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Supporting Employee Mental Health Guidelines	

Introduction and Aim

These guidelines support the UHB's People & Culture Plan in maintaining an engaged, motivated and health workforce. Specifically, the guideline is designed to assist managers/supervisors in balancing employee's mental wellbeing with the demands of work. The aim of this guideline is to create a supportive working environment that can help prevent new mental health problems and support those with existing conditions to remain in and thrive in work.

Objectives

- Clarify the responsibilities of the employee

- Clarify the responsibilities of the employer

- Provide examples of how to approach mental health conditions with staff

Scope
This procedure applies to all of our staff in all locations including those with honorary contracts. Staff members who have managerial/supervisory functions within their role can utilise the manager and staff member guidance.

Equality and Health Impact Assessment	A standalone Equality and Health Impact Assessment (EHIA) has not been completed as these guidelines support and are aligned to the Employee Health and Wellbeing Policy. An EHIA was conducted for this Policy and the supporting documents and this found there to be a positive impact.
Documents to read alongside this Procedure	Employee Health and Wellbeing Policy People and Culture Plan Management of Stress in the Workplace Guidelines Stress Risk Assessment ESR 000 NHS Wales-Well-being Conversation Guide: EHWS: Staff Wellbeing for Managers and Staff:

CARING FOR PEOPLE
KEEPING PEOPLE WELL

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NHS WALES

Bwrdd Iechyd Prifysgol
Caerdydd a'r Fro
Cardiff and Vale
University Health Board

	NHS Mental Health
	Mind – Wellness Action Plan Guide for Line Managers
	Mind – Wellness Action Plan for Employees
	NHS Employers – Wellbeing Conversation Guidance
	5 ways to wellbeing
Accountable Executive or Clinical Board Director	Executive Director of People and Culture
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Disclaimer
If the review date of this document has passed please ensure that the version you are using is the most up to date either by contacting the document author or the Governance Directorate.

Summary of reviews/amendments			
Version Number	**Date Review Approved**	**Date Published**	**Summary of Amendments**
1	07-09-22	09-09-22	New Guidelines – previously incorporated into Management of Stress and Mental Health in the Workplace Procedure (UHB 071) Changed to Guidelines Following sections strengthened: Section 2 to provide clarity for employee • Section 3 to provide clarity for line manager/supervisor • Section 4 - inclusion of incoming REACTMH training for managers • Sections 6 & 7 created to provided practical advice

Contents

1   Mental Health

A person's mental health is an individual, personal attribute. Many people may feel their mental health dictates their role and function in society. The UHB will make reasonable adjustments to ensure staff with mental health conditions reach their full potential within the organisation.

Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood. The World Health Organisation defines mental health as:

"A state of wellbeing in which every individual realises their own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to their community"

It is widely recognised that approximately one in four people will experience a mental health issue in any given year, while one in six working age adults report common mental health condition e.g. anxiety and depression in any given week. The Managing Attendance at Work Policy highlights 27% of sickness absences are attributed to stress, anxiety & psychological conditions. An individual's mental health may fluctuate in a day, honest non-judgemental discussions between employee and manager/supervisor can help both parties in achieving a productive environment.

Work plays a vital role in our mental health and wellbeing, not only does it provide financial support but also social contact, and a sense of identity and achievement. However, work can also make us unwell and if the workplace is not supportive or the demands of the role raise beyond the individual's capacity, it can trigger or exacerbate mental ill health. The Welsh NHS is committed to valuing the people who work within it and providing preventive wellbeing to improve the health of people in the future (Managing Attendance at Work, 2018).

It is important to recognise that mental health is a spectrum and the severity and frequency of experience a mental health condition is changeable. Over the course of your life, if you experience mental health problems, your thinking, mood, and behaviour could be affected. Many factors contribute to mental health conditions, including:

- Biological factors, such as genes or brain chemistry
- Life experiences, such as trauma or abuse

- Family history of mental health problems

The spectrum of mental health

(Adapted from *"Mental Health Promotion: Paradigms and Practice"* K Tudor 1996)

The fear of discrimination and the stigma associated with mental health remains a major obstacle that can prevent individuals from accessing appropriate support in the workplace. Whilst managers may shy away from the subject due to the fear of making matters worse.

