Forest Heath & St Edmundsbury councils

West Suffolk

working together

Mental Health at Work Policy

March 2016

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1.   Introduction

1.1   We are committed to protecting employees' health and safety and welfare. We are, also, committed to the "Mindful Employers" charter, which requires organisations to place greater emphasis on mental health. Mindful Employer, developed by employers in Exeter and launched in 2004, is an NHS initiative run by Workways, a service of Devon Partnership NHS Trust. Workways supports people with a mental health condition to find or remain in employment.

1.2   Mental health illness can occur to any person at any level and any time. It can impact on relationships, jobs, physical health and many more. NHS predicts that one in four of us will suffer from some from of mental health issue at some time in our lives. Mind reports that one in six people are dealing with mental health problems such as anxiety, depression or stress.

1.3   Mind, also, estimates that the cost to employers of mental health problems within their workforce is close to £26 billion per year, equating to £1,035 for every employee in the UK workforce. The annual cost of mental health related presenteeism (people coming to work and under performing due to health) is estimated to be in the region of £15.1 billion - £605 per employee in the UK workforce.

2.   Policy Aims

2.1   This policy aims to:-

- Increase awareness of mental health issues throughout the Councils
- Initiate actions to prevent and manage issues of mental health within the Councils
- Advise managers how to deal with disclosures regarding mental ill health
- Provide a list of contacts and organisation details for further guidance and help.

3.   Definition of Mental Health

3.1   Mental health, like physical health, can fluctuate on a range from good to poor. Mental health problems can affect any one irrespective of age, personality or background. It can appear as a result of experiences in personal or working lives, or both and can just happen. Employees may be affected directly or indirectly if partners or dependents or family members have mental health problems which in turn impact on their own lives and health.

3.2   It can affect the way people think, feel or behave. In some cases this can seriously limit a person's ability to cope with day to day life, impact on relationships, work quality and life in general.   It can influence the ability for an individual to cope with change, transition and life events. However, many people manage their own mental health problems alongside the demands of their job and their lives, sometimes with treatment and support. It is important to remember that everyone's experience of mental health will be unique and no two people, with the same condition, may deal with it in the same way.

3.3　If an employee has a mental impairment that has a substantial and long term adverse effect on their ability to perform normal day to day activities, they have a disability and their disability will fall within the definition in the Equality Act 2010. This means that employers have a duty not to discriminate because of the disability and to make reasonable adjustments in the workplace to support the individual.

4.　Impact of Mental Health within the Organisation

4.1　Mental health can impact on an organisation's performance and productivity. In 2011 the CIPD (Chartered Institute of Personnel & Development) surveyed 2000 employees regarding mental health and how it impacts at work. More than a quarter of those employees reported to have experienced mental health at some time in their working life.

4.2　The key issues which were raised were:-

80% found it difficult to concentrate
62% found it took them longer to do tasks
60% had difficulty in making decisions
57% found it difficult to juggle a number of tasks
50% felt they were less patient with clients and customers
42% were put off of doing challenging work

4.3　In the survey employees of large companies reported that 38% would feel confident in disclosing mental health problems to their manager.

5.　Forms of Mental Health

5.1　Although not an exhaustive list, below are some of the more commonly diagnosed forms of mental health problems and examples of their symptoms. When supporting staff it is important not to label people by focusing on a diagnosis. It is more important to talk to them and understand how it impacts on their work.

5.2　**Depression** - very low moods; feeling hopeless, worthless, unmotivated or exhausted; loss of appetite; irritability; more prone to physical illness. Depression often goes hand in hand with anxiety. For men in particular, feeling low or anxious can lead to anger and using recreational drugs or alcohol as coping strategies.

5.3　**Anxiety** – constant and unrealistic worry about any aspect of daily life leading to restlessness; sleeping problems; increased heartbeat; stomach upset; muscle tension; trembling. Severe anxiety can be linked to panic attacks, phobias or obsessive compulsive disorder.

5.4　**Panic attacks** – sudden, unexpected bouts of intense terror leading to difficulty breathing; rapid, pounding heartbeat; choking sensations; chest pain, trembling; feeling faint. The memory of a panic attack can provoke fear and trigger another.

5.5　**Obsessive-compulsive disorder** – lack of control over certain thoughts or ideas that seem to force themselves into consciousness but lead to unbearable anxiety, which can only be relieved by performing a particular ritual to neutralise them, such as repeatedly opening and closing a door, washing hands or counting.

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5.6 **Phobias** – an unreasonable fear of a particular situation or object which can cause major disruption to life because it imposes such restrictions on the way people live, for example agoraphobia can cause such paralysing fear that a person may remain isolated in their own home, afraid to go outside.

