitable. Although some research has suggested that as many as 4 out of 5 responders may experience some post traumatic stress reactions in response to work incidents, the majority of these people (80%) will not develop symptoms severe enough to be classed as post traumatic stress disorder [15]. Other research suggests that around 9 in 10 emergency responders will not develop PTSD [16].

Just as there are work-related factors which may increase the likelihood of becoming psychologically injured on the job, there are also various factors which can reduce this risk, such as social support, supportive line management and education around the signs and symptoms of acute stress^[17].



Lifelines Essential #6: Psychological injuries can heal

For those people who do sustain a psychological injury it is important to affirm that people can and do recover from these injuries. It is not unusual for people to experience posttraumatic stress reactions in the aftermath of a traumatic incident and in most cases, these symptoms will settle in the days and weeks following the event.

However, like physical injuries, sometimes psychological injuries can take longer to heal, and may require specialist treatment. There are a number of evidence-based therapeutic treatments, such as Trauma Focussed Cognitive Behavioural Therapy, and Eye Movement Desensitisation and Reprocessing, which have been proven to aid in the healing process from Post Traumatic Stress Disorder^[18].

Lifelines Essential #7: Stigma stops people getting help

It is common for responders to report that the stigma surrounding psychological injuries and mental health prevents them from seeking support for the psychological problems they may be experiencing ^[13]. Emergency service personnel may operate under the assumption that as people who fix problems for others, they shouldn't be seen to have problems themselves ^[2]. Others may have concerns that acknowledging they've been psychological injured may have a negative impact on their career prospects or lead to ridicule within the organisation.

This may partly stem from a lack of visibility of psychological symptoms, in contrast to easily identifiable signs of a physical injury, meaning people may feel they are less likely to be believed when reporting psychological injury. Research has found that emergency services personnel are, on average, less likely to seek support for mental health and wellbeing issues than the general population, with workplace culture and stigma understood to be key drivers of this reluctance^[1].

Stigma isn't just a fear of being judged by others, but includes self-stigma where people feel ashamed and a sense of having failed. Self-stigma has been shown to reduce the likelihood of emergency service personnel seeking help from mental health professionals.^[19]

Lifelines Essential #8: Workplace stress is as big a threat to wellbeing as trauma exposure

In addition to the threat of exposure to potentially traumatic stressors, we also know, that workplace stress has a negative impact on the mental wellbeing of emergency service staff^[20].

Research has found that organisational stressors, such as long working hours, tension with colleagues, not being supported by senior leaders, and not having control over their work, can increase the likelihood of responders experiencing common mental health issues such as anxiety and depression [21]. Additionally, not feeling a sense of belonging with colleagues can be a source of significant stress for emergency service personnel [22].

As well as the direct impact on mental health, studies have shown that these types of organisational stressors increase the risk of post traumatic injury for emergency responders, over and above the risk from operational, potentially traumatic stressors [20]. They compromise responders' protective armour.



Lifelines Essential #9: Good management and leadership protects responders

As we've seen, organisational stressors can be as, or more, impactful to the mental wellbeing of emergency service personnel as trauma exposure. This is good news, because while organisations can't prevent their people attending challenging or distressing jobs, there are a number of ways the services can support their employees and volunteers afterwards.

A recent review highlighted the need for managers in emergency responder organisations to understand and know how to respond appropriately to the psychological distress staff may experience in relation to operational stressors [23]. Where staff members feel that they have good support form supervisors and managers, they are less likely to develop PTSD following traumatic work events, and more likely to have an increased sense of general job satisfaction [24, 25]. Evidence suggests that good organisational support can increase wellbeing, morale, and retention among emergency service personnel [26].

Lifelines Essential #10: Support from colleagues, family and friends keeps responders well

Good social support is at the heart of human wellbeing [31] and the factor most likely to protect people following trauma exposure.

Research has shown that support, both from colleagues and people outside of work, reduces the impact that potentially traumatic work incidents have on psychological wellbeing [12, 24].

Emergency service personnel will seek support from a variety of sources, both formal (e.g. GP, Employee Assistance Programmes) and informal (e.g. spouse, friends) [27]. Some responders describe relying on support from their colleagues, because they have attended the same incident and so may have a better understanding of the issues faced. Others report feeling more comfortable seeking support from outside of work, for example, from close friends or family members [28].

Interestingly, research tells us that the perception of having support has a stronger effect on wellbeing than receiving it. This suggests that just knowing that support is there should you need it, may mean you're less likely to need to use it [29].



References

- [1] McManus et al. (2007) Adult Psychiatric morbidity in England, 2007: results of a household study
- [2] Mind (2019a) Wellbeing and mental health support in the emergency services: Our learning and key recommendations for the sector
- [3] Fjeldjheim et al. (2014) Trauma exposure, posttraumatic stress disorder and the effect of explanatory variables in paramedic trainees
- [4] Ward et al. (2006) Critical incident exposure in South African emergency services personnel: prevalence and associated mental health issues
- [5] Klimley et al. (2018) Posttraumatic stress disorder in police, firefighters, and emergency dispatchers
- [6] Mind (2019b) Mental Health in the Emergency Services Our 2019 Survey Results Ambulance Service
- [7] Mind (2019c) Mental Health in the Emergency Services Our 2019 Survey Results Fire Service
- [8] Mind (2019d) Mental Health in the Emergency Services Our 2019 Survey Results Police Service
- [9] Mind (2019e) Mental Health in the Emergency Services Our 2019 Survey Results Search and Rescue
- [10] Brewin et al. (2020) Posttraumatic stress disorder and complex posttraumatic stress disorders in UK police officers
- [11] Adams et al. (2014) An Interpretative Phenomenological Analysis of Stress and well-Being in Emergency Medical Dispatchers
- [12] Evans et al. (2013) Police officers' experiences of supportive and unsupportive social interactions following traumatic incidents
- [13] Police Care UK (2016) Supporting the Service: Police injury on duty
- [14] Skeffington et al. (2016) Trauma exposure and post-traumatic stress disorder within fire and emergency services in Western Australia
- [15] Lakey et al. (2018) Trauma Risk Management: Evaluation of the RNLI pilot
- [16] Berger et al. (2011) Rescuers at risk: a systematic review and meta-regression analysis of the worldwide current prevalence and correlates of PTSD in rescue workers
- [17] Brooks et al. (2017) Training and post-disaster interventions for the psychological impacts on disaster-exposed employees: a systematic review
- [18] Watkins et al. (2018) Treating PTSD: A Review of Evidence-Based Psychotherapy Interventions
- [19] Karaffa & Koch (2015) Stigma, Pluralistic Ignorance, and Attitudes Toward Seeking Mental Health Services Among Police Officers
- [20] Armstrong et al. (2014) Predicting post-traumatic growth and post-traumatic stress in firefighters
- [21] Sharp et al. (2020) Assessing the mental health and wellbeing of the Emergency Responder community in the UK
- [22] Shakespeare-Finch & Daley (2017) Workplace belongingness, distress, and resiliencein emergency service workers
- [23] Wild et al. (2020) Pre-incident Training to Build Resilience in First Responders: Recommendations on What to do and What Not to do
- [24] Oginska-Bulik (2015) Social support and negative and positive outcomes of experienced traumatic events in a group of male emergency service workers
- [25] Kula (2016) Occupational stress, supervisor support, job satisfaction, and work-related burnout: perceptions of Turkish National Police (TNP) members
- [26] Boag-Munroe et al. (2016) Police Officers' Promotion Prospects and Intention to Leave the Police
- [27] Carleton et al (2019) Mental health training, attitudes towards support, and screening positive for mental disorders
- [28] Haslam & Mallon (2010) A preliminary investigation of post-traumatic stress symptoms among firefighters
- [29] Prati & Pietrantoni (2010) The relation of perceived and received social support to mental health among first responders: a meta-analytic review
- [30] Wild and Chang (2022) Is it Personal? The Effect of Personal vs. Occupational Trauma on PTSD Symptom Severity in Emergency Responders
- [31] Ozbay et al (2007) Social Support and Resilience to Stress