Mental ill health can emerge suddenly, as a result of a specific event or gradually where it worsens over time. Whether it is feeling stressed or experiencing common conditions ranging from mild to severe anxiety and depression, or conditions such as bipolar disorder or schizophrenia, anyone can suffer from periods of mental ill health.

Some conditions can be persistent and may be classed as a disability, while others come and go, giving the individual 'good days' and 'bad days'. While someone may be diagnosed with a mental health condition, with the right support they can still enjoy positive mental health.

Positive mental health is rarely an absolute state. Factors both in and out of work can affect the mental health of individuals. For example, an employee may generally have positive mental health however a relationship breakup may trigger a period of depression moving them into poor mental health. Alternatively, an employee with a mental health condition such as generalised anxiety disorder, may have developed coping strategies that are working well and mean they move into having positive mental health.

Work related stress and mental health often go together. The symptoms of stress and common mental health conditions can be similar e.g. loss of appetite, altered sleep pattern, difficulty concentrating and tearfulness can be symptoms of both. Work related stress may also aggravate an existing mental health condition that the person had previously managed successfully without it impacting on work. If work related stress reaches a point where it has triggered an existing mental health condition, it may become hard to separate one from another.

Stress alone is not a mental condition, though it is important to recognise that the two can be closely interlinked. If someone is experiencing high levels of stress it can trigger mental health conditions such as anxiety or depression, likewise someone who has a mental health condition may find their symptoms exasperated by stress. Please refer to the stress guideline.

2   Responsibilities of the employee

Discussing a mental health condition can be a very personal matter, staff may feel embarrassed discussing such a private matter with their manager. Staff are entitled to their privacy, however we would encourage staff members to have the courage to discuss their mental health conditions with their line manager. Staff should be aware that occupational health will not inform any managers of mental health conditions without employee consent; any details provided to occupational health in pre-employment checks will not be passed onto the manager.

Generally, it is recommended for staff members to discuss any conditions that may impede their ability to work at their highest ability as early as possible. This will allow the manager/supervisor to be flexible within the needs of the service and offer any support/referrals in a timely manner. Staff members should familiarise themselves with resources available from the People, Health and Wellbeing Service and the Cardiff and Vale Recovery College

3   Responsibilities of the manager/supervisor

Managers/supervisors are required to ensure a receptive, supportive approach is displayed to mental health conditions at all times. Managerial professionalism towards mental health will prevent any 'off the cuff remarks' being misinterpreted by staff members. Managers/supervisors should be aware that some staff may avoid discussing their own mental health conditions as they feel it does not impact on their work; these staff will avoid disclosure if they feel the culture of the workplace is unsupportive to mental health conditions. The Managing Attendance at Work Policy highlights the need for managers/supervisors to create a compassionate, supportive and caring environment to help facilitate a conducive mental health workplace.

Managers/supervisors should be aware of the Equality Act (2010). Under this Act the employer is required to make reasonable adjustments for those staff members living with a mental health disability. An individual assessment of the mental health condition will determine if it is a disability. Managers/supervisors need to be aware of the disability for the Equality Act (2010) to apply. Reasonable adjustments can be decided in conjunction with the staff member. Occupational health can give advice on workplace adjustments; however, managers/supervisors should provide clear and detailed information on the tasks expected of the staff member.

Managers/supervisors need to provide an individualised approach to staff with mental health conditions. Blanket approaches to tasks expected of all individuals with a specific mental health condition will not reflect the individual experience of mental health conditions. It may be beneficial for employees with a mental health condition to know that regular one to one discussions with their manager/supervisor can be arranged. These discussions are aimed at encouraging honest discussions regarding an individual's mental health and the expectations placed upon them.

Managers/supervisors need to maintain their own mental health; the acts of managing and supervising can be stressful and could trigger mental health conditions. When a manager/supervisor has a deterioration in their mental health they should refer to the employee section of this procedure

4 How to support your staff member(s)

Approaching the topic of mental health conditions can be difficult for managers/supervisors. The manager/supervisor may be limited by the information available to them before starting the discussion. Managers/supervisors who are aware of a confirmed mental health condition should familiarise themselves with the condition via the NHS or Mind. Managers/supervisors should familiarise themselves with localised agreements for trained mental health advocates. As with all sensitive discussions ensure the environment is private, comfortable and steps made to avoid unnecessary interruptions. Small gestures such as making the staff member a hot drink can be a useful tool for psychological purposes. The tone, language and nonverbal cues used in opening the stress discussion should be supportive to the staff member. This guideline contains example conversation guides to discussing an employee's mental health. The Managing Attendance at Work Policy suggests managers should be able to advise staff members that mental health support is available to staff both internally and externally.

