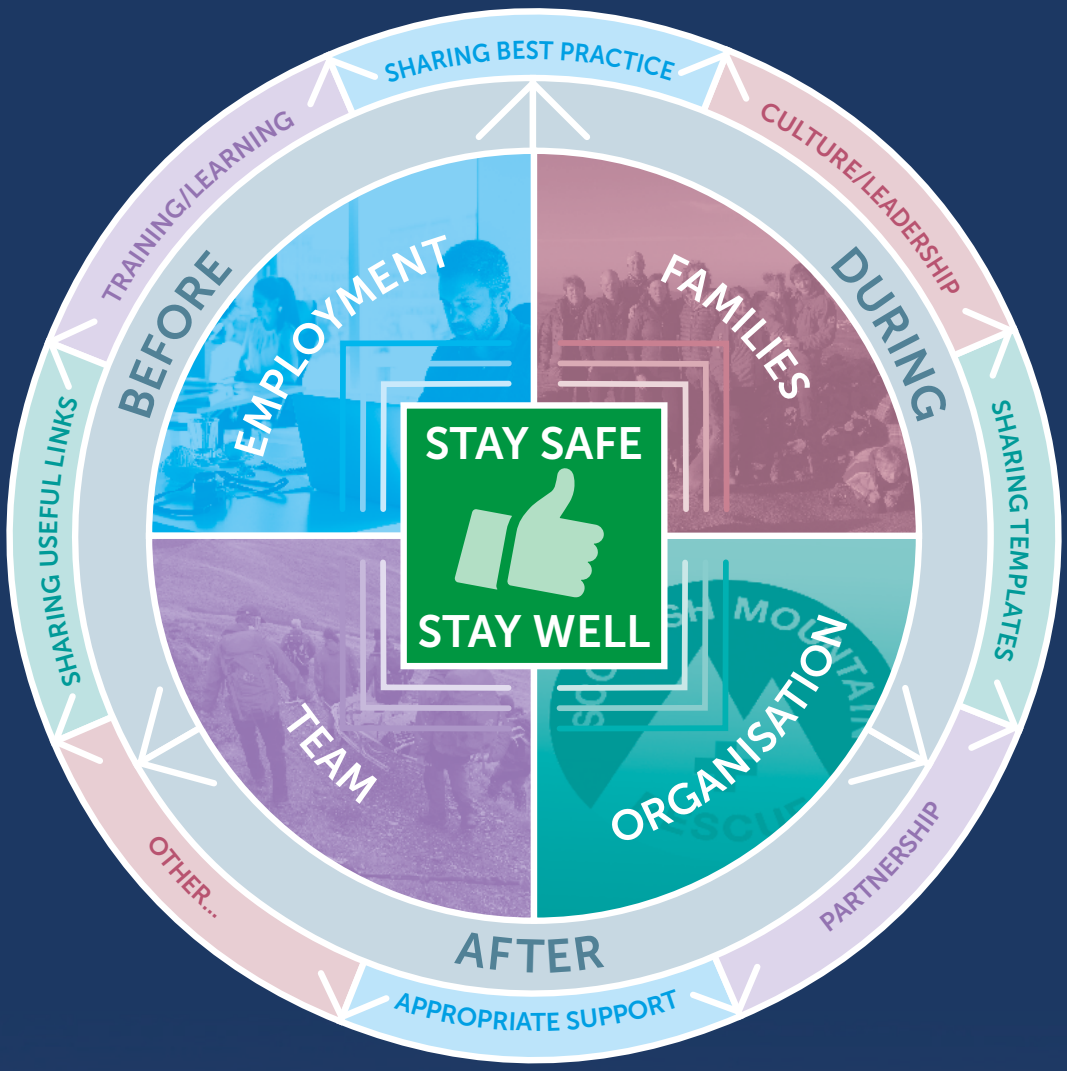
INTRODUCING A WELLBEING FRAMEWORK



FOR VOLUNTEER RESPONDERS IN MOUNTAIN RESCUE IN SCOTLAND

SCOTTISH MOUNTAIN RESCUE®

The Wellbeing Framework should be considered as a tool to use when developing local, and national, resilience and support "packages" for use across volunteer responder organisations.

