A practical guide to

Creating a mentally healthy workplace culture

OUR MIND'S WORK MENTAL HEALTH EBOOK

OURMINDSWORK

Contents

Why is good Mental Health crucial in the workplace?

Poor mental health affects everyone at some point in our lives. When we are struggling with our mental health, it impacts our ability to function normally and thrive in the world around us, at home, and at work.

Good mental health is the foundation for individual and community thriving, yet achieving better mental health for all is still a problem left to be solved.

We spend a lot of time at work which can impact our well-being and mental health in both positive and negative ways. Good work is good for our mental health.

Any winning business and people strategy requires a healthy, engaged, productive workforce, yet poor mental health is currently the number one reason for sickness absence and presenteeism.

Employers also have a legal and moral duty of care to employees to protect the health, safety, and welfare of their workers, but getting this right is a bit more complex than delivering mental health awareness training.

Some days people's mental health is good; some days not so good. Some of us have enduring, severe symptoms of mental ill health that are debilitating, and tragically, this suffering can lead to disability, reduced quality of life, and even suicide.

The World Health Organisation states that: "Good mental health is a state of well-being where an individual realises their own abilities, can cope with the normal stressors of life and is able to be productive and make a contribution to his or her community. In this positive sense, good mental health is the foundation for individual well-being and the effective functioning of a community". Our workplaces are communities too and require the same level of thought when it comes to improving mental health and well-being.

Decades of Health & Safety legislation support this. Organisations are regularly taken to court and fined for failing to safeguard employees physical health and safety.

Would it surprise you that employers' have a legal duty of care to protect the health and safety of all workers also encompasses mental health?

Stress is excessive pressure that is the precursor to psychological injuries like anxiety and depression. Workplace stress can lead to burnout, and even suicide. Chronic stress can also severely impact our physical health, putting us at risk of cardiovascular problems, lowered immune system, and even erectile dysfunction in males, and infertility in women.

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It's widely accepted that **employers have a legal duty of care** for our physical health

It's understandable then that preventing work-related stress is crucial to Health & Safety (HSE) legislation under the Management of Health and Safety Regulation 1999. Yes, that does say 1999, this is not a new legal obligation for employers.

Employers in the UK have a legal duty under this regulation to prevent work-related stress by doing risk assessments and actioning them.

Work-related stress, anxiety, and depression are higher than ever and are now the number one reason for sickness absence, according to HSE statistics.

In this report, we are going to explore the following:

Section #1: What's the cost of poor mental health in the workplace?

Section #2: What challenges are businesses facing when implementing employee mental health initiatives?

Section #3: Top 3 pitfalls to avoid with mental health first aid (mhfa) style programmes

Section #4: How can businesses create a thriving mentally healthy workplace culture, and boost productivity?

Firstly, let's consider a couple of recent surveys employers should know about – the ADP® Research Institute's People at Work 2022: A Global Workforce View, and Mind, the mental health charity.

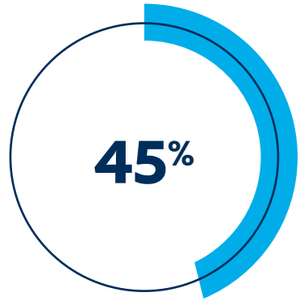
According to the ADP 2022 survey: **"Nearly half of the UK workforce (45%) say their work is suffering as a result of poor mental health."**

The survey found that "five in 10 (53%) of the 18–24-year-old cohort and 52% of 25-34-year-olds, compared to two in 10 (26%) of the 55+ age [group]" are suffering from poor mental health at work.

Stress, anxiety, and other symptoms of poor mental health directly impact productivity levels in day-to-day life. **In the workplace, this is measured by productivity decrease and presenteeism rising.**

The survey also states that 14% of workers reported feeling stressed every week, and 19% feel stressed at work every single day. There is a chance that there may be a level of under-reporting here due to people not wanting to admit they're struggling at work, even anonymously, for fear of job security.

Of course, life outside of work (home, family, friends, etc.) also impacts employees' mental health too. However, work should never be the cause of mental illness or suicide.



Nearly **half of the UK workforce** say their work is suffering as a result of poor mental health

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According to the mental health charity, Mind, "a **third of adults** and young people say their mental health has **gotten much worse** since March 2020.

mind

Section 1

What's the cost of poor mental health in the workplace?

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What's the cost of poor mental health in the workplace?

What's the cost of poor mental health in the workplace?

Mental ill health is part of the human condition, a symptom of how we respond to the world around us, the trauma we experience, life challenges we face, our biology, genetics, and of course work.

Workplaces can directly cause, and contribute to, stress, anxiety, depression, and even suicide. In this section of the Our Mind's Work 2022 report, we explore why this happens; why it's important to create and nurture a psychologically safe workplace; what's the cost to businesses; and what are the risks of not providing mental health safeguards?

1. Why are millions of people struggling with their mental health at work?

We need to take caution when understanding these statistics as the survey only looked at people who were:

- Aged 16 and over
- Living in private housing
- Living in England (data wasn't collected in Wales).

These demographic groups exclude lots of groups of people who are at higher risk of experiencing mental health problems. For example, the statistic does not include people who are:

- In hospital
- In prisons
- In sheltered housing
- Homeless or rough sleeping.

Also, the overall number of people reporting mental health problems has been going up in recent years, as these statistics show:

- The number of people with common mental health problems went up by 20% between 1993 and 2014, for both men and women.
- The percentage of people reporting severe mental health symptoms in any given week rose from 7% in 1993, to over 9% in 2014.
- The number of young women and men reporting common mental health problems has increased (young men are often more reluctant to report mental health problems, hence the higher rate of suicide in the 18-45 age group).

So the actual numbers are probably higher than this 1 in 4 statistic.

You might have heard the often-quoted statistic,

"1 in 4" of us will experience a mental health problem in any given year.

However, **this statistic appeared in 1982, then every 7 years** when an Adult Psychiatric Household Survey was conducted. Over the past 40 years, **this 1 in 4 statistic has never changed.**

Life is messy, and humans are emotional beings with limited resources and resilience to cope with life's challenges.