Methodology

Links to pre-course surveys were sent to attendees ahead of each session with instructions to complete these prior to attending. These surveys include demographic questions, and series of questions which reflect the knowledge and skills covered on our respective Lifelines courses. These questions are designed to map on to our learning outcomes for each course (see Results section). Questions are scored on a 5-point Likert scale with answers ranging from 1 (strongly disagree) to 5 (strongly agree). Links to post-course surveys were distributed at the conclusion of the session. Post-course surveys included 10 items exploring attendants' experiences of training and their views on the relevance and quality of the courses. Six items were included to assess quality, and 4 items were included to assess relevance. Further links to a follow-up survey were distributed to attendees 3-months following completion of their training.

Qualitative feedback was also collected in various formats. Feedback was systematically collected after each training course in the form of three words to describe participants' experience of the course, which have been collated into 'word-clouds' (see page 17). More in-depth feedback was provided by training attendees on an ad-hoc and voluntary basis including messages sent to training staff via email and Microsoft Teams. Consent was requested to use written feedback in the evaluation report, with the option to anonymise the data if desired. The qualitative feedback was not analysed in a systematic way, rather integrated into this evaluation to illustrate themes which arose and provide examples of the application of Lifelines skills in practice.

Data Analysis

Data analysis was conducted using IBM Statistical Package for Social Sciences (SPSS). Data from questionnaires was extracted from Survey Monkey into excel and subsequently SPSS. Data was initially screened for outliers and errors which were corrected. A key challenge in the collection of survey data was low return rates, particularly of the post-course surveys which resulted in a large proportion of missing data. To resolve the issue of missing data, individuals who were missing > 50% of responses were removed from the analysis. Following this, descriptive statistics were run revealing that less than 5% of values were missing for all questionnaire items. As such, remaining missing data was replaced with the series median.

After exploring the normality of the data, paired t-tests were run for course specific results, including data from all four services. For service-specific results, paired t-tests were run for samples with ≥ 60 participants to calculate the differences in mean pre and post test scores. For data sets with < 60 participants and where data was not normally distributed, Wilcoxon signed rank tests were used to calculate the difference in pre and post scores. Return rates for follow-up questionnaires were too low to allow for statistical analyses, as such they are not included in this evaluation.

Results

The results of the Lifelines evaluation are presented on the following pages in table format. These are subdivided into service combined results and service-specific results for each of the Lifelines courses, Staying Well – Understanding Resilience (SWUR), Supporting Your Colleagues/Team (SYC/T) and Post Trauma Support (PTS).



All Services

The results of the paired t-tests for each course (SWUR, SYC/T and PTS) indicate that there were statistically significant improvements in learning and knowledge scores between pre-test and post-test, with large effect sizes, across all learning outcomes (LOs).

For the SWUR results, the largest effect sizes were found for LO2 (d=1.38) (knowledge of protective and risk factors affecting resilience) and for LO6 (d=1.33) (understanding how to build a psychological first aid kit).

For the SYC/T results, the largest effect sizes were found for LO5 (d=1.31) (knowledge of support available), LO3 (d=1.28) (practising listening and supportive conversations) and LO2 (d=1.27) (recognising stress and distress in others).

For the PTS results, the largest effect sizes were found for LO5 (d= 2.25) (ability to deliver psychological first aid) and LO3 (d=1.82) (understanding factors which influence ability to cope and recover).

These results suggest participant's knowledge and skills were enhanced following each respective training course.

STAYING WELL Learning outcome (n = 331)	Pre-Course Mean	Post-Course Mean	t	df	р	Cohen's d
Understanding of the factors that contribute to good mental health.	3.98	4.64	-18.64	330	<.001**	1.02
2. Knowledge of the protective and risk factors which can affect the resilience of Emergency service staff.	3.54	4.57	-25.12	330	<.001**	1.38
3. Ability to recognise signs of stress and distress in ourselves and others.	3.88	4.54	-22.06	330	<.001**	1.21
4. Understanding of the factors that support the wellbeing of individuals and teams.	3.71	4.53	-23.44	330	<.001**	1.29
5. Knowledge of the support available for you and your colleagues.	3.68	4.49	-21.94	330	<.001**	1.21
6. Understanding of the tools to build a psychological first aid kit.	3.46	4.65	-24.20	330	<.001**	1.33
SUPPORTING YOUR COLLEAGUES/TEAM Learning outcome (n = 134)	Pre-Course Mean	Post-Course Mean	t	df	р	Cohen's d
Understanding how social and peer support contribute to wellbeing and good mental health.	3.90	4.72	-12.77	133	<.001**	1.10
2. Ability to recognise signs of stress and distress in others, including common mental health problems.	3.75	4.57	-14.68	133	<.001**	1.27
3. Understanding and having opportunity to practice listening skills and supportive conversations.	3.60	4.62	-14.79	133	<.001**	1.28
4. Ability to recognise risk and respond when people are in crisis.	3.67	4.57	-13.16	133	<.001**	1.14
5. Knowledge of what support is available and how to link people to help.	3.66	4.66	-15.12	133	<.001**	1.31
6. Knowledge of how to take care of yourself when supporting others.	3.72	4.67	-13.44	133	<.001**	1.16
POST TRAUMA SUPPORT Learning outcome (n = 80)	Pre-Course Mean	Post-Course Mean	t	df	р	Cohen's d
The ability to identify the kinds of experiences that may be traumatic.	4.08	4.69	-10.16	79	<.001**	1.14
2. Knowledge of the different ways that people can be affected.	3.81	4.72	-12.75	79	<.001**	1.43
3. Understanding the factors which influence our ability to cope and recover.	3.31	4.63	-16.26	79	<.001**	1.82
4. Increased confidence in recognising when people's responses and reactions may be trauma related.	3.48	4.54	-12.36	79	<.001**	1.38
5. Ability to deliver Psychological First Aid.	3.02	4.66	-20.09	79	<.001**	2.25
6. Recognising when people need additional support and knowing how to access this	3.69	4.62	-12.19	79	<.001**	1.36

^{**}Significant difference between means at .01 level.