Version 1 was prepared by the UKSAR Wellbeing Planning Group August 2018 (Appendix 2)

Presented at the Emergency Services Show at the NEC on 19th September 2018

It was agreed that member organisations could take the UKSAR Wellbeing Framework Version 1 and amend and adapt to meet the needs of the organisation, acknowledging the work of the UKSAR Wellbeing Working Group in the process.

The version used in this document, the SMR Wellbeing Framework, was prepared for Mountain Rescue in Scotland between February and October 2019 following input from team members at an SMR Wellbeing weekend event and the supporting text was updated January 2020.

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Contents

Introduction ..... Page 3
SMR Wellbeing Framework ..... Page 4
Explaining the layers ..... Page 4-5
Each layer in detail – how it works ..... Page 6-8
Making it work – next steps ..... Page 9-10
UKSAR Wellbeing Planning Group 2018 ..... Page 11
UKSAR Wellbeing Framework version 1 ..... Page 11

Introduction

The Wellbeing Framework should be considered as a tool to use when developing local, and national, resilience and support "packages" for use across volunteer responder organisations. It aims to encourage and support a holistic approach to team member wellbeing.

Membership of a voluntary responder team should be a rewarding and fulfilling experience. Indeed, it can be seen to tick all five of the commonly referred to "Five ways to Wellbeing" – **Connect, Be Active, Keep Learning, Give,** and **Take Notice**. But, across the world, it is recognised that within volunteer (and full time) responder organisations this wellbeing and good mental health can be challenged by some of the tasks that team members can be exposed to, and this in turn has potential impacts on family, employment, the team, and life outside of volunteering.

As Volunteer Responders, we need to recognise that, on occasions, such impacts can have a significant effect on the wider team and even the community, especially in the more remote areas of our country where communities are smaller and more close-knit. We need to acknowledge that the demands placed on us as volunteer responders not only to train regularly, but also to respond at a moment's notice, can put a strain on both ourselves and those around us.

Collectively, the organisations that were part of the UKSAR Wellbeing Group (see appendix 1) believe that individual members, families, teams and national organisations should encourage wellbeing training and support mechanisms to suit the needs of volunteers within local teams, the areas of the country in which they operate, and the characteristics of the membership. Training should encompass all aspects of raising awareness, together with increasing knowledge and skills. Training and support "gaps" should be identified and means to address these considered.

This should be championed locally within teams and by national bodies with a view to building overall capacity within our volunteers to deal with issues, and at least to recognise and be more open to discuss wellbeing. Teams can deliver local sessions within their training programmes to support this general raising of awareness and building/refreshing skill sets. National organisations can help support training as appropriate. In this way, team members and teams will build more capacity to recover from and/or to endure the challenges they might face – they will build and strengthen resilience.

The SMR Wellbeing Framework aims to take a holistic approach to volunteer responder wellbeing and resilience. This expands on previous initiatives, such as Trauma Risk Management (TRiM) training, which are more suited to post-event intervention/support, and for various reasons, and from experience, have not been easily adopted in volunteer organisations such as mountain rescue.

Looking after wellbeing should be seen as just as important as other training that goes to help protect the physical health and safety of members. Teams should manage all activities taking account of both the risks to both physical and mental health of team members.