Mental health problems can be caused by many stressful life events and triggers, such as loss and bereavement, childbirth or becoming a new parent, traumatic experiences, drug and alcohol problems, financial distress, poor general health, and physical health conditions.

When everything people are dealing with is factored in, we don't have to look far for the cause of this worldwide mental health pandemic.

In the UK, millions of people are also struggling with:

- **Money worries** have been reported as the biggest cause of employee stress over the past 6 years, and right now, they're increasing dramatically with the cost of living crisis.

- **Work-related stress**, anxiety, and depression are at an all-time high The most common causes are "workload pressures, including tight deadlines and too much responsibility and a lack of managerial support." For more detail, check out: Work-related stress, anxiety or depression statistics in Great Britain, 2021 (hse.gov.uk)

- **The cost of living crisis.** UK inflation is currently at 10.6% (August 2022), making it so much harder for people to pay for what they need – food, gas, electricity, petrol, and everyday living costs keep increasing, with projections that inflation could hit 22% early into 2023 Combined, this is putting enormous pressure on employees, making keeping a job even more important when job security and take-home pay is reducing compared to the cost of living. With 1 in 8 employees already in Working Poverty, low-wage earners will be significantly impacted.

With these macro and micro-economic conditions as the backdrop, the symptoms of poor mental health make it harder for people to function and be productive at work and in their daily lives.

If we want to create a thriving workplace, we must recognise that employers have an important part to play in ensuring that work isn't why people become mentally unwell and that the workplace community is a culture of trust, care, and support for employees who are experiencing poor mental health and well-being.

Inflation could hit **11.1%** early into **2023**

(October 2022, ONS)

"Now is the time for employers to **step up their response** to providing mentally healthy workplaces.

2. Stress, anxiety, depression: costs uk economy 72 million lost working days & over £56 billion every year

Would it surprise you that mental health problems are the top 3 reasons for employee absence, sickness, and turnover?

According to the NHS and Silvercloud Health: **"The three main causes of employee absenteeism or sickness at work in the United Kingdom are stress, anxiety, and depression."**

Poor mental health in the workplace results in the following:

- A **25% increase** in absences, and staff turnover caused by work-related poor mental health (since 2020);
- **72 million** lost working days annually;
- Costing the UK economy – and therefore, businesses – **£56 billion** every year;
- 65% of people who've left employers' or who are considering leaving are basing this decision on their workplace causing them poor mental health ;
- At least **19% of people** experience mental health problems in the workplace;
- At least – although this figure is probably higher – **12.7% of employee sickness absence days** are because of poor mental health.

Poor mental health of employees is expensive for businesses everywhere.

According to Emma Mamo, Head of Workplace well-being at Mind: "This latest report from Deloitte suggests **employers see a return of £5.30 on average for every £1 invested in staff** well-being so it's never been timelier to prioritise staff mental health, especially given staff are once again adjusting to new ways of working, with many employers trialling hybrid working."

Poor mental health reduces productivity whilst increasing employee sickness days, lowering a workforce's ability to be productive even further.

Stress, anxiety, and depression increase employee turnover and presenteeism (where employees are present but not productive) and naturally impact growth, revenue, profits, and customer satisfaction.

The good news is, as an employer, senior leader, or HR/well-being manager, you can take action to solve these problems in the workplace.

3. Is your workplace psychologically safe, and why does this matter?

In 2017, the government commissioned a review by Lord Stevenson and Paul Farmer (Chief Executive of Mind, the mental health charity) to quantify how investing in supporting mental health at work is good for business and productivity.

The Thriving at Work report sets out what employers can do to better support all employees, including those with mental health problems, to remain in and thrive through work.

The most important recommendation is that all employers, regardless of size or industry, should adopt 6 'mental health core standards' that lay basic foundations for an approach to workplace mental health. It also details how large employers and the public sector can develop these standards further through a set of 'mental health enhanced standards.'

The 6 core standards are:

1. Produce, implement and communicate a mental health at work plan that promotes good mental health of all employees and outlines the support available for those who may need it

2. Develop mental health awareness among employees by making information, tools and support accessible

3. Encourage open conversations about mental health and the support available when employees are struggling, during the recruitment process and at regular intervals throughout employment, offer appropriate workplace adjustments to employees who require them

4. Provide employees with good working conditions and ensure they have a healthy work life balance and opportunities for development

5. Promote effective people management to ensure all employees have a regular conversation about their health and well-being with their line manager, supervisor or organisational leader and train and support line managers and supervisors in effective management practices

6. Routinely monitor employee mental health and well-being by understanding available data, talking to employees, and understanding risk factors.

Employers who haven't taken any steps to prevent work-related stress and psychological injuries are failing their legal duty of care to protect employees' mental health. We cover why this is crucial in the remainder of this section of our A Practical Guide to Creating a Mentally Healthy Workplace Culture (2022) Report.

4. What are the risks of not creating a mentally healthy workplace?

On top of those business impacts are the risk of personal injury claims by employees, former employees, and improvement notices and enforcements by the Health & Safety Executive (HSE) for failing to prevent work-related stress.

According to the Chartered Institute of Personnel and Development (CIPD), there have already been numerous cases where employers have been taken to court for causing mental health problems and workplace stress, dating as far back as 1994.

Financial implications of compensation payouts, reputational damage, and going to court are risks on top of increased employee absence, turnover, reduced productivity, lower revenue, profits, and unhappy customers.

This is a toxic culture that is damaging to an individual's health, well-being, and a business.

Now in the next section, we focus on where many businesses are struggling when trying to implement mental health initiatives in the workplace.

> Current employees could and have **every legal right to make a personal injury claim** and report employers to the HSE for violating health and safety laws. As an employer, your business and **employees are at risk** if you fail in your duty of care to protect your workers' health, safety, and welfare.

What challenges are businesses facing when implementing employee mental health initiatives?

