

Workplace Mental Health Wellness & Counseling Skills Training

Date	Time	Duration	Venue	CPD	Cost (Excl. VAT)PP
16th - 21st Mar, 2026	08:30 AM-4:00 PM	6 Day(s)	Blooming Suites, Naivasha	6	70,000.00

Course Overview

This course empowers HR professionals, managers, and wellness champions with the expertise to support mental health and emotional wellbeing in the workplace. Participants will master the psychological dynamics affecting performance, apply practical counselling techniques, and design targeted wellness programs. From stress management to culture building, the program lays a foundation for organizations to thrive with compassion, resilience, and strategic emotional support.

Course Objectives

By the end of this program, participants will be able to;

- Understand how mental health impacts workplace performance and team dynamics.
- Recognize and respond to stress, trauma, burnout, and other behavioral health challenges.
- Apply core counselling and introductory psychotherapy methods for workplace intervention.
- Build wellness programs tailored to organizational realities and needs.
- Promote a culture of psychological safety and emotional resilience.
- Champion mental health initiatives with clear leadership buy-in and data-driven outcomes.

Target Groups

This training is suitable to a wide range of professionals but will greatly benefit;

- HR Professionals
- Workplace Counsellors
- Managers Promoting Employee Wellness
- Organizational Wellness Strategists
- In-house Wellness Champions and EAP Coordinators



CHRP. Den PN Gathitu
Secretary General
Academy of Certified Human Resource Professionals

DATE: 16:02:2026

PROFORMA INVOICE

Invoice To:

Organization Name:

Phone:

Email:

QTY	DESCRIPTION	NET (KES)	VAT (KES)	GROSS (KES)
1	Workplace Mental Health Wellness & Counseling Skills training from 16th - 21st Mar, 2026 at Blooming Suites, Naivasha	70,000.00	11,200.00	81,200.00
GROSS (KES): Eighty One Thousand Two Hundred				81,200.00

NOMINATION FORM

PARTICIPANT(S) DETAILS

NO.	NAME	EMAIL ADDRESS	TELEPHONE

PAYMENT DETAILS

Bank Name: Equity Bank

Account Name: Academy of Certified Human Resource Professionals Ltd

Account No.: 1 2 9 0 2 7 1 2 4 5 7 5 3

Bank Branch: Kenyatta Avenue

Branch Code: 129

Swift Code: EQBLKENA

Pay Bill No.: 247247

Account No.: 300245

FUNDING CONFIRMATION / TAX DETAILS

I, the undersigned, has verified the nomination and confirms availability of funds for this training.

Name of Organization:

Org. KRA PIN: Org. Mobile No.:

Confirmed By: Position:

Signature: Date & Stamp:

NOTE THAT:

- Only those Delegates whose fees have been paid in full will be allowed to the event
- A scanned copy of the duly completed form should be sent to admin@achrp.org
- The above training Cost does not include Transport & Accommodation