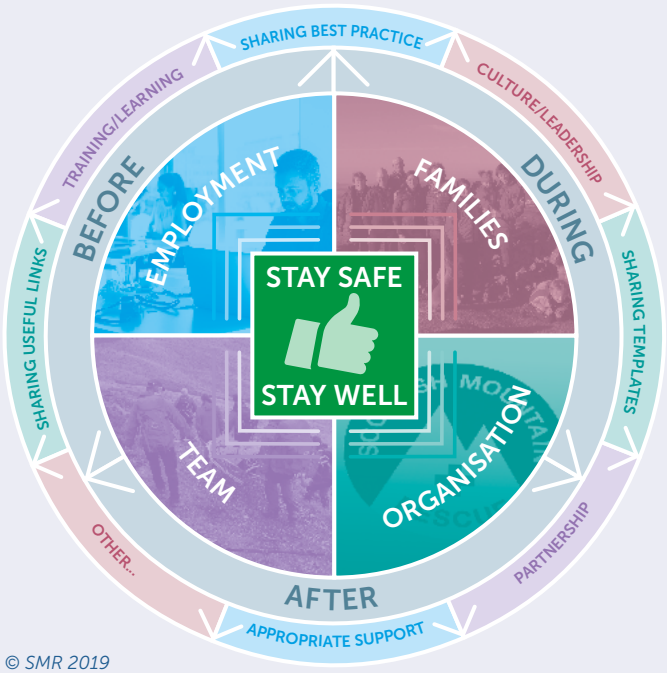
As awareness, knowledge and skills increase; as conversations become more open; and as we talk and listen rather than bottling up; then collectively we will help to break down barriers of stigma that are often associated with mental health issues and achieve better overall outcomes for wellbeing and the capacity to recover and/or endure – we will build and strengthen resilience.

SMR Wellbeing Framework

"Framework - a basic structure underlying a system, or concept"

The framework has been developed to help guide a structured approach to designing and implementing good wellbeing practice and support for volunteer responders - the core statement of STAY SAFE, STAY WELL is central to the wellbeing and resilience of the individual volunteer (#staysafestaywell).

The framework diagram is shown opposite and each section/layer will be explained:



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Explaining the layers

1 STAY SAFE, STAY WELL

The core is our objective for mountain rescue volunteer responders to STAY SAFE, STAY WELL. We start here with the wellbeing issues we wish to explore. For example, what would we need to consider to stay safe and stay well whilst carrying out a stretcher lower; a body recovery; searching an avalanche area; searching for a high risk missing person; or even deploying to a callout.

However, the framework does not have to be limited to operational activities. It can also be used to consider general membership of a team – recognising that there are demands placed on us as volunteer responders not only to train regularly, but also to respond at a moment's notice, and that this can put a strain on both ourselves and those around us.

It can be used to explore PROTECTIVE FACTORS - the things you value in your role as volunteer responders and that can keep you well; and RISK FACTORS - the most challenging aspects of being volunteer responders.

1

2 KEY GROUPS

There are five key groups to consider when using the framework – the individual (the central focus); the family; the employer (or employment), the team; and the organisation. All groups should be encouraged to embrace the framework and work together since each group may contribute to overall success.

In the Mountain Rescue context these groups would be represented by:

Individual (the central focus) = the volunteers

Families = "families" also means significant others, partners, children, parents for example

Employment = an employer or self employed

Team = the individual rescue team

Organisation = the national organisation, eg Scottish Mountain Rescue

3 TIME PHASES

Each of these groups is considered through different time phases – before, during and after. What can be done before (preparatory); what can be done during (action); and what can be done to support afterwards (recovery). The UKSAR Working Group identified that volunteer induction, retention and retirement were areas worth considering and these can neatly fit the before, during and after phases.

4 SUPPORT

The last layer is used to help identify the resources/actions/commitments required to support each group through each phase (noting that the support can also be provided between groups).

