

Workplace Mental Health First Aid Standards

Published by
the Association of Mental Health First Aiders
and MHFA England



MHFA England



Association
of Mental Health First Aiders



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Why these standards – and why now

Work, at its best, is good for people. It gives us purpose, connection, structure, and security. When organisations get that right, the benefits are felt everywhere. Mental health is central to this.

When people's mental health is supported at work, they're more productive and engaged. They perform at their best, contribute more, and bring others with them. And when someone needs support – as one in four of us will every year – they're far more likely to get the help they need early, before disengagement or absence follows.

Poor mental health costs UK employers £51 billion every year. For every £1 invested in staff wellbeing, employers see an average return of £4.70 – through reduced absence, lower turnover, and stronger performance. For that reason, we see supporting mental health as an investment in people and performance, and not a cost of doing business.

Mental health first aid is one of the most powerful tools an organisation can implement, but realising its full potential takes more than just good intentions. It takes the infrastructure, leadership commitment, and ongoing support to embed it properly.

These standards exist to change that. They set out – for the first time – what effective, sustainable MHFA provision looks like in the workplace. They're shaped by the Association of Mental Health First Aiders® and informed by hundreds of employers, Instructor Members, and practitioners. Organisations



90% of Mental Health First Aiders believe MHFA training should be a legal requirement in every workplace, as physical first aid is.

that implement them are investing in workplaces where everyone thrives, where support reaches people early, and where mental health is treated as the strategic priority it is. That's good for people, and it's good for business.

How to use the Standards

These standards are about making MHFA work better for your organisation and the people in it. They're not about adding to your workload.

The nine standards are organised into four phases, each building on the last. Psychological safety and visible leadership commitment run through all of them, and while culture building sits formally in phase four, it's the foundation everything else depends on. Organisations that invest in it early will find each subsequent phase easier to embed.

Even organisations who reach phase four should expect to revisit earlier phases over time, as their organisation changes and best practice evolves. Think of the phases as a cycle you continue to move through rather than a ladder with a top rung.

Standards are marked required or recommended throughout. Required standards are the non-negotiable foundation of safe, effective MHFA provision. Recommended standards are strong best practice to work towards over time.

They apply to all employers, but we've been practical about what implementation looks like without a large HR team or dedicated wellbeing function – you'll see a callout wherever something is particularly relevant for smaller organisations.

At the end, you'll find guidance on how the Association of Mental Health First Aiders and MHFA England® can support your implementation.

Key

! **Required:** Non-negotiable

> **Recommended:** Best practice



Phase one: Getting the foundations right

Before you build a network of MHFAiders®, the conditions for success need to be in place. These two standards cover the leadership commitment, policy infrastructure, and role clarity that everything else depends on.

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Standard one: Governance and strategic commitment

MHFA works best with clear, visible senior ownership. Without it, even well-trained MHFAiders will struggle to make the impact they should.

Strategy and leadership

- ! **Required:** Treat mental health with the same seriousness as physical health across all workplace policies and practice – for example, including it in risk assessments, wellbeing policies, and leadership agendas
- ! **Required:** Develop a people and/or health and wellbeing strategy or plan that includes mental health – and ensure your approach to MHFA sits within it
- > **Recommended:** Senior leaders should publicly endorse their MHFA programme and demonstrate visible, ongoing commitment
- > **Recommended:** One senior leader, ideally at board level, should be trained as an MHFAider
- > **Recommended:** Senior leaders should report regularly to the board on MHFA provision and share progress updates with the workforce

Smaller organisations:

Even without a formal wellbeing strategy, a short written commitment from your most senior person – setting out what MHFA means for your organisation and how it will be supported – helps give MHFAiders the backing they need.

Policy integration

- ! **Required:** There must be a policy around MHFA that sets out the approach, roles and responsibilities, escalation routes, and support available
- ! **Required:** MHFA must be reflected in other relevant workplace policies, including health and safety, suicide prevention, HR policies, and diversity and inclusion frameworks
 - Where a suicide prevention policy doesn't exist, organisations should ensure suicide prevention is addressed within their health and safety or HR policy framework

Dedicated MHFA lead

- ! **Required:** A designated MHFA lead must oversee the MHFAider network – including training logistics, MHFAider support, and reporting – and act as the internal point of contact for MHFA provision. This can sit alongside other responsibilities, but the lead needs clear ownership and enough time to exercise it

Smaller organisations:

With a smaller number of MHFAiders, you may not need someone managing training logistics or a wider network. You do need a single named point of contact that MHFAiders and colleagues know to go to.

2 Standard two: MHFAider recruitment, representation, and role clarity

A well-recruited, well-briefed MHFAider is far more effective than one who has completed training but been left to figure out the role on their own. This standard is about setting people up to succeed from the start.