Section 2

What challenges are businesses facing when implementing employee mental health initiatives?

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1. HR responsible for mental health: limited training, no support

Around 7 years ago, mental health suddenly became a “thing” in workplaces.

Employers started to realise that mental health mattered and they had to take action to support employees. It’s also a legal responsibility, under the HSE’s Management of Health and Safety Regulation 1999, and the Equality Act 201 to ensure employers take mental health disability and work-related stress seriously.

However, as no one – or very few people – have any professional mental health background or qualification and experience in health behaviour change in the majority of workplaces, the responsibility was quickly given to HR leaders.

HR leaders and teams were tasked with creating business cases, tackling stigma, raising awareness, and figuring out the best ways to prevent stress and support staff with their mental health across their organisation.

From our extensive research HR professionals told us that they worry about implementing the wrong or unsafe initiatives and feel scared by the new responsibilities for leading positive mental health change at work. They are unsure about how to create effective, long-term culture and behaviour change in the workplace to tackle the problems related to poor mental health and employee well-being.

Third-party mental health training: a lot of noise, few experts

In the early days of mental health becoming more prominent in workplaces, a lot of HR managers simply started doing whatever they thought was best. It’s not easy, especially without the support, training, or a comprehensive strategy to make a positive impact on workplace mental health.

What we’ve also seen in this field – as this sudden interest in mental health created a new -industry of providers and consultants – is making a lot of noise, however very few experts in this new field. There continues to be a limited number of experts offering professional services to businesses with a background in mental health and behaviour change.

This led to a lot of investment being made into poor-quality training and initiatives that just didn’t provide positive, measurable outcomes or improve any of the statistics we have mentioned so far.

A bottom-up, box-ticked approach to mental health in the workplace

Since mental health awareness and training became integrated with HR policies, many employers have taken a bottom-up approach. Instead of a top-down strategy, as is the case with implementing Health & Safety regulations, and other workplace strategies and initiatives. This led to a lack of commitment and investment and a lack of trust in the genuineness of initiatives being offered to front-line employees.

We’ve also seen far too many organisations implement mental health initiatives as more of a “box-ticked” exercise which is more likely to result in companies focusing only on the individual and awareness raising rather than a preventative and strategic approach.

We know, from our own experiences, that when we try to change something about ourselves it comes down to a number of factors: willpower, time, energy, motivation, and in some cases, money. Say you want to lose weight. Most people know how to lose weight.

But, a friend or family member telling us, “you need to lose weight and go on a diet”, isn’t very supportive and doesn’t help you lose weight. If anything, it’s more likely to make you want to eat a tub of Ben & Jerry’s than a salad.

> “Neither approach, even combined, comes close to **providing the sort of strategic, top-down approach** that employees actually need.

What challenges are businesses facing when implementing employee mental health initiatives?

Focusing mental health initiatives on individuals, without a strategic approach

When it comes to health and well-being behavioural changes in the workplaces, the approach needs to firstly focus on prevention: How can employers prevent work-related stress, anxiety, and more serious issues in the first place?

For many employers, this is a big gap that still exists, as there's no strategic preventative approach in-place.

Unfortunately, the majority of mental health initiatives only focus on the individual, not the workplace or external environments. Employers started by handing out information to staff about understanding their mental health and how they can look after it themselves.

Focusing on the individual is like an employer saying, "Here's a pamphlet and a mental health awareness session, it's up to you to make these changes." It feels like the blame is passed onto employees, rather than an employer taking responsibility for workplace triggers of poor mental health and the environment they provide that impacts employee well-being.

So, with that in mind, there's a lot that employers should consider if they truly want to make positive changes to employee mental health and well-being in the workplace and develop a mentally healthy workplace that is a great place to work.

> A strategic, top-down approach is **the only way to proactively change** behaviours and create a positive culture change.

2. Awareness courses & 2-days of training doesn't get results

Once employers started on their mental health journey, it was soon followed by other tick-box initiatives, such as:

- Training Mental Health First Aiders (MHFAs)
- Providing managers with mental health awareness training rather than developing managers to create mentally healthy cultures in their teams.

This box-ticked, bottom-up approach to mental health puts the burden on an individuals' recovery rather than the organisation tackling workplace problems. Sadly, we have seen time and again that this can cause more problems than it solves.

Raising awareness at an individual, employee-level, is still part of the solution. Giving staff more information about how they can recognise signs of poor mental health without tackling the workplace causes and creating a psychologically safe culture can lead to an increase in people's fear that they need support but are unable to ask for it at work.

This approach misses essential steps of building safety nets to support people when they need it. It overlooks essential steps for building trust and safety for disclosure to happen. And it also can create more pressure for managers and HR leaders to provide support when they are not trained or supported enough to deliver this for employees.

Is your workplace psychologically safe?

Employees who are struggling with their mental health need to know they can raise this issue with managers without the fear of stigma and discrimination. It's well known that an employer legally can't treat someone differently, or discriminate against them for physical health problems or a disability; the same applies to mental health and mental health disabilities under the Equality Act 2010.

Instead of a box-ticked, bottom-up approach, employers, and leaders need to create psychologically safe workplaces, to drive forward cultural and behavioural changes. This will create the outcomes many businesses are looking for: prevention, tackling stigma, raising awareness, and supporting employees more effectively with their mental health.

From a business perspective, a top-down strategic approach – when implemented effectively – will ensure your employees are healthier, more engaged and productive, take less time off, make fewer mistakes, and reduce staff turnover.

Organisations that are still stuck using a box-ticked approach aren't getting the outcomes and benefits they'd expect from those initiatives and they don't achieve the minimum standards recommended by The Thriving at Work Report.

Brief overview of mental health first aid in the workplace

One of the key drivers of mental health-related risks in organisations is the lack of recruitment, monitoring, safeguarding, and support provided for Mental Health First Aiders (MHFAs). We will go into this in more detail in the next section. To provide some background, this is how and why MHFAs started appearing in so many organisations across the UK and worldwide:

- MHFA training originated in Australia in 2001. It started with a survey of the general public, showing that mental health literacy was fairly poor and limited. In response to this survey, 2-day training courses started appearing across Australia for anyone who wanted to learn more about mental health.