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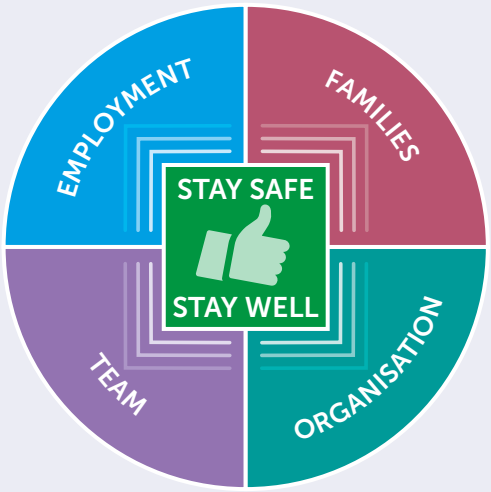

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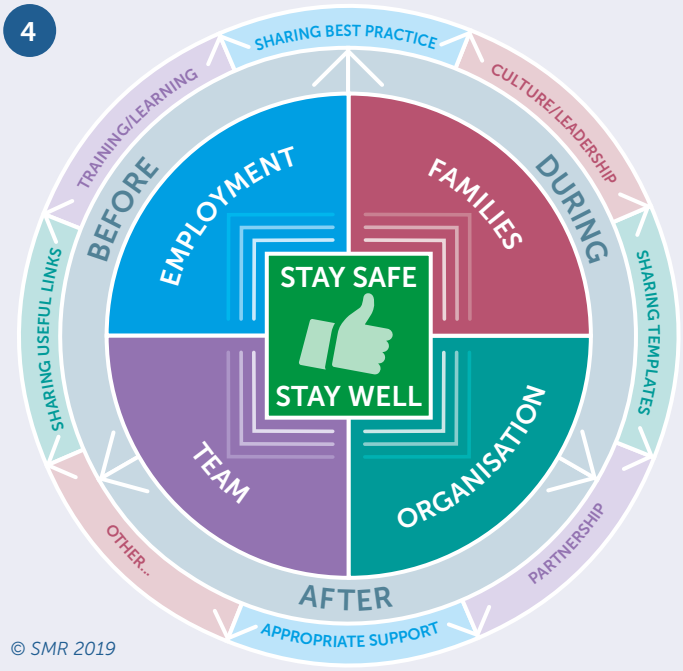

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Each layer in detail – how it works

1 As an example, we will consider STAY SAFE STAY WELL in relation to psychological wellbeing that might be affected by a difficult or potentially traumatic incident, for example a body recovery.

2 Perhaps using a tabular format might help to draw out the ideas (but any method that works in local circumstances can be used):

Group being considered	*Individual*				
Challenge (personal risk factor)	***What can we do (personal protective measures)***	***Is this available/ are there gaps***	***Before***	***During***	***After***
Example: Become more aware of the risks and possible reactions	*Example: Additional training/ learning to develop skills*	*Example: Awareness training provided in team annual training programme; current gap in Mental Health First Aid training locally*	*Y*		
Example: Adversely impacted after the incident	*Example: Access appropriate local and national help – self-help techniques/ books/ websites, GP, "Employee" Assistance Programmes etc*	*Example: Yes, details of Police Scotland EAP have been issued to all team members.*			*Y*

3 **The Individual** – some of the things that can be explored for this group in a discussion about protective and risk factors might be:

- Become more aware of the risks and possible reactions
- Accept that it is OK not to feel OK and that it is important to speak out and talk
- Understand that it is normal to react to a situation that is not normal
- Understand the factors that help build personal resilience
- Understand psychological first aid, reactions to trauma, mental health first aid
- Consider additional training/learning to develop skills
- Be prepared to speak to family, friends, trusted others
- Be open to listening and supporting colleagues
- Understand relevant insurance covers and what other support is available
- Know where to get appropriate help – self-help techniques/ books/ websites, GP, "Employee" Assistance Programmes (EAPs)

This list can be added to in local discussions to suit local conditions.