REACT Mental Health Training Course

REACTMH can be used to have a difficult conversation with a colleague who may not appreciate they are struggling or know they are but might not want to or be able seek help. This approach is especially useful for colleagues who are dealing with repeated exposure to potentially traumatic events (PTEs). This course will provide a useful set of skills including:

- how to have a guided conversation (chat) with a colleague
- be better placed to identify whether there is an urgent need for support and whether there is a risk to a colleague or others continuing without any support
- factors to discuss during the conversation, having a measure of the impact and effect on a colleague
- what to look out for in self and colleagues during these extremely testing times.

Please contact the Education, Culture and Organisational Development Team to book onto a REACTMH course.

5   Depression & Anxiety Self-Assessment Questionnaire

Staff members may be confused and be unable to label their thoughts and feelings. This short questionnaire on the NHS website (NHS Self-Assessment) can help staff members to:

- Better understand how they have been feeling over the last 2 weeks
- Point them in the right direction for helpful advice and information

If someone is struggling, this questionnaire is not intended to replace a consultation with a GP.

6   Initial discussions regarding mental health conditions – Unknown mental health conditions

Should a manager/supervisor need to initiate a discussion regarding an employee's mental health then they can commence a general wellbeing discussion. Avoid opening the discussion with concern (e.g. "I'm worried/concerned…") Potential opening remarks could be:-

"How are you doing [Name]"

"I'm sorry we've not been able to catch-up for a while, how is your work going ….. and how is your home life"

"I think you're doing a great job at the moment, how's it going for you"

"What's going on for you right now"

Managers/supervisors can direct the conversion to emotions/feelings by supplementing the question with "and how do you feel". Depending on the

response the manager/supervisor can further probe specifics of the answer with open ended questions e.g.

> Staff member "I'm just worried about things"
> Manager "ok, what are the things you're worried about"

Should a staff member not provide any personal insight for the manager then the manager could personalise the discussion to their (manager) feelings e.g.

> "Ok, well I've been feeling a bit down about the constant change we're going through"
> "Oh, I've got some worries about a friend/colleague at the moment, I need them to know I'm here if they've got any concerns, how do you think I could let them know I'm there for them?" (this route of discussion allows the manager to show awareness of mental health conditions and opens the door for a 'depersonalised' conversation)

When finishing the discussion, the manager/supervisor should offer a final opportunity for the staff member to voice any concerns and ask if they are happy to meet again in 2 - 4 weeks.

7   Initial discussions regarding mental health conditions – Known mental health condition

When a manager/supervisor is aware of a mental health condition they should still open the discussion with a generalised, open ended question.

> "How are you doing [Name]"
> "I'm sorry we've not been able to catch-up for a while, how is your work going ….. and how is your home life"
> "I think you're doing a great job at the moment, how's it going for you"
> "What's going on for you right now"

Depending on the response the manager/supervisor can move the discussion to more specific questions about mental wellbeing e.g.

> "I know last time we had a catch-up you mentioned your [insert mental health condition], I just wanted you to know we're fully supportive,
> > "is there anything you want us to know"
> > "how are you coping"
> > "is there anything you need"
> > "is there anything else we can do"

You may find that the staff member does not open up at the first discussion, be patient and remain open for future discussions. Sometimes just knowing that there is someone that cares can make a big difference.

Appendix 1. Signs of common Mental Health Conditions

Depression:
Signs that someone may be depressed
Depression has lots of possible symptoms. You may notice that someone:

- Has lost interest in doing things they normally enjoy
- Seems to be feeling down or hopeless
- Has slower speech and movements or is more fidgety and restless than usual
- Feels tired or does not have much energy
- Is overeating or has lost their appetite
- Is sleeping more than usual or is not able to sleep
- Has trouble concentrating on everyday things, such as watching TV or reading the paper

Tips to help someone who may be depressed

- Let them know you care and are there to listen.
- Accept them as they are, without judging them.
- Gently encourage them to help themselves – for example, by staying physically active, eating a balanced diet and doing things they enjoy.
- Get information about the services available to them, such as psychological therapy services or depression support groups in their area.
- Stay in touch with them by messaging, texting, phoning or meeting for coffee. People who are depressed can become isolated and may find it difficult to leave their home.
- Try to be patient.
- Take care of yourself.