- This course gave people increased mental health awareness, understanding, and literacy. It includes a limited overview of mental health within the psychiatric model; e.g. What is depression, anxiety, bipolar disorder, etc?

> **Employees who are struggling** with their mental health need to know **they can raise this issue with managers** without the fear of stigma and discrimination.

- People who took these MHFA courses (and can still take them now) are given some strategies and tools they can apply if they encounter those who appear to be struggling with their mental health in the community. For example, if someone is displaying signs of suicidal thoughts, an MHFA could initiate an intervention and potentially save a life.

- In the community, this is a brilliant solution, giving people the confidence to help others who are struggling with their mental health. People are also better equipped to help themselves, family, loved ones, and friends.

Once someone with MHFA skills has helped another person in the community who is struggling they're unlikely to see them again. Now let's think about how MHFA applies in practice in the workplace. It's a completely different environment that produces drastically different outcomes.

In a workplace, you have governance, legal compliance, policies, procedures, and health and safety guidance. All of this has to be included in anything employers and employees do in the workplace, including and especially mental health initiatives.

A lot of organisations invested in MHFA programmes. Lots of people received training with the expectation that they were now in a voluntary role with responsibilities, but without any of the following:

- A safe recruitment process for a role with these responsibilities;
- Any governance or Safeguarding in place;
- Infrastructure or additional support;
- Monitoring;
- Reviewing the service outcomes.

As you can imagine, and as we've seen time and again, this creates risks.

Risks for the MHFAs, employees who are contacting MHFAs, and for the employer too who holds the duty of care to protect the health, safety, and welfare of all employees.

It's a 2-day training course that in most organisations produces very small outcomes. So, employers can now say, "If you're struggling with your mental health, you can now talk to one of our mental health first aiders", without any governance, safeguards, or support to provide a listening and signposting service safely.

At Our Mind's Work, our background and professional training is behavioural change, health and social care, and mental health. We know that it's not as easy as giving people MHFA training, or taking a tick-box approach to mental health awareness. It takes a lot more work and a proactive strategy to improve mental health in the workplace, to create a thriving psychologically safe environment for employees.

What challenges are businesses facing when implementing employee mental health initiatives?

3. Organisation leaders believing they've "done" mental health

Mental health is never 'done.' It's a strategy that requires constant monitoring, reviewing, and continuous improvement, especially in the workplace.

Stresses change. Employees' circumstances and personal lives change. No one's life is ever static, and humans aren't islands.

Nor is any workplace. New challenges emerge. Everyone is always adapting in some way, and many employees struggle with mental health problems without the support they need to recover and stay well at work.

However, as we can show through programmes we deliver for clients, a lot more can be done to promote individual thriving and mentally healthy workplace cultures.

Developing good mental health at work requires a strategic approach that aims to embed behaviour change across a whole organisation using effective models to achieve improved health outcomes and a mentally healthy culture. Such frameworks to build a strategic approach around should consider the workplace as an ecosystem and look at mental health more broadly.

Frameworks like our **Culture Change Progression Mode**l, understands mental health to be affected by the interactions between the employee, their workplace and communities, and the physical, social, and political environments that they experience. We explain this in more detail in Section 4.

If we want to create culture change to improve mental health, prevent work-related stress, tackle stigma and discrimination, develop trust and safety for disclosure, respond early and improve recovery for our employees focusing only on one of these layers of the model will not give us these outcomes.

In the next section, we go into more detail about the serious risks and pitfalls of mental health first aid (MHFA) training and programmes, before outlining solutions and actions business and HR leaders can take to improve mental health in the workplace.

Section 3

Top 3 pitfalls to avoid with mental health first aid (MHFA) style programmes

Mental Health First Aid (MHFA) and other peer-to-peer programmes, such as Mental Health Champions are similar enough that we are including all of them in this section, either by saying MHFAs or P2P support programmes.

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3.1. What's the worst-case scenario with a mental health first aid (MHFA) style programme?

A tragic suicide of an employee is the worst-case scenario for mental health first aiders (MHFAs) and companies.

Tragically, in certain work environments, someone wishing to take their own life – and this does happen in workplaces – can sometimes, intentionally or not, harm or kill others too. Such as airline pilots, train or lorry drivers, and others responsible for vehicles, weapons, harmful chemicals, explosives, and anything else capable of killing people.

MHFA training is not enough to prevent, intervene, crisis manage, and engage in postvention in the workplace where suicide is a risk.

At a minimum, frontline professionals receive 2 days of suicide intervention skills training, alongside more in-depth training, policy and procedures to keep people safe. They also are often in positions where they need to use these skills and processes every day, which builds confidence and competence in safeguarding people at risk of significant harm to themselves and others.

People can die when things go wrong, where suicide prevention and interventions aren't carried out swiftly, in the right way, and with the right safeguards in-place.

Not only is this devastating and tragic for the individual and their loved ones, but for the business too; you could end up dealing with a very messy, damaging, and traumatising situation that will have a ripple effect through the organisation.

People are left asking questions: **What could we have done to prevent this?**

For anyone responsible for employee health, safety and welfare, you have to ask yourself:

"How are mental health first aiders supposed to do this after two days of mental health awareness training? Ethically and legally, there could be serious ramifications for mental health first aiders and the businesses if they are found liable."

Remember, those 2 days of MHFA training only cover suicide prevention and awareness in the most basic terms. MHFAs won't have the confidence or skills after that course to competently manage a situation where someone is at risk of significant harm to themselves or others, in the same way as a professional with a lot more training and experience.

Ultimately, potential liability is one of the more serious risks every business faces.

10%

According to HR News, **10% of UK suicides** – as many, if not more than **650 people** – are because of work-related stress.

> How are **mental health first aiders** supposed to do this after **two days** of mental health awareness training?

When should MHFAs breach confidentiality?