4 **The Family** – some of the things that can be explored for this group in a discussion about protective and risk factors might be:

- Take an interest in the team and get involved if possible along with your volunteer (eg induction, social events, support networks)
- Become more aware of the risks and possible reactions
- Understand the factors that help build personal resilience
- Understand relevant insurance covers and what support is available (including Benevolent Funds etc)
- Consider self-help/ family support groups within the team
- Be open to listening and supporting their volunteer
- Be prepared to speak to other family, friends, trusted others
- Know where to get appropriate help – self-help techniques/ books/ websites, GP, "Employee" Assistance Programmes (EAPs)

This list can be added to in local discussions to suit local conditions.

5 **Employment** – some of the things that can be explored for this group in a discussion about protective and risk factors might be:

- Take an active interest in the volunteer and agree how to support the volunteer if needed to respond to callouts during work time
- Agree how volunteers might be supported if coming to work after over-night callouts or when the volunteer may return to work after a difficult callout.
- Consider how best to share, with employers, the benefits of employing a volunteer responder – demonstrating the skills and knowledge that can be brought to the workplace
- Consider ways to support those who are self-employed.

This list can be added to in local discussions to suit local conditions.

6 **The Team** - some of the things that can be explored for this group in a discussion about protective and risk factors might be:

- Take an active interest in the volunteer and the family (eg induction, social events, support networks, training, retiring options, use Family "Welcome to the Team" booklet and Family Facebook Group)
- Include appropriate psychological wellbeing opportunities into training programmes (eg Psychological First Aid, Peer Support, Trauma, Mental Health First Aid etc)

- Demonstrate good leadership and promote a culture where psychological wellbeing is a priority alongside physical wellbeing
- Support volunteers who wish to develop personal competence
- Understand and share the details of relevant insurance covers and what support is available (including Benevolent Funds etc)
- Consider self-help/ family support groups within the team
- Identify and mitigate risks – including impacts on whole team
- Be open to listening and supporting their volunteer
- Know where to get appropriate local and national help – self-help techniques/ books/websites, GP, "Employee" Assistance Programmes

This list can be added to in local discussions to suit local conditions.

7 **The Organisation** – some of the things that can be explored for this group would be:

- Champion wellbeing at national level
- Actively take part in national wellbeing initiatives (eg at country or UKSAR level)
- Work with partner organisations (eg Lifelines Scotland)
- Support the Wellbeing Framework and help guide teams through its process
- Set up a benevolent fund
- As appropriate, help to organise suitable insurance cover for teams and individuals
- As appropriate, help to agree access to suitable "Employee" Assistance Programmes
- Assist in providing "sharing best practice" opportunities for teams
- Help to source any necessary funding and support for wellbeing issues

This list can be added to in local discussions to suit local conditions.

Examples from top: refreshed insurance covers arranged nationally from 2019; access to Police Scotland EAP for all team members and families from April 2018; "Family" booklet available to all teams from 2019; "Employers" information pack idea from New Zealand to be developed for MR in Scotland.

8 For each of the key groups listed (points 3-7), and perhaps by using the table format, consider the list as it might relate to **Before, During, and After**. What can be done to prepare; what can be done during the "phase"; and what can be done to support recovery afterwards as appropriate.

9 Having come up with "brainstorm" lists from all of the above the next step will be to identify how the points can be addressed utilising existing resources; services; model templates; existing best practice from elsewhere; available training; partnerships for example. At the same time identifying where there are current gaps in provision.

Making it work – next steps

10 In the early stages the **organisation** may need to help **teams** with the process but ideally the **teams** will take ownership of developing a wellbeing package involving its **volunteer responders** and their **families** albeit with support from others.