Ambulance data (May 2021 - July 2022)

SUR	/EYS RETURNED	Pre-course	Post-course	Paired
	Staying well	206 (54%)	109 (28%)	95 (25%)
ij	Supporting your colleagues/team	66 (50%)	42 (32%)	22 (17%)
(+)	Post trauma support	45 (68%)	35 (53%)	19 (41%)

Courses	Attendees
40	383
18	133
8	66
66	383

Gender

Female
Male







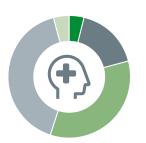
I learned some useful things that I can add to my psychological toolkit!

Age

18-29 30-29 40-49 50-59 60-69







Thanks for quality training. It's as beneficial to us as individuals as it is to us supporting our colleagues

Length of service

<1 year</p>
1-5 years
6-10 years
11-15 years
16-20 years
20> years







I've really enjoyed the trainings.Very informative and well led

Role

Nonmanagement
Management







I've come away with a quiet confidence that I will be able to assist my colleagues



Ambulance results

The paired t-test for the Ambulance SWUR course revealed statistically significant improvements in learning and knowledge scores between pre-test and post-test, with large effect sizes, across all learning outcomes.

The Wilcoxon signed rank tests for the Ambulance SYC/T and PTS courses revealed statistically significant improvements in scores between pre-test and post-test, with medium to large effect sizes, across all learning outcomes.

STAYING WELL Learning outcome (n = 95)	Pre-Course Mean	Post-Course Mean	t	df	р	Cohen's d
Understanding of the factors that contribute to good mental health.	3.99	4.63	-10.43	94	<.001**	1.07
2. Knowledge of the protective and risk factors which can affect the resilience of Emergency service staff.	3.48	4.55	-13.70	94	<.001**	1.41
3. Ability to recognise signs of stress and distress in ourselves and others.	3.85	4.52	-11.42	94	<.001**	1.17
4. Understanding of the factors that support the wellbeing of individuals and teams.	3.66	4.51	-12.35	94	<.001**	1.27
5. Knowledge of the support available for you and your colleagues.	3.55	4.37	-11.34	94	<.001**	1.16
6. Understanding of the tools to build a psychological first aid kit.	3 .45	4.62	-13.26	94	<.001**	1.36

SUPPORTING YOUR COLLEAGUES/TEAM Learning outcome (n = 22)	Pre-Course Mean	Post-Course Mean	Z	р	r
Understanding how social and peer support contribute to wellbeing and good mental health.	4.18	4.59	-2.17	.007**	.33
2. Ability to recognise signs of stress and distress in others, including common mental health problems.	3.91	4.64	-3.56	<.001**	.54
3. Understanding and having opportunity to practice listening skills and supportive conversations.	3.64	4.64	-3.64	<.001**	.55
4. Ability to recognise risk and respond when people are in crisis.	3.64	4.55	-3.54	<.001**	.53
5. Knowledge of what support is available and how to link people to help.	3.77	4.50	-3.36	<.001**	.51
6. Knowledge of how to take care of yourself when supporting others.	3.86	4.59	-3.42	<.001**	.52

POST TRAUMA SUPPORT Learning outcome (n = 19)	Pre-Course Mean	Post-Course Mean	Z	Р	r
The ability to identify the kinds of experiences that may be traumatic.	4.26	4.63	-2.33	.020*	.38
2. Knowledge of the different ways that people can be affected.	4.00	4.68	-3.13	.002**	.51
3. Understanding the factors which influence our ability to cope and recover.	3.37	4.58	-3.63	<.001**	.59
4. Increased confidence in recognising when people's responses and reactions may be trauma related.	3.58	4.58	-3.44	<.001**	.56
5. Ability to deliver Psychological First Aid.	2.95	4.68	-3.86	<.001**	.63
6. Recognising when people need additional support and knowing how to access this	3.74	4.61	-3.40	<.001**	.55

^{*}Significant difference between means at .05 level.

^{**}Significant difference between means at .01 level.



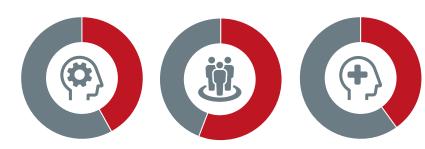
Fire data (June 2021 - July 2022)

SUR	/EYS RETURNED	Pre-course	Post-course	Paired
	Staying well	360 (59%)	182 (30%)	142 (23%)
	Supporting your colleagues/team	157 (47%)	112 (33%)	81 (24%)
(+)	Post trauma support	57 (40%)	59 (41%)	40 (28%)

Courses	Attendees
61	610
47	336
16	143
124	610

Gender

Female
Male



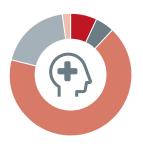
Genuinely one of the best courses I've been on in a long time

Age

18-29 30-29 40-49 50-59 60-69 70+







I definitely feel confident to help any of my colleagues who may be struggling now

Length of service

<1 year</p>
1-5 years
6-10 years
11-15 years
16-20 years
20> years







Great course with invaluable advice

Role

NonmanagementManagement







Insightful and life-saving training.
Know yourself better, boost your resilience and look after your team



Fire results

The paired t-tests for the Fire SWUR and SYC/T courses revealed statistically significant improvements in learning and knowledge scores between pre-test and post-test, with large effect sizes, across all learning outcomes.

The Wilcoxon signed rank test for Fire PTS revealed statistically significant improvements in scores between pre-test and post-test, with large effect sizes, across all learning outcomes.