In a workplace, any disclosure by an employee must be kept confidential unless it is recognised as a safeguarding breach to protect people from the risk of significant harm to themselves or others. For example; Johnny, who works on a construction site, tells a mental health first aider that he is drinking alcohol till 3 in the morning to help him sleep due to stress.

Johnny is provided some information about the EAP and is signposted to Alcoholics Anonymous by the mental health first aider.

The next morning Johnny is driving heavy machinery around the site, is still under the influence of alcohol, and he causes a fatal accident, killing one of his workmates, which should have been prevented.

Who's to blame? Who is liable? Johnny for working under the influence? The mental health first aider for not breaching confidentiality and following health and safety policy? Or the employer for not providing the mental health first aider with the right training and support to carry out a role with this level of responsibility?

When an employee discloses that they are having suicidal thoughts and may be planning to take their own life, this is when a mental health first aider **must** breach confidentiality on a need-to-know basis to keep that person safe. However, many organisations don't have a safeguarding policy and procedure in place that should be followed by the mental health first aider, and anyone else to keep an employee safe from significant harm to themselves.

They also will then be missing a procedure on how to record and monitor these incidents.

If someone cut their finger and a first aider applied a bandage and called the ambulance then there are legal requirements to report, record, and monitor this. But, someone at risk of suicide? Nope, you don't have to do this, but why wouldn't you have that parity in place as best practice?

There are hundreds of jobs where suicidal thoughts and intentions could cause serious loss of life, beyond the individual struggling with their mental health.

Mental health first aid training does not equip people with the skills and competence necessary to take action to prevent this confidently. There's a huge disconnect between the role and expectations a MHFA is being given and the training provided.

The whole recruitment and onboarding process is missing. People aren't clear what their role is and what the boundaries are. **Mental health first aid is meant to be a listening and signposting service**, not a revolving door mental health support service. Without realising it, MHFAs can also often step outside of the boundaries of the role, putting themselves and their colleagues at risk.

> Mental health first aid is meant to be a **listening and signposting service**, not a revolving door mental health support service

3.2. Monitoring & supporting MHFAS: what's being done?

Mental health first aid style training should be one layer of support. Not the only layer available to employees. Especially when staff are volunteering for this role, where there's little to no support for MHFAs, and they're doing this alongside their paid work.

Tragically, in certain work environments, someone wishing to take their own life – and this does happen in workplaces – can sometimes, intentionally or not, harm or kill others too. Such as airline pilots, train or lorry drivers, and others responsible for vehicles, weapons, harmful chemicals, explosives, and anything else capable of killing people.

In this section, we outline why monitoring and support are crucial, and how so many organisations are falling short of this once they've got mental health first aiders deployed in the workplace.

Monitoring a MHFA service is crucial

If you aren't monitoring a mental health first aid service, you are operating with the following blindspots:

- Is the service working, what impact is it having, and how are you measuring that?
- Are employees benefiting from our investing in, training, and communication campaigns around mental health first aid?
- Are risks and pitfalls being identified, and what's being done to address these service challenges?
- Are employees and mental health first aiders safe, have risk assessments and safeguards been put into place?
- Are mental health first aiders engaged and proactively providing a service colleagues need?
- Do employees trust the confidentiality of MHFA?
- Are we monitoring the time spent in contacts between staff and MHFAs?
- Are MHFAs listening and signposting effectively?
- Are they breaching confidentiality appropriately, and are more serious problems being referred the right way, quickly?

Some of the risks, as mentioned above, include whether confidentiality is being adhered to and an understanding of when it needs to be breached.

When MHFAs are spending too long speaking with a colleague, there's a serious risk that it becomes a therapy session and in-depth disclosure that can trigger vicarious trauma for the MHFA. Or ongoing support provided; which, again, shouldn't be the case.

> Mental health first aid style training should be **one layer of support** – not the only layer **available to employees**

Here are some of the ways you can monitor MHFAs more effectively:

- Monitor how long contacts last;
- Are the same colleagues going back to the same MHFAs?
- Where are colleagues being signposted to?
- Are colleagues getting the support they need once they've been signposted?
- Do employees and MHFAs understand role boundaries?
- Did employees who accessed a MHFAer find it helpful?

Providing signposting is being done appropriately, service users shouldn't need to keep coming back to the same mental health first aider. At that point, they should be getting the professional support they need. If we aren't monitoring these, there are risks and pitfalls not being detected, MHFAs are stepping outside of their boundaries, and colleagues potentially aren't getting the professional help they need.

Where are colleagues being signposted?

Mental health first aid is a listening and signposting service. For many, it could be the first step towards getting the treatment they need for mental ill health. MHFAs and the service infrastructure supporting them should ensure colleagues know who to contact for professional help, such as:

- Speak to your GP;
- NHS 111, or the Crisis Team, 999 or A&E when urgent support is needed;
- Mind and other mental health charities such as the Samaritans (116 123);
- Community mental health support groups;

Internally, MHFAs should also signpost team members to managers, especially when someone's mental health impacts their ability to work. Managers and HR are there to support team members, and when there's a mental illness or disability, they should consider reasonable adjustments.

Companies with employee assistance programmes (EAPs) should also use this as a signposted internal resource. It's often quicker for employees to go through an EAP to gain quicker access to therapy services, such as CBT (cognitive behavioural therapy), occupational health, and talking therapies.

In this way, a MHFA is a middleman, to listen and signpost. Ensuring colleagues can get the right support they need at the right time. However, this role is also reactive and not a preventative solution.

> Mental health first aid is a **listening and signposting service.** For many, it could be the **first step** towards getting the treatment they need for mental ill health

Benefits of Effective Monitoring

When a company is monitoring the uptake and use of mental health first aid services, there are several benefits, such as:

- Knowing whether colleagues are being signposted to the right services;
- Whether that signposting is leading to colleagues actually getting that support;
- If so, why or why is this not happening?
- What more can we do to ensure colleagues are getting the professional support they need?
- Are MHFA contacts being done the right way for the right amount of time?
- What are colleagues coming to speak to MHFAs about so we can use this intelligence to plan preventative and wider reactive responses?