Generalised anxiety disorder in adults (GAD)
Anxiety is a feeling of unease, such as worry or fear, that can be mild or severe. Everyone has feelings of anxiety at some point in their life. For example, you may feel worried and anxious about sitting an exam, or having a medical test or job interview. During times like these, feeling anxious can be perfectly normal but some people find it hard to control their worries. Their feelings of anxiety are more constant and can often affect their daily lives. GAD is a long-term condition that causes you to feel anxious about a wide range of situations and issues, rather than 1 specific event. People with GAD feel anxious most days and often struggle to remember the last time they felt relaxed.

Symptoms of generalised anxiety disorder (GAD)

GAD can cause both psychological (mental) and physical symptoms. These vary from person to person and can include (but not exclusive to):

- Feeling restless or worried
- Having trouble concentrating or sleeping
- Dizziness or heart palpitations
- Feeling tense, nervous or unable to relax

- Having a sense of dread, or fearing the worst
- Feeling like other people can see you're anxious and are looking at you
- Feeling like you can't stop worrying, or that bad things will happen if you stop worrying
- Wanting lots of reassurance from other people or worrying that people are angry or upset with you
- Worrying that you're losing touch with reality
- Low mood and depression
- Depersonalisation – a type of dissociation where you feel disconnected from your mind or body, or like you are a character that you are watching in a film
- Derealisation – another type of dissociation where you feel disconnected from the world around you, or like the world isn't real

Tips to help someone who may have anxiety

- Ask them what you can do to help
- Remain non-judgemental, open and accepting
- Check in regularly with them, especially during busy or stressful times
- Try to put things in place that will alleviate unnecessary worry
- Keep communication open on changes that may affect them to reduce the chance of worry

Panic attacks

During a panic attack you get a rush of intense mental and physical symptoms. It can come on very quickly and for no apparent reason. A panic attack can be very frightening and distressing.

Symptoms can include:

- A racing heartbeat
- Feeling faint
- Sweating
- Nausea
- Chest pain

- Shortness of breath
- Trembling
- Hot flushes
- Chills
- Shaky limbs
- A choking sensation
- Dizziness
- Numbness or pins and needles
- Dry mouth
- A need to go to the toilet
- Ringing in your ears
- A feeling of dread or a fear of dying
- A churning stomach
- A tingling in your fingers
- Feeling like you're not connected to your body

Dealing with panic attacks:
- Try to stay calm
- Gently let them know that you think they might be having a panic attack and that you are there for them
- Encourage them to breathe slowly and deeply – it can help to do something structured or repetitive they can focus on, such as counting out loud, or asking them to watch while you gently raise your arm up and down
- Encourage them to stamp their feet on the spot
- Encourage them to sit somewhere quietly where they can focus on their breath until they feel better.

Most panic attacks last between 5 and 20 minutes. Some have been reported to last up to an hour. The number of attacks you have will depend on how severe your condition is. Some people have attacks once or twice a month, while others have them several times a week.

Although panic attacks are frightening, they're not dangerous. An attack will not cause you any physical harm, and it's unlikely you'll be admitted to hospital if you have one.

As with all mental health conditions, as a manager you are not expected to be an expert and should always recommend that they speak to their GP for advice if you are concerned about their wellbeing.