STAYING WELL Learning outcome (n = 142)	Pre-Course Mean	Post-Course Mean	t	df	р	Cohen's d
Understanding of the factors that contribute to good mental health.	4.04	4.70	-12.77	141	<.001**	1.07
2. Knowledge of the protective and risk factors which can affect the resilience of Emergency service staff.	3.63	4.62	-16.58	141	<.001**	1.39
3. Ability to recognise signs of stress and distress in ourselves and others.	3.92	4.59	-16.60	141	<.001**	1.39
4. Understanding of the factors that support the wellbeing of individuals and teams.	3.81	4.57	-14.80	141	<.001**	1.24
5. Knowledge of the support available for you and your colleagues.	3.79	4.63	-16.56	141	<.001**	1.39
6. Understanding of the tools to build a psychological first aid kit.	3.53	4.73	-17.43	141	<.001**	1.46

SUPPORTING YOUR COLLEAGUES/TEAM Learning outcome (n = 81)	Pre-Course Mean	Post-Course Mean	t	df	р	Cohen's d
Understanding how social and peer support contribute to wellbeing and good mental health.	3.85	4.73	-11.97	80	<.001**	1.33
2. Ability to recognise signs of stress and distress in others, including common mental health problems.	3.72	4.58	-12.02	80	<.001**	1.34
3. Understanding and having opportunity to practice listening skills and supportive conversations.	3.63	4.60	-11.58	80	<.001**	1.29
4. Ability to recognise risk and respond when people are in crisis.	3.65	4.58	-10.38	80	<.001**	1.15
5. Knowledge of what support is available and how to link people to help.	3.69	4.72	-11.67	80	<.001**	1.30
6. Knowledge of how to take care of yourself when supporting others.	3.78	4.69	-11.04	80	<.001**	1.23

POST TRAUMA SUPPORT Learning outcome (n = 40)	Pre-Course Mean	Post-Course Mean	Z	р	r
The ability to identify the kinds of experiences that may be traumatic.	4.05	4.70	-5.10	<.001**	.57
2. Knowledge of the different ways that people can be affected.	3.78	4.72	-5.29	<.001**	.59
3. Understanding the factors which influence our ability to cope and recover.	3.37	4.63	-5.25	<.001**	.59
4. Increased confidence in recognising when people's responses and reactions may be trauma related.	3.60	4.53	-4.82	<.001**	.54
5. Ability to deliver Psychological First Aid.	3.11	4.65	-5.48	<.001**	.61
6. Recognising when people need additional support and knowing how to access this	3.80	4.61	-5.10	<.001**	.57

^{**}Significant difference between means at .01 level.



Police data (June 2021 - July 2022)

SUR	VEYS RETURNED	Pre-course	Post-course	Paired
	Staying well	207 (55%)	93 (25%)	69 (18%)
	Supporting your colleagues/team	39 (23%)	20 (12%)	8 (5%)
(+)	Post trauma support	11 (17%)	10 (15%)	6 (9%)

Courses	Attendees
39	378
19	173
8	66
66	378

Gender

Female
Male

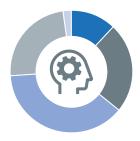


I got a lot out of it and feel like I've got far more resources than I had before

Age

18-29 30-29 40-49 50-59

50-59 60-69 70+







that my line managers attend, as they can contribute (in often very simple ways) to the resilience of staff

I've recommended

Length of service

<1 year</p>
1-5 years
6-10 years
11-15 years
16-20 years
20> years







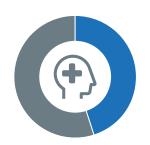
All staff should attend this input. Even those who feel their resilience is high, it's important to understand how that is achieved

Role

Nonmanagement
Management









Police results

The paired t-test for the Police SWUR course revealed statistically significant improvements in learning and knowledge scores between pre-test and post-test, with large effect sizes, across all learning outcomes.

The Wilcoxon signed rank tests for Police SYC/T and PTS courses revealed statistically significant improvements in scores between pre-test and post-test, with medium to large effect sizes, across all learning outcomes.

STAYING WELL Learning outcome (n = 69)	Pre-Course Mean	Post-Course Mean	t	df	Р	Cohen's d
Understanding of the factors that contribute to good mental health.	3.99	4.58	-7.35	68	<.001**	.89
2. Knowledge of the protective and risk factors which can affect the resilience of Emergency service staff.	3.59	4.51	-9.85	68	<.001**	1.19
3. Ability to recognise signs of stress and distress in ourselves and others.	3.93	4.45	-8.16	68	<.001**	.98
4. Understanding of the factors that support the wellbeing of individuals and teams.	3.71	4.48	-11.14	68	<.001**	1.34
5. Knowledge of the support available for you and your colleagues.	3.71	4.37	-7.35	68	<.001**	.89
6. Understanding of the tools to build a psychological first aid kit.	3.49	4.54	-8.37	68	<.001**	1.01

SUPPORTING YOUR COLLEAGUES/TEAM Learning outcome (n = 14)	Pre-Course Mean	Post-Course Mean	Z	p	r
Understanding how social and peer support contribute to wellbeing and good mental health.	4.00	4.79	-2.67	.008**	.50
2. Ability to recognise signs of stress and distress in others, including common mental health problems.	3.93	4.57	-2.46	.014*	.46
3. Understanding and having opportunity to practice listening skills and supportive conversations.	3.86	4.71	-2.81	.005**	.53
4. Ability to recognise risk and respond when people are in crisis.	3.93	4.57	-2.71	.007**	.51
5. Knowledge of what support is available and how to link people to help. $ \\$	3.79	4.71	-3.13	.002**	.59
6. Knowledge of how to take care of yourself when supporting others.	3.64	4.71	-2.54	.011*	.48

POST TRAUMA SUPPORT Learning outcome (n = 6)	Pre-Course Mean	Post-Course Mean	Z	р	r
The ability to identify the kinds of experiences that may be traumatic.	4.17	4.83	-2.00	.046*	.58
2. Knowledge of the different ways that people can be affected.	4.17	4.83	-2.00	.046*	.58
3. Understanding the factors which influence our ability to cope and recover.	3.00	4.83	-2.12	.034*	.61
4. Increased confidence in recognising when people's responses and reactions may be trauma related.	3.33	4.83	-2.04	.041*	.59
5. Ability to deliver Psychological First Aid.	3.33	4.67	-2.21	.027*	.64
6. Recognising when people need additional support and knowing how to access this	4.00	4.75	-2.04	.041*	.59

^{*}Significant difference between means at .05 level.

 $[\]hbox{\tt **Significant difference between means at .01 level}.$



Volunteer Responders data (October 2021 - July 2022)

SUR	VEYS RETURNED	Pre-course	Post-course	Paired
	Staying well	34 (97%)	24 (67%)	23 (66%)
ij	Supporting your colleagues/team	20 (91%)	17 (77%)	16 (72%)
(+)	Post trauma support	18 (95%)	16 (84%)	15 (79%)

Courses	Attendees
9	35
3	22
3	21
15	35

Gender

Female
Male







An engaging and interesting course that I'm sure will be helpful in so many ways going forward

Age

18-29 30-29 40-49 50-59 60-69 70+







It was so well structured and paced and I felt far better informed at the end

Length of service

<1 year</p>
1-5 years
6-10 years
11-15 years
16-20 years
20> years







A great session, really relevant and informative and such an important support line for our volunteers

Role

Nonleadership Leadership









Volunteers results

The Wilcoxon signed rank tests for Volunteers SWUR, SYC/T and PTS courses revealed statistically significant improvements in scores between pre-test and post-test, with large effect sizes, across all learning outcomes.