You might find MHFAs are being approached due to people experiencing financial distress, as a result of the current cost of living crisis. If that's the case, organisations can provide more practical support, guidance, and even resources to offset and help employees' through this, and consider additional development for MHFAs to equip them to understand and respond well to these contacts.

It's essential to know whether MHFAs are providing an effective service for colleagues.

Companies do this for every other service, internal and external. Businesses need to know customers are happy. As part of internal appraisals, team members assess managers. And yet, unless you're already working with Our Mind's Work, many employers we've spoken to monitor the outcomes of providing a mental health first aid service.

3.3. Why are colleagues not contacting our MHFAs?

One problem with MHFA services is that after investing in them, providing training, and communicating this exists, colleagues aren't reaching out to get support from mental health first aiders.

In our experience and research, there's a few reasons for this:

- Employees don't have trust in the confidentiality of the service or the MHFAs;
- Employees prefer to seek support from their partners, family and friends, then managers before someone in a MHFA style role;
- MHFA is reactive and relies on people reaching out;
- Promotion in rarely done by proactive engagement by MHFAs.

> **Unfortunately**, in the majority of workplaces, **a lot of this is missing** and that's why very few people are contacting them and asking for support.

When companies come to us and say, **"We've got mental health first aiders, but no ones contacting them",** I ask them the following question:

Why did you invest in mental health first aid, as a service provision?

Investing in any mental health initiative should be focused on solving a problem. I then ask:

- What was the problem you were trying to solve?
- Why do you think MHFA hasn't solved that problem?

Often, HR and organisational leaders' answers centre around, "Well, everyone else is doing it. There was a massive push. Government investment. We were encouraged to invest in mental health first aid. Our leaders think it sounds good that we have them."

However, investing in any mental health initiative needs more than training. An initiative such as this needs visibility, awareness, and a comprehensive infrastructure to support and keep people safe.

For many people, knowing they need support with their mental health is a difficult challenge to overcome. Reaching out is even more difficult. Trust needs to be built. Anti-stigma work is equally important, so that colleagues know they can reach out and get the support they need without it impacting their jobs or promotion prospects.

Saying to team members that they can talk to MHFAs when they're struggling with their mental health isn't enough. Staff wearing green lanyards – to show they are mental health first aiders – isn't enough to inspire confidence in people when the topic is so personal, and often difficult to discuss.

Especially when there's a lack of visibility, awareness, and trust in a service.

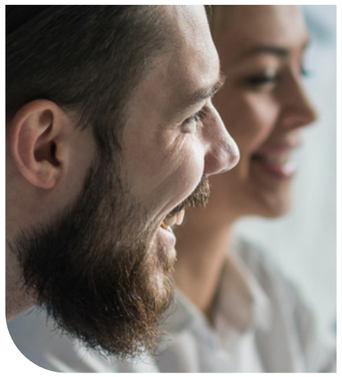
How can businesses reduce these risks and prevent MHFA pitfalls?

In this report's next section, we outline how businesses can implement more effective mental health support. We want employees at every company and organisation to feel safe, secure, and able to ask for help, and for mental health to be embedded firmly in the company's culture, processes, strategy, and leadership.

We should be working toward achieving parity in the workplace for mental health to align with how employers invest in physical health and safety.

Dive into the next section of the report to understand HOW to implement an effective, proactive, and culture-driven Mental Health Framework.

> For many people, knowing they need **support with their mental health** is a difficult challenge to overcome but **reaching out** is even more difficult.



Section 4

How can businesses create a thriving mentally healthy workplace culture, and boost productivity?

Contents

Book your FREE consultation by clicking here

4.1. Taking a strategic approach to mental health at work

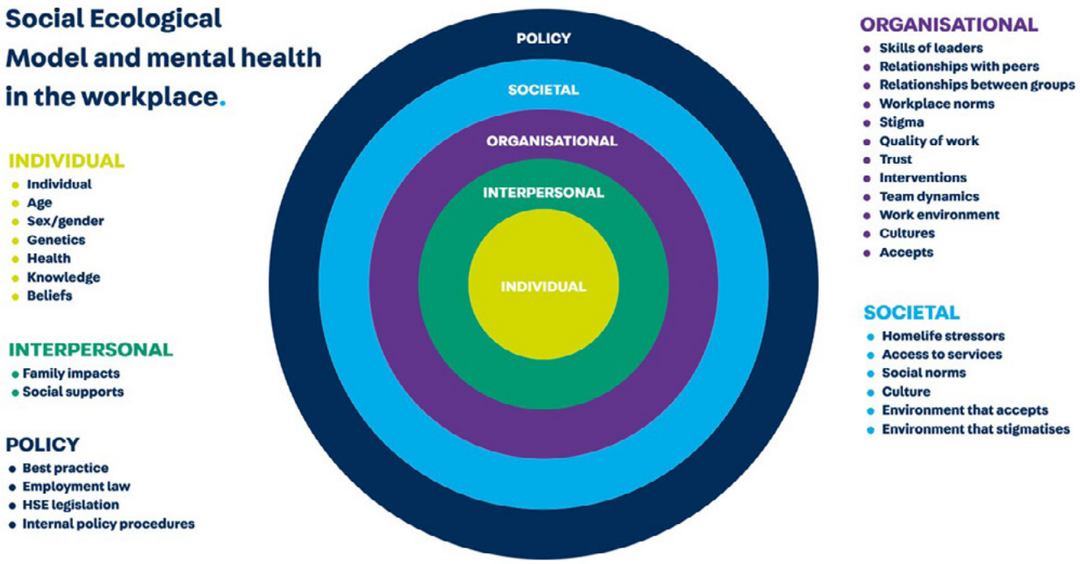
A plan is not a strategy when it comes to improving mental health culture in the workplace.