Recruitment and selection

Before recruiting MHFAiders, organisations should decide their approach and be able to explain it clearly to the workforce.

! Required: MHFAiders should be willing participants in the role

- Organisations generally take one of two approaches, or a mix of both:
 - **Targeted roles:** certain roles, such as managers, HR teams, or frontline advisors, are expected to train, because of the value MHFA brings to that role specifically. If this is your approach, have a clear rationale you can communicate, so people understand the benefit
 - **Open recruitment:** MHFAiders are recruited more broadly across the organisation as volunteers. If this is your approach, make sure you have a plan for the knowledge, skills, and processes needed to support a more varied group

Proportionate coverage

Coverage is important because colleagues should be able to reach an MHFAider and know one is there easily.

! Required: For organisations with more than 50 employees, provide at least one MHFAider for every 50 employees, in line with physical first aid provision

> Recommended: As an aspirational benchmark, organisations should aim for one MHFAider per 25 employees – shift patterns, site coverage, and role types will affect what's achievable in practice

- Unlike physical first aiders, MHFAiders use their skills two to three times a week on average, and demand should be matched accordingly

> Recommended: MHFAiders should be drawn from across the organisation, including managers and senior leaders, so that coverage isn't concentrated in one group

> Recommended: Use a risk assessment to identify where additional MHFAiders are needed beyond the ratio, for example in particular areas, teams, or sites

Smaller organisations:

Below the 1:50 threshold, focus on making sure at least one MHFAider is easily reachable by every colleague, rather than trying to hit a ratio. One well-supported MHFAider can be enough for a very small team.

Diversity and representation

- **Recommended:** MHFAiders should reflect the diversity of the workforce – including things like protected characteristics, language, role, and seniority – so that colleagues can access someone they feel comfortable approaching

Role definition

MHFAiders may feel uncertain about what they're expected to do. A clear, written role description addresses that and protects both the MHFAider and the organisation.

- ! **Required:** MHFAiders must be given a clear, written role description that covers:
 - Expected behaviours
 - Boundaries and scope of support (non-clinical)
 - Reporting and escalation protocols
 - Time commitment
 - Confidentiality parameters
 - The support available to MHFAiders themselves



Phase two: **Building your MHFAider network**

With the foundations in place, this phase covers training, infrastructure, and the systems that allow MHFAiders to carry out their role safely and effectively.

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Standard three: Training and competency

Training is where MHFA becomes real. The quality of that training directly shapes what MHFAiders can do and how confident they feel doing it.

Accredited training

- ! **Required:** To become an MHFAider, individuals must complete internationally accredited, evidence-based, instructor-led Mental Health First Aid training

MHFA Refresher training

- ! **Required:** All MHFAiders must complete an MHFA Refresher or a full Mental Health First Aid course every three years, or as recommended by their accrediting body, to keep their knowledge and skills up to date
- > **Recommended:** Organisations should supplement formal training with digital learning, peer learning, and other continuing professional development (CPD) to keep knowledge current between renewal cycles

MHFAider confidence increases by more than 25% after completing the MHFA Refresher. 95% of attendees would recommend it to a colleague.

MHFA lead development

- > **Recommended:** Named MHFA leads should access appropriate learning and CPD to help embed and implement MHFA effectively across the organisation
 - The Association of Mental Health First Aiders and MHFA England offer resources, best practice guidance, learning, and consultancy to support this

Manager awareness

- ! **Required:** All managers should understand what MHFA is, what the MHFAider role involves, how to support MHFAiders in their team, and how to refer colleagues who need help

Smaller organisations:

Manager awareness doesn't have to mean formal training. A short briefing can go a long way in making sure managers know who the MHFAiders are and how to support them.

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Standard four: Infrastructure and operational support

MHFAiders need time, space, and clear processes to do their role well. Without these, even the best training won't translate into effective support.

Shared responsibility

Supporting mental health at work is a shared responsibility, with every part of the organisation playing a role:

- **Senior leaders** set the tone and demonstrate visible commitment to a mentally healthy culture
- **HR** provides policies, guidance, and ensures procedures are followed
- **Managers** are responsible for day-to-day wellbeing in their team and for supporting MHFAiders in their role
- **MHFAiders** act as a first line of support – offering a listening ear and signposting colleagues to help
- **The MHFA lead** coordinates the network, training, and reporting
- **Employees** contribute by respecting boundaries, engaging with wellbeing initiatives, and seeking support when needed

This keeps mental health support woven into how the organisation works, rather than carried by a small group alone.