STAYING WELL Learning outcome (n = 23)	Pre-Course Mean	Post-Course Mean	z	р	r
Understanding of the factors that contribute to good mental health.	3.74	4.52	-3.45	<.001**	.51
2. Knowledge of the protective and risk factors which can affect the resilience of Emergency service staff.	3.22	4.54	-4.12	<.001**	.61
3. Ability to recognise signs of stress and distress in ourselves and others.	3.77	4.58	-3.94	<.001**	.58
4. Understanding of the factors that support the wellbeing of individuals and teams.	3.28	4.50	-3.96	<.001**	.58
5. Knowledge of the support available for you and your colleagues.	3.43	4.52	-3.96	<.001**	.58
6. Understanding of the tools to build a psychological first aid kit.	3.04	4.65	-4.09	<.001**	.60
SUPPORTING YOUR COLLEAGUES/TEAM Learning outcome (n = 16)	Pre-Course Mean	Post-Course Mean	Z	р	r
Understanding how social and peer support contribute to wellbeing and good mental health.	3.56	4.75	-3.31	<.001**	.59
2. Ability to recognise signs of stress and distress in others, including common mental health problems.	3.56	4.44	-3.28	.001**	.58
3. Understanding and having opportunity to practice listening skills and supportive conversations.	3.13	4.63	-3.38	<.001**	.60
4. Ability to recognise risk and respond when people are in crisis.	3.50	4.56	-3.15	.002**	.56
5. Knowledge of what support is available and how to link people to help. $ \\$	3.25	4.56	-3.38	<.001**	.60
6. Knowledge of how to take care of yourself when supporting others.	3.25	4.63	-3.51	<.001**	.62
POST TRAUMA SUPPORT Learning outcome (n = 15)	Pre-Course Mean	Post-Course Mean	Z	р	r
The ability to identify the kinds of experiences that may be traumatic.	3.87	4.67	-3.21	.001**	.59
2. Knowledge of the different ways that people can be affected.	3.53	4.73	-3.29	.001**	.60
3. Understanding the factors which influence our ability to cope and recover.	3.20	4.60	-3.52	<.001**	.64
4. Increased confidence in recognising when people's responses and reactions may be trauma related.	3.07	4.40	-3.40	<.001**	.62
5. Ability to deliver Psychological First Aid.	2.73	4.63	-3.31	<.001**	.60
6. Recognising when people need additional support and knowing how to access this	3.20	4.60	-3.21	.001**	.59

^{**}Significant difference between means at .01 level.



