

# Improving Workplace Mental Health – a practical guide

**Mind**  
**Why is MH in the workplace**  
**important?**  
**Causes of problems**  
**Minw Workplace Model**  
**Tower Hamlets Case Study**  
**Workplace Principles**  
**Discussion**

# About Mind



- Leading mental health charity in England and Wales
- 185 locations
- Combines campaigning with service provision
- Independence gives us the freedom to stand up and speak out
- 60 years of experience working with and employing people with mental health problems



# Impact on Work

## Areas of direct impact on work:

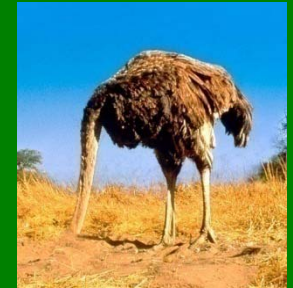
- **ABSENTEEISM:** £8.4 billion a year in sickness absence. The average employee takes seven days off sick each year of which 40 per cent are for mental health problems. This adds up to 70 million lost working days a year, including one in seven directly caused by a person's work or working conditions.
- **PRESENTEEISM:** £15.1 billion a year in reduced productivity at work. 'Presenteeism' accounts for 1.5 times as much working time lost as absenteeism and costs more to employers because it is more common among higher-paid staff.
- **RECRUITMENT COSTS** £2.4 billion a year in replacing staff who leave their jobs because of mental ill health.

*Why are we failing? Do we understand it?*

# Awareness & Understanding



## Lack of Awareness



*Can see it, cant do anything  
about it*



*Can see it, don't know what to  
do!*

# Everyone's different



# Mind Workplace Approach



Look beneath the surface

**Audit**



Put the picture together

**Review**



Gaining attention & buy in

**Implement change and embed**



Making changes, training and policy

# Tower Hamlets: A case study

## Model Mental Health Employer

Commissioned in July 14th 2008

To enable Tower Hamlets PCT to address and improve the  
mental health of its workforce

### Staff survey results - catalyst

Audit  
Review & Report  
Implementation  
Evaluation and Embedding



# Tower Hamlets: A case study

## AUDIT

### 6 pilot Depts

1. 145 staff representing –just under 10% of total interviewed
2. HSE standards as guide for questions
3. Levels of MHA + Support
4. Line Managers believed only 6% of staff had MHP
5. Vs 26% actual – more than stress, anxiety, depression etc
6. Lack of awareness of MH, support, internal and external pathways
7. Weak Sickness data, gap between disclosed and actual
8. Silo working, good and bad practice normalised
9. Fear of disclosure through career damage
10. Variable supervision and communication – lack of consistent feedback



# Tower Hamlets: A case study

## *AUDIT cont...*

- Policy review
- Support Services review – EAP, Occ Health
- Sickness absence data
- Learning and Development programmes
- Communication review



# Tower Hamlets: A case study

## *Report & Recommendations*

*Presented at director level*

*Union involvement*

*OT and Psychologist review and analysis of qualitative and quantitative data*

*Information fed back to each dept head*

**Recommendations:**

*Bespoke training for each department*

*Policy change re supervision*

*Implementation of parachute*

*Expand project to rest of trust*



# Tower Hamlets: A case study

## *Outcomes and further progress*

- Average of 50% increase in MHA
- Increase in confidence in dealing with MH issues
- Further training asked for
- Implementation or regular supervision
- Pursue Mindful Employer
- Roll out training trust wide training – 30% of staff
- Embed in induction
- Write mental health policy
- Embed MH into KSF and appraisal structure
- Parachute/ review and improve supervision process – feedback well being



# PRINCIPLES – What is Mental Health?

***Mental health is more than the absence of mental disorders***

A state of well-being in which the individual:

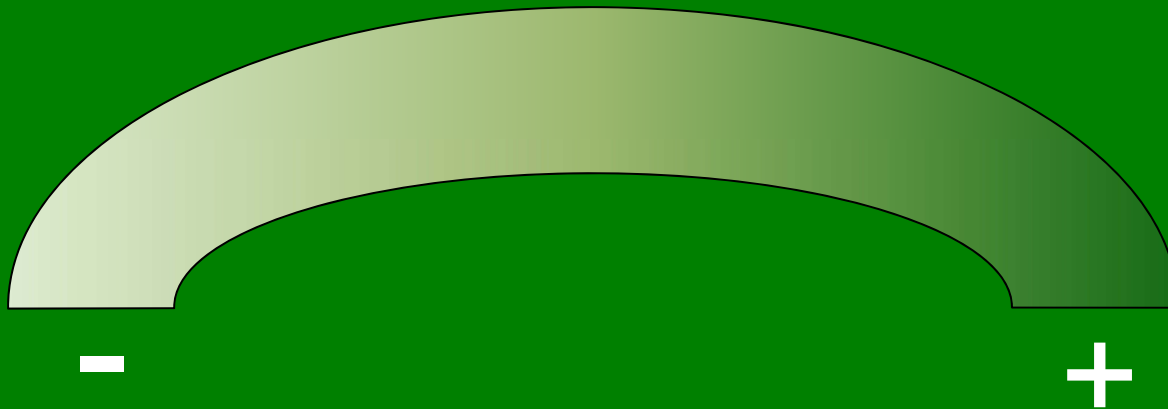
- Realises his or her own abilities
- Copes with the normal stresses of life
- Works productively and fruitfully
- Is able to make a contribution to his or her community



(World Health Organisation)

# Principles - What is Mental Ill-Health?

A more than temporary state of mind that adversely effects your ability to conduct your life in the way you or others\* wish you to. (my personal definition)



## Examples

*Depression, Anxiety, Panic Attacks, Bi-Polar Disorder, Phobias, Schizophrenia & Obsessive Compulsive Disorder*

# Principles Adjustments

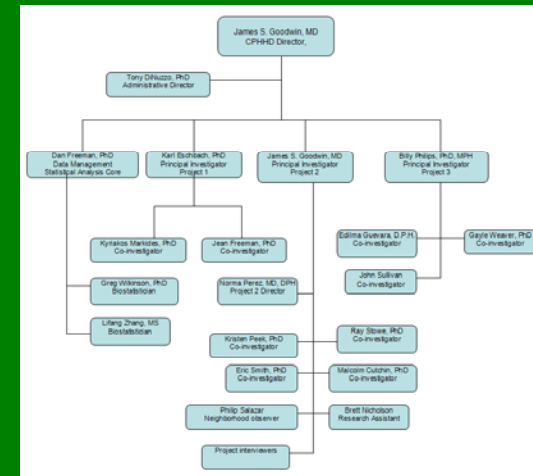
## Reactive Reasonable Adjustments

Adjustments for an individual –  
case by case

Disclosure -Application form  
-Personal



## Pro-active Reasonable Adjustments



-Preventative  
-Organisational  
-Best Practice

# Awareness & Understanding

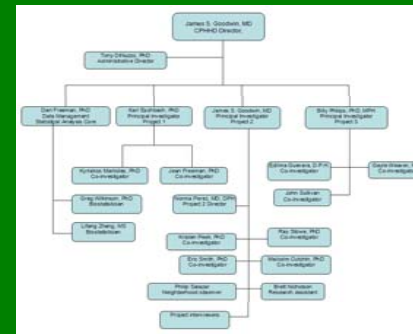


For better  
mental health



*Don't just ignore it!*


Be pro-active



*Policies  
Procedures*

*Communication  
campaign.  
Change attitudes*

**“1 in 4 people, like me, have a mental health problem. Many more people have a problem with that.”**



Read Stephen's story

**time to change**  
let's end mental health discrimination



*Training  
Tools*

# Get in early!

Presentee  
Disclosure

Absentee  
Back to  
work?



Line manager

OH

**Managing mental health**  
**Parachutes**  
**Graded return**  
**Trusted relationships**  
**Keep in contact**  
**Task adjustment....**

# Discussion

Is it a problem in your workplace?

How do you know?

What level of sickness absence do you measure?

What are the main causes?

Work related?

What is stopping you from dealing with this?

What steps can you take?

What is the cost?