Time and space

- ! **Required:** MHFAiders must be given protected time within working hours to complete training, offer support, attend debrief sessions, and engage in peer support
- ! **Required:** Safe, confidential spaces – physical or virtual – must be available for MHFA conversations

Escalation process

MHFAiders aren't clinicians, but a clear escalation process protects everyone when they're supporting a colleague with thoughts of suicide, self-harm, or safety concerns.

- ❗ **Required:** Organisations must have a defined escalation process so MHFAiders know exactly who to contact and how to act when they're concerned about someone's safety
- ❗ **Required:** Where there is no HR function, a named person or team must be identified as the escalation point – MHFAiders must know who this is and how to reach them
 - In a crisis where someone's safety is at immediate risk, MHFAiders should not hesitate to contact emergency services – the escalation process should make this explicit so MHFAiders are never uncertain about when to involve emergency services
- **Recommended:** MHFAiders should be actively encouraged to use occupational health, EAPs, and other support services available to them as employees – particularly when the role is feeling demanding
- ❗ **Required:** Any records relating to concerns must be anonymised, purpose-limited, and handled in line with GDPR

Smaller organisations:

A one-page escalation map with named contacts and clear steps is often more useful than a lengthy policy. Keep it simple and make sure every MHFAider has a copy.



Phase three: **Keeping it working**

Training and infrastructure create the conditions for good MHFA. This phase is about sustaining them – making sure MHFAiders feel supported, the organisation learns from what it's seeing, and provision stays strong over time.

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Standard five: Support, debrief, and wellbeing of MHFAiders

MHFAiders can be with people through hard moments and share in others' emotional burdens. Without active support, organisations risk burning out the very people their colleagues rely on.

Support and debrief

- ! Required:** MHFAiders must have access to regular peer support and debrief sessions – at a minimum, a structured check-in at a frequency agreed to reflect the demands of the role
- ! Required:** MHFAiders must have regular wellbeing check-ins with their manager or MHFA lead to identify signs of fatigue or emotional overload and agree any support needed, including stepping back from the role if appropriate
- > Recommended:** MHFAiders should have access to individual follow-up support after particularly difficult situations
- ! Required:** MHFAiders must be able to pause or step down from their role at any time, without penalty or pressure – this is a normal part of role management and not a failure

Smaller organisations:

Peer support doesn't have to be formal. A regular check-in between MHFAiders builds the connection and trust that makes the harder conversations easier to process. MHFAiders can also access support through the MHFAider Support App®, available to all MHFA England-trained MHFAiders.

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Standard six: Reporting, evaluation, and continuous improvement

You can't improve what you can't see. Understanding how MHFA is working – what's landing, where the gaps are, what MHFAiders are carrying – turns a training investment into a sustained, organisation-wide shift, and sharing that data with senior leaders helps secure continued support.

Activity logs

Anonymised activity data helps organisations understand what their MHFAiders are seeing and where support may be needed. It must never compromise confidentiality or give anyone pause before asking for help.

- **Recommended:** MHFAiders may maintain anonymised logs of interactions – for example, number of conversations and broad themes – to inform wellbeing planning
 - The MHFAider Support App includes a feature to help with this
- ! **Required:** Logs must never include identifiable information – they're not clinical records
- ! **Required:** MHFAiders must never feel that logging is a condition of having a conversation

Smaller organisations:

Use aggregate or opt-in recording where individual anonymity is harder to preserve.

MHFAider input

- ! **Required:** MHFAiders should have a clear route to feedback on what they're experiencing and contribute to shaping organisational wellbeing plans

Annual review and impact

- **Recommended:** Employers should conduct an annual review of MHFA provision, covering coverage, training needs, MHFAider wellbeing, themes from logs, and overall impact
- **Recommended:** Employers should define clear measures of success for MHFA and report on those regularly
- **Recommended:** An annual improvement plan should be developed to address identified gaps

Phase four:

Embedding it in your culture

MHFA is most powerful when it's part of how an organisation thinks and behaves – visible, trusted, and woven into a real commitment to people's health and wellbeing. From here, the focus shifts to sustaining what you've built and revisiting earlier phases as your organisation and its needs evolve.

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Standard seven: MHFAider visibility and culture building

MHFA only works if people know it's there and trust it. Visibility, accessibility, and a culture where asking for support feels normal are what turn a trained network into a truly effective one.