Staying Well Understanding Resilience and Self-Care: Pre and post course surveys

Note that the process of the proce													
Column C					raining course).	NO NO						LIFELI	NES AND
Column C						Ple	ase indicate how strongly you agree o	r disagree wit	the following s	tatements			- 1
1. The control of the dischards excluded used the place and the plac		ad Trip prior to co	ompleting this o	questionnaire?		_ -	are maleute now strongly you agree o	Strongly		Neither Agree nor	Disagree		
The region of the control training in insertal haplins The region of the control trai		ww.lifelines.scot)?			1.	I have a good understanding of	5	4		2	1	- 1
2. These appointmentation of the control of the		hoolah 2					the factors which contribute to						
1.	es □ No	neartii?				2.	I have a good understanding of the factors which support the	5	4	3	2	1	
A	es 🗆 No	oport?				3.	I have a good understanding of	5	4	3	2	1	
The content of the													- 1
Section Column	mbulance	ers				_	the risk factors which can affect the resilience of Emergency	5	4	3	2	1	
the protective front which on the protective front count which we be compared to the protective front which contribute to the protective front which which contribute to the protective front which contribute to the protective front which which contribute to the protective front which contribute to the protective front which the protective front which the protective front which which contribute to the pr													
The long top one (in off and watering and value from a surface of a control of the long of the late	What is your age?] 60-69 □ 70	or over			_	the protective factors which can affect the resilience of	5	4	3	2	1	
Note Surpling 11-15 years 10-16 years 11-15 year			nergency service	es?		-							- 1
1. These agood understanding of a large modern what material is available on the Uniform Score (Bulletine Score)	ess than 1 year				an 20 years		recognise the signs of stress and	5	4	3	2	1	
Staying Well Understanding Featlines and Self-Care Post-Course Survey	mployed 🗆 Volunteer 🗆 Retired						recognise the signs of stress and	5	4	3	2	1	
Staying Well Understanding Resilience and Self-Circle Post-Course Survey Q1. Please enter your rame here (we alk for this to we can compare your scores before and after the training course).							what support is available for me	5	4	3	2	1	
Staying Well Understanding Rasilience and Self-Care: Prot-Course Survey C2. Please enter your name here we ask for this to we can compare your scores before and after the training course).						9.	I have a good understanding of	5	4	3	2	1	
Staying Well Understanding Resilience and Self-Care: Post Course Survey Q1. Please enter your name here (we ask for this so we can compare your screen before and after the training course). Q2. New you completed the Lifelines Staying Well Road Trip prior to completing this questionnaire?						10.	psychological first aid kit I feel confident to speak to	5	4	3	2	1	
Staying Well Understanding Resilience and Self-Care: Post Course Survey Q1. Please enter your name here (we saik for this so we can compare your scores before and affect the training course). Q2. How you completed the Lifelines Staying Well Road Trip prior to completing this questionnaire? Q3. Are you conflicted in what material is available on the Lifelines Scottand website (young lifelines scott)? Q6. Which service training did you attending? Ambulance Pire Poilce Volunteers Please indicate how strongly you agree or disagree with the following statements: Strongly Agree Agree more Disagree To the factors which contribute to 5 4 3 2 1 1. These a good understanding of the factors which contribute to 5 4 3 2 1 1. The we good understanding of the factors which contribute to 5 4 3 2 1 1. The wellowing of individuals is the factors which contribute to 5 4 3 2 1 1. The wellowing of individuals is the factor which contribute to 5 4 3 2 1 1. The information provided was 5 4 3 2 1 1. The information provided was 5 4 3 2 1 1. The information provided was 5 4 3 2 1 1. The information provided was 5 4 3 2 1 1. The information provided was 5 4 3 2 1 1. The information provided was 5 4 3 2 1 1. The information provided was 5 4 3 2 1 1. The information provided was 5 4 3 2 1 1. The information provided was 5 4 3 2 1 1. The information provided was 5 4 3 2 1 1. The information provided was 5 4 3 2 1 1. The information provided was 5 4 3 2 1 1. The information provided was 5 4 3 2 1 1. The information provided was 5 4 3 2 1 1. The information provided was 5 4 3 2 1 1. The information provided was 5 4 3 2 1 1. The information provided was 5 4 3 2 1 1. The information provided was 5 4 3 2 1 1. The information conviewed was 5 4 3 2 1 1. The information conviewed was 5 4 3 2 1 1. The information conviewed was													- 1
Q1. Please enter your name here (we ask for this so we can compare your scores before and after the training course). Q2. Nave you completed the Lifelines Staying Well Road Trip prior to completing this questionnaire? Yec DNO							how they are and to listen to	,	•	,	-	•	
Q1. Please enter your name here (we ask for this so we can compare your scores before and after the training course). Q2. Nave you completed the Lifelines Staying Well Road Trip prior to completing this questionnaire? Yec DNO	7				35.	I TEEL THE	(
Q1. Please enter your name here (we ask for this so we can compare your scores before and after the training course). C2. Have you completed the Lifelines Staying Well Road Trip prior to completing this questionnaire? Yes DNo C3. Are you confident in what material is available on the Lifelines Scotland website (www.lifellines scotl)? C4. Which service training did you attending? Ambulance Fire Police Volunteers Please indicate how strongly you agree or disagree with the following statements Strongly Agree Neither Disagree Disagree Agree Neither Disagree Strongly Agree Neither Disagree 1. I have a good understanding of 5	Staving Well Under	tanding Pacilian	o and Solf-Car	o: Boet-Course Su	TOTAL STATE OF THE PARTY OF THE	SCOTLAN	Ö						
Q2 Have you completed the Lifelines Staying Well Road Trip prior to completing this questionnaire? Yes No Q3. Are you confident in what material is available on the Lifelines Scotland website (www.lifelines.scotl? Q4. Are you confident in what material is available on the Lifelines Scotland website (www.lifelines.scotl? Q5. Are you confident in what material is available on the Lifelines Scotland website (www.lifelines.scotl? Q6. Which service training did you attending? Agree Police O'dulinteers	<u> </u>					ng course)						110	LIFELIA
Q2. Have you completed the Lifelines Staying Well Road Trip prior to completing this questionnaire? Q3. Are you confident in what material is available on the Lifelines Scotland website (https://www.lifelines.scotl? Q3. Are you confident in what material is available on the Lifelines Scotland website (https://www.lifelines.scotl? Q3. Are you confident in what material is available on the Lifelines Scotland website (https://www.lifelines.scotl? Q3. Are you confident in what material is available on the Lifelines Scotland website (https://www.lifelines.scotl? Q4. Are you confident in what material is available on the Lifelines Scotland website (https://www.lifelines.scotl? Q5. Which service training did you attending? Q5. Are you agree or disagree with the following statements about the Lifelines training session of the factors which contribute to good mental health Q4. Agree nor Disagree Disagree	Q1. Flease effer your name here (we ask	. Tor triis so we car	r compare you	scores before an	id after the training	ing course).	9. I have a good understand	ing of	5	4	,	,	SCOLCE
Pies No No No No No No No N	Q2. Have you completed the Lifelines Sta	ying Well Road Tr	ip prior to com	pleting this quest	ionnaire?		what support is available	for me	5	4	3	2	1
Pess No		available on the	Lifelines Scotla	nd website (www.	.lifelines.scot)?		I have a good understand	ing of	5	4	3	2	1
Co. Which service duming us you agree or location by Wounteers Police Police Police Police Volunteers							psychological first aid kit						
Please indicate how strongly you agree or disagree with the following statements Strongly Agree Agree Neither Agree nor Disagree Disagree Disagree Please indicate how strongly you agree or disagree with the following statements Strongly Agree Neither Agree nor Disagree Please indicate how strongly you agree or disagree with the following statements about the Ufelines training session Strongly to the factors which contribute to good mental health Strongly to the factors which support the wellbeing of individuals Strongly to the factors which support the wellbeing of individuals Strongly to the factors which support the wellbeing of leams Strongly to the factors which support the wellbeing of teams Strongly to the factors which support the wellbeing of teams Strongly to the factors which support the wellbeing of teams Strongly to the factors which support the wellbeing of teams Strongly to the factors which support the wellbeing of teams Strongly to the factors which support the wellbeing of teams Strongly to the factors which support the wellbeing of teams Strongly to the support the wellbeing of teams Strongly to the factors which support the wellbeing of teams Strongly to the factors which support the wellbeing of teams Strongly to the factors which support the wellbeing of teams Strongly to the factors which support the wellbeing of teams Strongly to the factors which support the wellbeing of teams Strongly to the factors which support the wellbeing of teams Strongly to the factors which support the wellbeing of teams Strongly to the factors which support the wellbeing of teams Strongly to the factors which support the well the factors whi							others and ask for help		-			_	-