5.7 **Bipolar disorder (manic depression)** – a mood disorder where during 'manic' episodes people tend to be hyperactive, uninhibited, reckless, full of grandiose schemes and scattered ideas. At other times, they may go through long periods of being very depressed. Not everyone experiences both extremes.

5.8 **Schizophrenia** – hearing voices; seeing things that other people can't; perceptions and physical sensations that are not shared by others (delusions and hallucinations). Schizophrenia can severely interfere with someone's ability to perform everyday tasks and activities and lead to a person becoming confused and withdrawn.

5.9 **Borderline personality disorder (BPD)** – a controversial diagnosis but may be characterised by poor self-image and insecurity, up and down emotions, feelings of deep emptiness, loneliness and often anger; difficulty with relationships; taking risks; experiencing delusions or hallucinations. BPD can lead to self-harm or suicidal feelings and often goes hand in hand with other mental health problems.

5.10 **Psychosis** – experiences, such as hearing or seeing things, holding unusual beliefs, having disturbed thoughts or flights of ideas, which other people don't experience or share; sometimes described as 'waking dreams', which can be very distressing and disturbing. Almost anyone can have a brief psychotic episode and stressful or traumatic events make them more likely to occur. Some people may have only one or a few episodes, while others may be diagnosed with a related mental health problem.

6.   Handling Disclosure: Recruitment

6.1 Many job applicants are fearful of disclosing information relating to their mental health problems in a job application or at interview stage due to misunderstanding and prejudice about mental ill health issues. Since the Equality Act 2010 it is, also, unlawful for employers to ask questions about health during recruitment in order to prevent discrimination.

6.2 There are certain health enquiries that the Councils make prior to offering a job in order to support candidates. Candidates are asked to contact Human Resources if they have difficulties in completing the on line application form or require any reasonable adjustments within the recruitment process.

6.3 The Councils, also, have a health questionnaire that is issued following the job offer. The information provided is useful to be able to identify any additional support required for the employee.

7.   Prevention: Keeping People Well

7.1 Good communication and people management skills go a long way to prevent mental health problems among employees – often it is a common sense approach.

7.2 Induction – a good induction programme is important for all new, promoted or redeployed employees, as starting a new job or working in a different role can be stressful and unsettling. A negative experience in those first few days, in which employees are given insufficient guidance about expectations and processes, can

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undermine employees' confidence and could trigger problems or exacerbate existing symptoms.

7.3   Managing people – how people are treated on day to day basis is key to their mental well-being and engagement. The behaviours of line managers will, to a large degree, determine the extent to which employees are prepared to go the extra mile in their jobs, are resilient and able to work under pressure; are engaged and remain loyal to the organisation. Good management can be crucial in supporting well-being, spotting early signs of mental health problems, initiating early discussions and interventions, whilst poor management can exacerbate the problems or even be the cause of mental health problems. Supporting employees will build individual, team and organisational resilience.

7.4   In a recent survey carried out by Mindful Employer in February 2016, the biggest barriers to employees speaking out to their managers about mental health issues were they believed that:-

- it would go against them
- nothing would happen
- others in the team would find out
- they didn't trust their manager
- they could lose their job
- they would feel ashamed

8.   Early intervention – Spotting the Signs

8.1   Spotting the signs of mental ill health at an early stage allows managers to nip problems in the bud before they escalate.

8.2   A key part of spotting the signs is managers being alert to the potential workplace triggers for stress such as:-

- Long hours and no breaks
- Unrealistic expectations or deadlines
- High pressure environments
- Poor working environment
- Unmanageable workloads
- Lack of control over work
- Negative relationships or poor communication
- Workplace culture or lack of management support
- Job insecurity or change management
- High risk roles
- Lone working

8.3   Managers who know their staff and have regular 121s in order to monitor work and wellbeing are better placed to spot any signs of mental health issues at an early stage. Often it is about a change in typical behaviour. Symptoms will vary as each person's experience of mental health is different, no two people will react the same. It is, also, important to remember that any change in an individual does not necessarily mean the employee has a mental health problem as it could be related to another health issue or something different. It is important not to make assumptions but to talk to the person directly and listen.