A plan of activities you are taking, such as raising awareness of mental health with employees, training mental health first aiders, implementing an EAP may sound good but they won't make the organisation mentally healthy because it isn't a strategy.

Strategy is the intelligent allocation of resources through a unique system of activities to achieve a goal. Strategy has a theory that explains how you are going to be better than other businesses at achieving a mentally healthy workplace that thrives and reaps the rewards that this competitive outcome will achieve.

Developing good mental health at work requires a strategic approach that aims to embed behaviour change across a whole organisation using effective models to achieve improved health outcomes and a mentally healthy culture. Such frameworks to build a strategic approach around should consider the workplace as a social ecosystem and look at mental health more broadly.

> **A plan is not a strategy** when it comes to **improving** mental health culture in the workplace.



Frameworks like our **Culture Change Progression Model**, understands mental health to be affected by the interactions between the employee (Individual), their workplace (Organisational) and communities (Societal), and the physical, social (Interpersonal), and political environments that they experience. As a starting point, we created a **Social Ecological Model**, adapted for the workplace to improve mental health (see visual opposite).

Health professionals, researchers, and community leaders use this social ecological model developed by Bronfenbrenner in the 1980s, to identify factors at different levels, the individual, the interpersonal level, the community and societal levels including policy that contribute to poor health to develop approaches to disease prevention and health promotion that include action at every level.

Ecological systems theory can be applied to any health and well-being topic you want to make improvements with and has been expanded into public health disciplines for health promotion.

Our Mind's Work has integrated this model with the **Thriving at Work Standards**, plus the legal requirements and best practice for preventing stress and supporting employees with mental health disabilities into our Culture Change Progression Model.

If we want to create culture change to improve mental health, prevent work-related stress, tackle stigma and discrimination, develop trust and safety for disclosure, respond early and improve recovery for our employees, focusing only on one of these layers of the model will not give us these outcomes.

Instead, we need to look at the bigger picture, taking a completely strategic and holistic approach to mental health beyond the individual. Take a closer look at our culture progression model opposite and the ways this can help to develop a mentally healthy workplace culture.

How can businesses create a thriving mentally healthy workplace culture, and boost productivity?

4.2. Our Mind's Work Culture Progression Model: An interactive benchmarking guide

Use our Culture Progression Model to benchmark where your organisation is when it comes to embedding mental health culture change. See what improvements or new strategies and approaches are needed to embed best practices, and meet government-recommended standards to create a mentally healthy and safe workplace culture where everyone and the whole organisation is thriving.

HERE'S HOW YOU DO THIS:

1. **Use the PDF'S HIGHLIGHTER TOOL** *(top right of this page)* to highlight what your organisation currently has in place
2. **ANYTHING THAT ISN'T HIGHLIGHTED** should be considered as potential next steps toward achieving mentally healthy standards and an inspiring culture *(embedding the standards)*
3. **DON'T FORGET TO SAVE THE PDF** with your highlights noted
4. **BOOK IN YOUR FREE MENTAL HEALTH** strategy consultation with Emily and show her where your organisation is on the model

If your organisation wants to enhance productivity, reduce costs associated with poor staff mental health, retain and attract the most talented employees and boost your organisational reputation, we can help.

To see where your organisation is on the mental health roadmap, use our Interactive Progression Model Benchmarking Tool on the next page.

STAGES	AT RISK	BOX TICKED	MENTALLY HEALTHY	INSPIRING CULTURE
SENIOR LEADERSHIP (SLT) & SPONSORS	• SLT has negative mindset about mental ill health and employee wellbeing • Not on the board room agenda	• SLT have signed off one-off initiatives	• SPONSOR sit in strategy team • Communicated commitment and budget • SLT Have attended appropriate mental health leadership training • Safely share their own mental wellbeing challenges	• SLT lead culture through behaviours framework • Mental Wellbeing strategy is built into the People Strategy as the fabric not just a thread • Employee wellbeing is seen as a KPI to achieve • Embed a culture of trust and psychological safety
TREATMENTS & THERAPIES	• Lack of Employee Assistance Programme (EAP) or Occupational Health	• EAP & Occupational Health are set up, but not utilised until sickness absence stage and underpromoted	• Occupational Health are set up and appropriately utilised for employees with mental health disabilities EAP well promoted	• EAP & Occupational Health are fully embedded in to the organisation, and are used as both early intervention and preventative measures • Range of EAP services and benefits are promoted • Professional support offered is considered to engage high risk groups and represent employees through a D&I lens
STRATEGY & POLICIES	• Insufficient policies that take wellbeing into account • No mental wellbeing strategy • No HR support provided	• HR support in-place. Equality Act 2010 used to apply reasonable adjustments for mental health disabilities	• Effective HR Support provided. Equality Act 2010 used to apply reasonable adjustments for mental health disabilities • The right policies in place and that take staff wellbeing and mental health into account • Safeguarding and Suicide Prevention Policies and procedure in place • Sufficient Stress Risk Assessment policies & procedures in place • Strategy developed and focuses on problem solving and outcomes • Regular review of mental wellbeing strategy lead	• Equality Act 2010 used to apply reasonable adjustments for mental health disabilities, becoming disability confident at every level of the business • Mental wellbeing strategy is embedded and effective and supported by Leadership, HR and H&S • Mental wellbeing strategy is embedded into the people strategy and is considered through a D&I lens • Pro-actively challenges stigma and demonstrates commitment to creating a mentally health workforce • Stress Risk Assessment policy & procedures are effectively embedded, including regular audits at high-risk times
MANAGEMENT & PREVENTION OF WORK RELATED STRESS	• Not conducting Stress Risk Assessments and not meeting HSE legislation	• Stress Risk Assessments conducted as a reaction to sickness absence or disclosure of stress • Not meeting HSE legislation	• PREVENTATIVE Stress Risk Assessments are completed and reviewed • All managers can identify when an employee is under stress at an early stage and conduct the REACTIVE (individual) Stress Risk Assessment as early intervention • Conducts regular work-related stress audits to identify causes and develop action plan to prevent work-related stress	• Job roles are designed to create Good Work and consider the impacts of on employee health, safety and wellbeing • Managers work to HSE Management Standards to prevent and identify when an employee is under stress at an early stage and conduct the REACTIVE (individual/employee) Stress Risk Assessment as early intervention • Company conducts PREVENTATIVE Stress Risk Assessments (company & role). Signposts to appropriate treatment & support • Regular department work-related stress audits conducted to ensure prevention through benchmarking
MENTAL HEALTH MANAGER TRAINING	• No manager training provided	• General mental health awareness training provided for managers	• All people managers and leaders attend preventing stress and supporting mental health training that provides the knowledge, skills, tools and confidence to change behaviour • Refresher training for managers provided • Suicide prevention procedures trained out to managers and leaders	• Training is embedded into leadership programmes and onboarding for all new managers • Managers are developed ineffective people management (apprenticeship levy fund can be sourced) • Managers are empowered to create mentally healthy workplaces, look after their own mental health and access support when they need it
PEER TO PEER SUPPORT	• Mental Health First Aid/ wellbeing style champions trained provided with limited monitoring and support	• No peer to peer support offered	• A systematic, safe and structured framework is in place for the recruitment and training of peer-to-peer support initiatives to plan and deliver regular campaigns • The role will also provide a listening & signposting service to their peers in the workplace • Suicide prevention procedures and training • Safeguarded and monitored to ensure quality assurance	• A systematic, safe and structured framework is fully implemented for the recruitment and training of Mental Health Advocates, to deliver mental health support and campaigns to their peers in the workplace • Ongoing support, training and development is in place for all peer to peer support • Mental Health Peer to Peer support is also considered through a D&I lens and vice versa
EMPLOYEE AWARENESS	• Mental health not actively talked about in the workplace	• HR-led mental health campaign communications in place	• Peer led mental health campaigns are in place, raising awareness around all support available • Campaigns are designed to be accessible, engage and represent all employees • Employee mental health and wellbeing sessions are regularly conducted and promote support available	• Full, peer-led, mental health and wellbeing campaign strategy is undertaken by appropriately-trained advocates. Monitoring and data collection of campaign outcomes is consistently collected • Employee mental health and wellbeing awareness sessions are regularly conducted based on employee needs • All existing activity is promoted and embedded • Access is provided to bespoke, company-branded information and guidance around mental health
MONITORING & EMBEDDING	• No monitoring taking place	• No monitoring taking place	• Evaluation of interventions taking place • Employee surveys include wellbeing data sets and consult with employees to gather insights • Skills are developed for behaviour change	• Evaluations of all implemented initiatives are conducted, and third party services data are provided and reviewed. • Data is used to inform future action planning during strategy reviews and problem solve • Refreshers, built into onboarding, manager development embedded through all pillars