Strongly Agree Agree Agree Agree Agree Agree Agree nor Disagree Disagree Disagree	Please indicate how strongly you agree	or disagree with t	he following st	atements			how they are and to liste		5	4	3	2	1
Please indicate how strongly you agree or disagree with the following statements about the Lifelines training session 1. I have a good understanding of the factors which contribute to good mental health 2. I have a good understanding of the factors which support the wellbeing of individuals 3. I have a good understanding of the factors which support the wellbeing of individuals 3. I have a good understanding of the factors which support the wellbeing of learns 4. I have a good understanding of the factors which can affect the resilience of Emergency Service Staff 5. I have a good understanding of the factors which understanding of the factors which understanding of the factors which understanding of the resilience of Emergency Service staff 6. I am confident I would be able to recognise the signs of stress and distress in myself 7. I am confident I would be able to 5 4 3 2 1 1 The information covered was of 5 4 3 2 1 1 The information covered was of 5 4 3 2 1 1 The information covered was of 5 4 3 2 1 1 The information covered was of 5 4 3 2 1 1 The information covered was of 5 4 3 2 1 1 The information covered was of 5 4 3 2 1 1 The information covered was of 5 4 3 2 1 1 The information covered was 5 4 3 2 1 1 The information covered was 5 4 3 2 1 1 The information covered was 5 4 3 2 1 1 The information covered was 5 4 3 2 1 1 The information covered was 5 4 3 2 1 1 The information covered was 5 4 3 2 1 1 The information covered was 5 4 3 2 1 1 The information covered was 5 4 3 2 1 1 The information covered was 5 4 3 2 1 1 The information covered was 5 4 3 2 1 1 The information covered was 5 4 3 2 1 1 The information covered was 5 4 3 2 1 1 The information covered was 5 4 3 2 1 1 The information covered was 5 4 3 2 1 1 The information covered was 5 5 4 3 3 2 1 1 The information covered was 5 4 3 3 2 1 1 The information covered was 5 5 4 3 3 2 1 1 The information covered was 5 5 4 3 3 2 1 1 The information covered was 5 5 4 3 3 2 1 1 The information covered was 5 5 4 3 3 2 1		Strongly		Neither	Disagree		·						
the factors which contribute to good understanding of the factors which support the wellbeing of individuals 3. I have a good understanding of the factors which support the wellbeing of individuals 3. I have a good understanding of the factors which support the wellbeing of the factors which support the wellbeing of tendividuals 4. I have a good understanding of the factors which an affect the resilience of ferregency Service Staff 5. I have a good understanding of the factors which can affect the resilience of Emergency Service staff 6. I am confident I would be able to 5 4 3 2 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1		VRIES				Disagree	Please indicate how strongly	you agree or o	lisagree with the	following state	ments about ti	ne Lifelines trai	ning session
2. I have a good understanding of the factors which support the wellbeing of individuals 3. I have a good understanding of the factors which support the wellbeing of individuals 3. I have a good understanding of the factors which support the wellbeing of teams 4. I have a good understanding of the information covered was of an appropriate standard 4. I have a good understanding of the risk factors which can affect the resilience of Emergency Service Staff 5. I have a good understanding of the protective factors which can affect the resilience of Emergency Service staff 6. I am confident I would be able to recognise the signs of stress and distress in myself 7. I am confident I would be able to 5 4 3 2 1 1 2 1 3 2 1 3 3 2 1 3 3 3 3 3 3 3	the factors which contribute to	5	4	3	2	1					Agree nor	Disagree	
3. I have a good understanding of 5 4 3 2 1 teachers which support the wellbeing of teams 4. I have a good understanding of 5 4 3 2 1 teachers which support the wellbeing of teams 5. I have a good understanding of 5 4 3 2 1 teachers which can affect the resilience of femergency Service Staff 5. I have a good understanding of 5 4 3 2 1 teachers which can affect the resilience of Emergency Service Staff 6. I am confident I would be able to 5 4 3 2 1 teachers in myself 7. I am confident I would be able to 5 4 3 2 1 teachers which can affect the resilience of Emergency Service Staff 7. I am confident I would be able to 5 4 3 2 1 teachers which can affect the resilience of Emergency Service Staff 7. I am confident I would be able to 5 4 3 2 1 teachers which can affect the resilience of Emergency Service Staff 8. The quality of teaching was presented 5 4 3 2 1 teachers was appropriate standard 9. Table a good understanding of 5 4 3 2 1 teachers which can affect the resilience of Emergency Service staff 9. The training supported my needs 5 4 3 2 1 teachers well 9. The training supported my needs 5 4 3 2 1 teachers well 9. The quality of teaching was of an appropriate standard 9. The public of teaching was of an appropriate standard 9. The public of teaching was of an appropriate standard 9. The public of teaching was of an appropriate standard 9. The public of teaching was of an appropriate standard 9. The public of teaching was of an appropriate standard 9. The public of teaching was of an appropriate standard 9. The public of teaching was of an appropriate standard 9. The public of teaching was of an appropriate standard 9. The public of the pub	the factors which support the	5	4	3	2	1			5	4		2	1
wellbeing of teams 4. I have a good understanding of 5 4 3 2 1 the information covered was of an appropriate standard 4. I have a good understanding of 5 4 3 2 1 the information covered was 5 4 3 2 1 the information covered was 5 4 3 2 1 the information covered was 5 4 3 2 1 the protective factors which can affect the resilience of Emergency Service Staff 5. I have a good understanding of 5 4 3 2 1 the information covered was 5 4 3 2 1 the protective factors which can affect the resilience of Emergency Service staff 6. I am confident I would be able to 5 4 3 2 1 the information covered was 5 4 4 3 2 1 the information covered was 5 4 4 3 2 1 the information covered was 5 4 4 3 2 1 the information covered was 5 4 4 3 2 1 the information covered was 5 4 4 3 2 1 the information covered was 5 4 4 3 2 1 the information covered was 5 4 4 3 2 1 the information covered was 6 5 4 3 2 1 the information covered was 6 5 4 3 2 1 the inform	I have a good understanding of	5	4	3	2	1		sented	5	4	3	2	1
the risk factors which can affect the resilience of Emergency Service Staff 5. I have a good understanding of the protective factors which can affect the resilience of Emergency Service staff 6. I am confident I would be able to recognise the signs of stress and distress in myself 7. I am confident I would be able to 5 4 3 2 1 8. The unality of teaching was of an 5 4 3 2 1 8. The unality of teaching was of an 5 4 3 2 1 8. The unality of teaching was of an 5 4 3 2 1 9. The unality of teaching was of an 5 4 3 2 1 1. The unality of teaching was of an 5 4 3 2 1 1. The unality of teaching was of an 5 4 3 2 1 1. The unality of teaching was of an 5 4 3 2 1 1. The unality of teaching was of an 5 4 3 2 1 2. The unappropriate standard	wellbeing of teams	r.	4	2	3	4		was of	5	4	3	2	1
5. I have a good understanding of 5 4 3 2 1 relevant to the job id of the protective factors which can affect the resilience of Emergency Service staff 6. I am confident I would be able to recognise the signs of stress and distress in myself 7. I am confident I would be able to 5 4 3 2 1 8. The quality of teaching was of an 5 4 3 2 1 appropriate standard	the risk factors which can affect the resilience of Emergency	5	4	3	2	1	The information covered relevant to my service	was	5	4	3	2	1
affect the resilience of Emergency Service staff 6. I am confident I would be able to 5 4 3 2 1 relevant to my personal life well 6. I am confident I would be able to 5 4 3 2 1 well 7. I am confident I would be able to 5 4 3 2 1 appropriate standard	I have a good understanding of the protective factors which can	5	4	3	2	1	relevant to the job I do						
b. I am contident I would be able to 5 4 3 2 1 well recognise the signs of stress and distress in myself 7. I am confident I would be able to 5 4 3 2 1 appropriate standard	affect the resilience of								5	4	3	2	1
7. I am confident I would be able to 5 4 3 2 1	recognise the signs of stress and	5	4	3	2	1	well						
I GEORGINS UI SUESS dRD I G There was enough time allocated 5 A 3 7 1		5	4	3	2	1			5	4	3	2	1