Visibility and accessibility



- > **Recommended:** MHFAiders should be clearly identified and promoted across the organisation – through posters, intranet pages, lanyards, email signatures, and QR codes
- > **Recommended:** Colleagues should be able to access support through multiple channels: in person, via work instant messaging platforms (such as Microsoft Teams or Slack), by phone, email, or drop-in sessions

Induction and awareness

- ! **Required:** MHFA support should be introduced as part of every employee's induction, so awareness is built in from day one
- > **Recommended:** Employers should run or take part in regular campaigns to promote their MHFAider network – at least annually, with regular activity throughout the year such as a newsletter feature or team briefing slot to keep MHFA visible
- ! **Required:** All staff must be clearly informed that MHFA support is confidential, non-clinical, and voluntary

Recognition and storytelling

- > **Recommended:** MHFAiders should be recognised and celebrated in internal communications and included in relevant people and wellbeing initiatives
- > **Recommended:** Marking moments like MHFAider Day is a straightforward way to celebrate the role publicly and signal organisational commitment to mental health
- > **Recommended:** Organisations should use storytelling and lived experience to reduce stigma and build a more open culture – stories give colleagues permission to ask for help

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Standard eight: **Wider workplace mental health support**

Mental Health First Aid is one part of a wider commitment to workplace mental health. It works best alongside strong management practice and clear policy, and employers have a responsibility to ensure the right foundations are in place across the organisation.

Mental health awareness and management capability

- > **Recommended:** All employees should receive basic mental health awareness so that everyone in the organisation has a foundation of understanding
- > **Recommended:** All managers should receive training in how to support employee mental health and have open conversations about wellbeing with their teams

Wellbeing action plans and suicide safety

- ! **Required:** Where an employee has previously disclosed thoughts of suicide or been identified as being at risk, a safety plan should be developed with them by their manager and/or HR team. It should be reviewed regularly and handled with strict confidentiality. Membership of the Association of Mental Health First Aiders gives MHFAiders access to a template that they can use
- > **Recommended:** Wellbeing action plans should be in place for employees with diagnosed mental health conditions, and as best practice for all employees

Reasonable adjustments and stress risk assessments

- ! **Required:** Reasonable adjustments must be available for employees with mental ill health and diagnosed mental health conditions
- ! **Required:** As per Health and Safety Executive guidance, employers must assess and act on risks from work-related stress, including conducting risk assessments and acting on them

Signposting

- ! **Required:** Employers should keep organisational signposting information – internal routes to support, including the MHFAider network and any internal policies – regularly reviewed and up to date
- > **Recommended:** Employers should also keep national and community signposting information current, so MHFAiders and colleagues can access appropriate external support quickly

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Standard nine: Considerations for customers and suppliers

Depending on your sector, some organisations may wish to extend MHFAider support beyond their own staff – to customers, service users, or partners – and use their procurement influence to raise standards across their supply chain. If your organisation operates solely in an internal employee-facing capacity, this standard may not apply directly.

Customer and service users

- > **Recommended:** Consider whether and how your MHFAiders might be called on to support customers or service users, and set clear expectations about the limits of the role – MHFAiders provide non-clinical signposting support
- > **Recommended:** If a customer-facing element of the role is introduced, expectations should be documented and MHFAiders should feel confident in their boundaries before it begins
- > **Recommended:** Organisations in sectors where customer-facing mental health situations are common – such as public services, healthcare, financial services, and social care – should develop sector-specific guidance and referral protocols

Suppliers

- > **Recommended:** Use your procurement and supplier selection processes to explore and encourage commitment to workplace mental health, including MHFA provision where appropriate



Working with the Association of Mental Health First Aiders and MHFA England

MHFA England is the national authority on mental health first aid. For nearly two decades, we've trained more than one million people to spot the signs of poor mental health, have supportive conversations, and signpost to help.

The Association of Mental Health First Aiders is England's first and only membership body for Mental Health First Aiders. With over 100,000 members, it connects MHFAiders to resources, peer support, and ongoing development long after training ends.

If you're implementing MHFA for the first time or strengthening what you already have, we're here to help at every phase of the journey.

Training

Our Mental Health First Aid course is evidence-based, developed with clinical experts and people with lived experience, and delivered by accredited MHFA England Instructor Members. 91% of learners report a better understanding of mental health after completing the course, and an increase in confidence of over 60%.

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MHFA Refresher

The MHFA Refresher keeps MHFAiders' knowledge and skills current and maintains their Association membership – all in four hours. We recommend completing it every three years.

MHFAider Support App

The MHFAider Support App gives every MHFA England-trained MHFAider access to resources, guidance, and support between formal training and MHFA Refresher sessions. It includes tools to log activity anonymously, access self-care resources, and stay connected to the latest guidance.

Consultancy

Our Workplace team works with organisations to assess current provision, develop bespoke mental health strategies, and design implementation plans that fit your context and scale – from early-stage planning to strengthening an established programme.

Recognising your commitment

Organisations that implement these standards will be able to formally signal their commitment – joining a growing community of employers raising the bar on workplace mental health. More details on how to do this will be available soon.

To find out how we can support your organisation, visit aomhfa.org or mhfaengland.org, or email workplace@mhfaengland.org.



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