11 In 2018, when the UKSAR Wellbeing Planning Group looked at the framework in terms of mental health and wellbeing, they found that there were **good examples** of available resources and support, for example:

- NHS
- MIND
- Lifelines Scotland
- Healthy Working Lives
- SeeMe – a project within SAMH aims to remove stigma and discrimination
- Mental Health First Aid courses (delegate and instructor)
- Psychological First Aid training (eg the MANERS model from NZ)
- Peer support training
- Employee assistance programmes
- Benevolent funds
- Support within accident insurance covers
- Variety of trauma support "systems"/"processes"
- Excellent material from overseas (NZ) – excellent family materials etc
- SCORDS (Scottish Resilience Development Service) web training
- A growing momentum of support for this area of work (eg general acknowledgement of importance from HRH Prince William)
- Short videos of volunteers describing experiences

12 However, the group also found a number of **headline gaps** that will need to be worked on at both local and national level:

- A need for greater involvement of families
- A need for greater involvement of employers
- A critical look at induction and retention of volunteers
- Tackle consistency – local and national provision differences (even within team areas)
- Identify clear funding streams for Wellbeing initiatives
- Secure "buy-in" from individuals, families, employers, teams & organisations (but we HAVE to start somewhere and support local champions)
- Secure "buy-in" from statutory bodies and government (but we have some powerful and influential allies already)

13 The key to MAKING IT WORK is to encourage teams, individuals and families to start the process at local level – a very much bottom up approach. This will help to identify the issues faced at local level in local conditions and allow best practice, available resources and support mechanisms and, most crucially, the gaps to be highlighted and then tackled in a coordinated way.

14 **It is important to remember that a small step to improve resilience in any group at any level is a step forward and steps forward can only be good – this will take time and effort, but it has to be worth it.**

Appendix 1

UKSAR Wellbeing Planning Group 2018

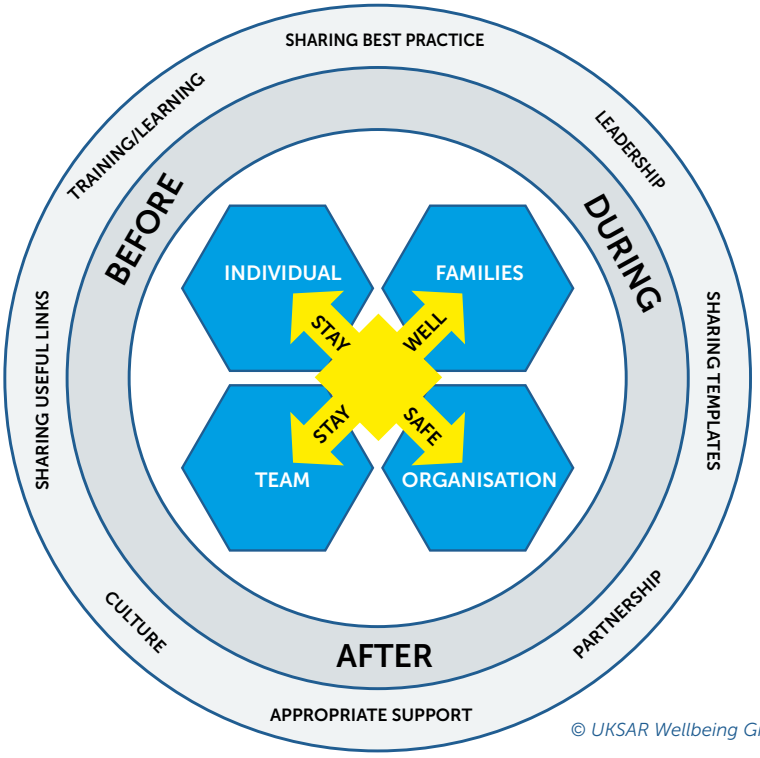
Following the UKSAR Conference in February 2018, the group was set up in April that same year as a short life working group.

The group included representatives from the following organisations:

- Bristow
- Department of Justice Northern Ireland
- Lifelines Scotland
- Lowland Rescue
- Coastguard
- MIND
- Mountain Rescue England and Wales
- National Police Chiefs Council
- Police Scotland
- Royal National Lifeboat Institution
- Scottish Mountain Rescue

Appendix 2

UKSAR Wellbeing Framework version 1 (2018)



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Volunteering to save lives

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