Supporting Your Colleagues/Team: Pre and post course surveys

Supporting Your Colleagues/Team: Pre-Course Survey	A
Q1. Please enter your name here (we ask for this so we can compare your scores before and after the training course)).
Q2. Have you completed the Lifelines Staying Well, Understanding Resilience and Self Care course?	
□ Yes □ No	
Q3. Have you visited the Lifelines Scotland website (<u>www.lifelines.scot</u>)?	_
□ Yes □ No	
Q4. Have you previously attended training in mental health?	_
□ Yes □ No	
If yes, please tell us what training you've had	
If yes, please tell us what training you've had Q6. Which service training are your attending? Ambulance	
Q7. What is your gender?	
☐ Male ☐ Female ☐ Other	
Q8. What is your age?	_
□ 18-29 □ 30-39 □ 40-49 □ 50-59 □ 60-69 □ 70 or over	
Q9. How long have you (or did you) worked or volunteered with the emergency services?	
□ Less than 1 year □ 1-5 years □ 6-10 years □ 11-15 years □ 16-20 years □ More than 20 years	
Q10. What is your role in the emergency services?	
□ Employed □ Volunteer □ Retired	
Please tell us which organization you volunteer with	
Q11. Do you have a management or leadership role?	
□ Yes □ No	



	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
I have a good understanding how social and peer support contribute to wellbeing and good mental health	5	4	3	2	1
I am confident I would be able to recognise signs of stress and distress in others, including common mental health problems	5	4	3	2	1
I have a good understanding of and have the opportunity to practice listening skills and supportive conversations	5	4	3	2	1
I am confident I would be able to recognise risk and respond when people are in crisis	5	4	3	2	1
I have a good understanding of the support that is available and how to link people to help	5	4	3	2	1
I have a good understanding of how to take care of myself when supporting others	5	4	3	2	1



Q1. Please enter your name here (we ask for this so we can compare your scores before and after the training course).

Q2. Which service training did you attending?

Q3. Are you confident in what material is available on the Lifelines Scotland website (www.lifelines.scot)? □ Yes □ No

		Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
	I have a good understanding how social and peer support contribute to wellbeing and good mental health	5	4	3	2	1
	I am confident I would be able to recognise signs of stress and distress in others, including common mental health problems	5	4	3	2	1
	I have a good understanding of and have the opportunity to practice listening skills and supportive conversations	5	4	3	2	1
4.	I am confident I would be able to recognise risk and respond when people are in crisis	5	4	3	2	1
5.	I have a good understanding of the support that is available and how to link people to help	5	4	3	2	1
	I have a good understanding of how to take care of myself when supporting others	5	4	3	2	1



	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
The information provided was clear and easy to understand	5	4	3	2	1
The information was presented at a pace I could follow	5	4	3	2	1
 The information covered was of an appropriate standard 	5	4	3	2	1
 The information covered was relevant to my service 	5	4	3	2	1
 The information covered was relevant to the job I do 	5	4	3	2	1
The information covered was relevant to my personal life	5	4	3	2	1
 The training supported my needs well 	5	4	3	2	1
 The quality of teaching was of an appropriate standard 	5	4	3	2	1
There was enough time allocated to discussion/questions	5	4	3	2	1
There was enough time allocated to the presentation	5	4	3	2	1



Post Trauma Support: Pre and post course surveys

Post Trauma Support: Pre-Course Survey Q1. Please enter your name here (we ask for this so we can compare your scores before and after the training course). Q2. Have you completed the Lifelines Staying Well, Understanding Resilience and Self Care and Supporting Your Colleagues courses? Q3. Have you visited the Lifelines Scotland website (<u>www.lifelines.scot</u>)? ☐ Yes ☐ No Q4. Have you previously attended training in mental health? ☐ Yes ☐ No If yes, please tell us what training you've had Q5. Have you previously attended training in Post Trauma Support or Psychological First Aid? Q6. Which service training are your attending? □ Ambulance □ Fire □ Police □ Volunteers ☐ Male ☐ Female ☐ Other Q8. What is your age? □ 18-29 □ 30-39 □ 40-49 □ 50-59 □ 60-69 □ 70 or over Q9. How long have you (or did you) worked or volunteered with the emergency services? □ Less than 1 year □ 1-5 years □ 6-10 years □ 11-15 years □ 16-20 years □ More than 20 years Q10. What is your role in the emergency services? ☐ Employed ☐ Volunteer ☐ Retired Please tell us which organization you volunteer with Q11. Do you have a management or leadership role?



	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
I have a good understanding of the kinds of experiences that may be traumatic	5	4	3	2	1
I have a good understanding of the different ways that people can be affected by trauma	5	4	3	2	1
I am confident in my ability to recognise when people's responses and reactions may be trauma related	5	4	3	2	1
 I have a good understanding of the factors which influence people's ability to cope and recover following trauma exposure 	5	4	3	2	1
5. I know what Psychological First Aid is	5	4	3	2	1
6. I am able to deliver Psychological First Aid	5	4	3	2	1
 I am confident I can recognise when people need additional support 	5	4	3	2	1
I know how to access additional support if necessary	5	4	3	2	1

Post Trauma Support: Pre-Course Survey

Q1. Please enter your name here (we ask for this so we can compare your scores before and after the training course).

Q2. Which service training did you attending?

□ Ambulance □ Fire □ Police □ Volunteers

Q3. Are you confident in what material is available on the Lifelines Scotland website (<u>www.lifelines.scot</u>)?

Yes \(\subseteq \) No

⊔ Yes ⊔ No

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
I have a good understanding of the kinds of experiences that may be traumatic	5	4	3	2	1
 I have a good understanding of the different ways that people can be affected by trauma 	5	4	3	2	1
I am confident in my ability to recognise when people's responses and reactions may be trauma related	5	4	3	2	1
I have a good understanding of the factors which influence people's ability to cope and recover following trauma exposure	5	4	3	2	1
 I know what Psychological First Aid is 	5	4	3	2	1
6. I am able to deliver Psychological First Aid	5	4	3	2	1
 I am confident I can recognise when people need additional support 	5	4	3	2	1
8. I know how to access additional support if necessary	5	4	3	2	1



	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
The information provided was clear and easy to understand	5	4	3	2	1
The information was presented at a pace I could follow	5	4	3	2	1
The information covered was of an appropriate standard	5	4	3	2	1
The information covered was relevant to my service	5	4	3	2	1
5. The information covered was relevant to the job I do	5	4	3	2	1
5. The information covered was relevant to my personal life	5	4	3	2	1
 The training supported my needs well 	5	4	3	2	1
 The quality of teaching was of an appropriate standard 	5	4	3	2	1
There was enough time allocated to discussion/questions	5	4	3	2	1
There was enough time allocated to the presentation	5	4	3	2	1