8.4 The table below highlights some changes in physical, psychological and behaviour which may be identifiable.

Physical	Psychological	Behavioural
Fatigue	Anxiety or distress	Increase smoking and/or drinking
Indigestion or upset stomach	Tearfulness	Using recreational drugs
Headaches	Feeling low	Withdrawal
Appetite and weight changes	Mood changes	Resigned attitude
Joint and back pains	Indecision	Irritability, anger or aggression
Change in sleep patterns	Loss of motivation	Over excitement or euphoria
Visible tension or trembling	Loss of humour	Restfulness
Nervous trembling speech	Increased sensitivity	Lateness, leaving early or extended lunches
Chest or throat pain	Distraction or confusion	Working far longer hours
Sweating	Difficulty relaxing	Intense of obsessive activity
Constantly feeling cold	Lapses in memory	Repetitive speech or activity
	Illogical or irrational thought processes	Impaired or inconsistent performance
	Difficulty taking information in	Uncharacteristic errors
	Increased suicidal thoughts	Increased sickness absence
		Uncharacteristic problems with colleagues
		Apparent over reaction to problems
		Risk taking
		Disruptive or anti social behaviour

CIPD, Managing and supporting mental health at work 2011

9. Supporting Staff to Stay Well and in Work

9.1 If mental health is suspected or disclosed, it is crucial that line managers initiate those early conversations about the individual's needs, to identify and offer support or adjustments. Empathy and a common sense approach lies at the heart of effective management of mental health in the workplace and managers must be approachable and make time to listen when staff ask for their help. Often employees will not feel confident in discussing mental health issues and it may be down to the manager to open up a conversation. There are many organisations who can offer external support and a list is provided.

9.2 Conversations which are sensitive should always be held in a confidential setting where employees feel they can be open and feel at ease. It is important that managers focus on the person not the problem and do not make assumptions, be judgemental or patronising. Managers must show empathy and ask open questions and most important listen actively and carefully. If action or support is agreed it may be useful to follow this up in writing.

9.3 Managers should address any potential work related issues which may in turn help the employee to cope with other problems in their lives. Managers should, also, encourage the employee to see their GP or the Councils' occupational health service. Workplace adjustments may be considered and these can be low cost and simple eg flexible working or increasing supervision.

9.4 Equally important is supporting staff when they are absent. Return to work interviews are key to good communication. During any periods of related absence managers should agree with the employee on how often they will keep in contact and consider what support may be needed on their return to work. Early intervention is very

important as the longer someone is off for mental health reasons the harder it may be for them to return. Managers need to be consistent in their approach to return to work in the same way they would be with any period of absence.

10.   Responsibilities

10.1   As an organisation we all have responsibility for the welfare and wellbeing of ourselves and of each other.

10.2   West Suffolk Councils responsibilities are to:-

- Ensure that Mental Health at Work policy forms part of our Wellbeing Strategy for our staff
- Ensure commitment from Leadership Team and senior management to support and endorse this policy
- Promote good practice

10.3   Managers responsibilities are to:-

- Know their staff
- Use emotional intelligence to pick up on changes in an individuals behaviour
- Have regular 121s with their staff to discuss workloads, training needs, opportunities
- Ensure good communication between their staff particularly in times of demand and change,
- Have quality conversations
- Ensure that staff manage their leave and their working hours
- Manage clear expectations
- Ensure good contact is maintained during staff absence
- Be aware of possible signs such as avoidance of difficult tasks or meetings
- Manage health in general and ensure they carry out return to work interviews being aware of sickness patterns, reasons for absence, etc.
- Manage mental health absence in liaison with HR

10.4   Employees responsibilities are to:-

- Raise issues of concern with either their manager or HR
- Be open to offers of support
- Respect each other

10.5   Human Resources Team responsibilities are to:-

- Support managers and give advice on the policy and raise awareness through that support
- Monitor the effectiveness of measures in place to address mental health
- Provide support to managers to deal with change
- Provide advice and guidance on agencies to help employees
- Work alongside managers and staff

11. Enquiries and Change Control

11.1   All enquiries relating to this document should be directed to Human Resource Services.

11.2   Copies of this document can be found on our intranet site under HR policies or can be obtained by contacting Human Resource Services.

11.3   This policy will be subject to review which will be initiated by Human Resources in consultation our recognised trade union.

11.4   Suggestions for any changes to this document should also be forwarded to Human Resources.

12. Useful Contacts

MIND   www.mind.org.uk
Mindful Employer   www.mindfulemployer.net
Mental Health   www.mentalhealth.org.uk
Fit For Work   www.fitforwork.org
Health & Safety Executive   www.hse.gov.uk/stress
Together for mental wellbeing   www.together-uk.org

This policy should be read in conjunction with the Health and Safety policies; sickness absence & ill health policy and flexible time scheme.

For further guidance and advice contact Human Resources.

13. Revisions

Date of review or revision	Reason	Author
March 2016	Drafted	Wendy Canham

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