Appendix 2. Example adjustments and interventions to support your staff member(s)

Intervention	Staff Member Responsibility	Manager Responsibility
Wellbeing champions	• Ask your manager or colleagues if there is a wellbeing champion in the department. Some departments have wellbeing boards providing wellbeing champion details. • If the staff member feels comfortable speaking to the wellbeing champion they may provide useful signposting.	• Implement wellbeing champions within the team / department • Ask for expressions of interest from staff to volunteer for position • Support the nominated staff member(s) to attend associated training • Supported to nominated staff member(s) to allocate time to sharing resources, checking in with staff and updating recent information
Trade Unions & Professional bodies	• Being a member of a trade union or professional body can provide numerous benefits. • Trade unions and professional bodies provide independent advice. • Many unions and professional bodies provide counselling, career and financial advice.	• An awareness of the benefits that trade union and professional body members can bring your staff. • Good working relationships with local trade union representatives. • Local representative can often provide seminars or drop-ins for staff.
Wellbeing check ins and check outs	Participate in wellbeing checks when on shift	• Introduce opportunity for staff to share their current concerns / pressures (e.g. alongside morning briefing, acknowledge your door is open between 08:30-09:30 if anyone wants to discuss

		• anything – remember to offer alternative arrangements for staff working different shift patterns) • Keep track of recurring issues as there could be a trend across the team • Reach out to the employee wellbeing for advice and guidance
Peer support system	• We would like staff members to be open about mental health conditions with supportive colleagues. However, some staff members may find alternative support systems beneficial. • Engage in peer support system with colleagues to share advice on coping mechanisms • Practically apply new coping mechanisms and monitor (e.g. via diary)	• Facilitate peer support sessions either informally or formally (e.g. buddy up in pairs, group discussion, notice board) • Encourage open dialogue in the team on coping mechanisms and helping each other out
Protect and promote wellbeing time	• Identify wellbeing needs and protect time for it (e.g. taking a lunch break; getting fresh air; having lunch with a colleague) • Setting personal and professional boundaries to protect yourself (e.g. communicating your	• Promoting protecting wellbeing needs as a positive act • Role modelling wellbeing behaviours to encourage staff to participate • Create open culture about variety of wellbeing needs, people respond differently to different needs (e.g. a walk v time reading v chatting)

	needs; clarifying you are taking your 10-minute break away from computer/ward)	
Work distribution and allocation	• Identify existing workload capacity and any pressure points • Consider realistic solutions that would help alleviate any pressures	• Work with staff member to identify key work issues that may deteriorate mental wellbeing • Work with the staff member to implement any realistic solutions to pressure points to share workload in sustainable manner
Working Environment	• Identify any key factors in the workplace impacting on mental health (e.g. facilities, working hours, shift patterns, team dynamics) • Consider realistic solutions that would help alleviate any pressures	• Work with staff member to identify key factors that could be contributing to mental health deterioration. • Discuss with the staff member potential reasonable adjustments to the factors deteriorating their mental wellbeing. The adjustments should be mutually agreed (e.g. flexibility in hours, allocating certain days to minimise stress, adjustment team processes). Depending on the extent of the reasonable adjustments further assessments maybe required e.g. flexible working request form.
Scheduled, regular breaks	• Identifying points during the day when there is a deterioration in mental wellbeing and recognising the need for a break	• Scheduling and protecting breaks for staff on fair system • Accommodating wherever possible staff preferred break times (e.g. rota

	• Communicating with manager and colleagues on needs	afternoon breaks to reduce fatigue)
Wellbeing dialogue normalised	• Communicate to manager and colleagues on wellbeing needs • Share coping mechanisms with colleagues to encourage open dialogue	• Encourage wellbeing conversations amongst team • Encourage proactive interventions and support systems within team (e.g. wellbeing champion training)
Health & Wellbeing behaviours	• Discuss with manager potential social triggers for a deterioration in your wellbeing	• Consider social activities that avoid potential trigger factors (such as alcohol, competitive activities) • Encourage the 5 ways to wellbeing
Protect and utilise annual leave	• Schedule annual leave throughout the year to reduce work overload • Request annual leave early to increase chances of approval	• Encourage staff to schedule and protect annual leave allocation • Role model good practice (e.g. delegate responsibilities when on annual leave to have break away from work duties)
Self-care	• Ensure those professionals co-managing your mental health conditions are aware of changes in your condition • Discuss changes to treatments with those professionals co-managing your conditions • Seek professional support when needed	• Facilitate appointments with professionals co-managing mental conditions. • Encourage discussions with wellbeing champions

Occupational Health referral	• Employees can self-refer themselves to Occupational Health for confidential advice • If employees require reasonable adjustments to their workplace, referrals must come from their line manager	• Managers can refer employees to Occupational Health for advice and guidance on reasonable adjustments to support them in the workplace • Managers can also consult with Occupational Health for confidential advice