Conclusion & key takeaways

An effective mental health strategy and action plan should be focused on the outputs. What do you want to achieve from your strategy, what problems are you trying to solve, what is your staff survey telling you? What behaviours do you want to change and embed, how do you prevent, respond to and support mental health at work and create an ecosystem that fosters individual thriving.

The ultimate outcome from that is a healthy, engaged and productive workforce, the biggest input to any winning business and people strategy creating a great place to work.

Mental health first aid, or any standalone initiative more often than not, isn't a solution to poor mental health at work and unfortunately, can create more problems and require further investment as the issues are still there.

Culture change doesn't happen overnight and can take years of strategic planning and implementation, monitoring, reviewing and continuous improvement. You may also be reading this as an HR or H&S professional or well-being lead who has this responsibility as part of your role, but you have no background or experience in designing and delivering a mental health culture change strategy, feeling like you're learning as you go rather than being the expert.

What challenges are businesses facing when implementing employee mental health initiatives?

> **A plan is not a strategy** when it comes to **improving** mental health culture in the workplace.

For organisations, the positive outcomes of getting this right and maximising your return on investment include:

- Embed a culture change programme supporting everyone to change the way they think, talk and act on mental health in the workplace, ethically and safely;
- Building trust and psychological safety in the workplace culture;
- Ensuring prevention and early intervention, response and support to individuals struggling with their mental health;
- Meeting your duty of care and HSE legislative obligations;
- Reduce costs, with much less absenteeism and presenteeism;
- Retain valued and experienced members of staff – and thus avoiding unnecessary recruitment and training costs;
- Promoting a mentally healthier ecosystem that fosters thriving employees, generating an increase in productivity.

My final thoughts, **for anybody reading this whose responsibility it is to deliver a mental health and well-being strategy is that you've been given a challenging project** to develop, deliver, embed, evidence the outcomes and leave a legacy behind when you leave.

You may be passionate about mental health and been tasked with implementing a company-wide action plan, but don't have the expertise to know where to start. I hope that this guide has been helpful in alerting you to some of the risks and pitfalls to avoid and providing you with a starting point and best practice framework to work towards achieving.

This guide has been written by Emily Pearson, the Founder and Managing Director of Our Mind's Work. She has over 20 years of experience working in the Health and Social Care sector and 7 years in the workplace mental health field supporting organisations across the globe to develop and deliver mental health strategies.

Emily would like to help you too: **Book your FREE mental health strategy consultation with Emily today.**

Lets talk!

Our vision is simple: to evolve workplace cultures in the safest and most ethical way to a place where the wellbeing of their employees is embedded in to company values, by focusing on keeping employees mentally well.

Emily Pearson –
Founder of Our Minds' Work

OURMINDSWORK

Need our help implementing a mental health best practice framework?

98% of professionals who've worked with us would recommend Our Mind's Work

We work with a range of organisations to help them proactively create a workplace that supports the mental health of their employees and ensures they gain the benefits this brings to their people and performance. Our clients include:

Let's talk!

We work as a single united team with market-leading organisations around the world and give our clients the highest quality service possible.

If your organisation wants to help employees to thrive, enhance productivity, reduce costs associated with poor mental health, retain and attract the most talented employees and boost your organisational reputation, we can help.

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