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**Supporting mental health at work guidance**

**Contents**

|  |  |  |
| --- | --- | --- |
| **1** | | **Introduction** |
| **2** | | **Purpose and scope** |
| **3** |  | **Responsibilities** |
| **4** | | **Advice for employees in disclosing a mental health problem** |
| **5** | | **Guidance for managers in supporting the wellbeing of employees** |
| **6** | | **Workplace triggers for mental health** |
| **7** | | **An overview of mental health problems** |
| **8** | | **Spotting the signs when an employee is not coping** |
| **9** | | **Guidance for managers in supporting employees with mental health problems** |
| **10** | | **Wellness recovery action plan (WRAP)** |
| **11** | | **Treatments – things to consider at work** |
| **12** | | **Formal procedures** |
| **13** | | **Guidance for managers in supporting the rest of the team** |
| **14** | | **Dealing with a change of line manager** |
| **Appendices** | | **Appendix 1 – Sources of support and information**  **Appendix 2 - Different forms of mental health problem**  **Appendix 3 - Action to be taken by managers concerned about employees**  **Appendix 4 – Department for Health advice for employers on workplace adjustments for mental health conditions**  **Appendix 5 – WRAP template**  **Appendix 6 – Legal considerations**  **Appendix 7 – Guidance for managers in talking to employees about their mental health** |

1. **Introduction**

The health and wellbeing of employees and students is a high priority for UWE. The University is committed to creating and promoting a positive working environment which employees want to work in and where they can excel. The University wants employees to feel confident they can be open about mental health issues and that those who disclose mental health problems will be supported.

One in four people will experience a mental health problem in any given year. Yet, unfortunately, there is still a stigma attached to mental health, with many people feeling scared and confused about confronting the issue. Mental health is the mental and emotional state in which people feel able to cope with the normal stresses of everyday life. Mental health problems include stress, anxiety, depression, bipolar disorder and schizophrenia. Mental health problems may emerge suddenly as a result of a specific event, or gradually over a period of time when the situation may worsen or improve.

The University’s Healthy University Strategy aims to raise the profile of and embed health and wellbeing within the culture, structures and processes of the daily life of the University. The strategy highlights a co-ordinated focus on employee and student mental health. All members of the University, particularly line managers play a role in helping create a mentally healthy workplace.

1. **Purpose and scope**

The purpose of this guidance document is to raise awareness of mental health issues and provide guidance for both employees and managers, about creating a mentally healthy workplace.

The document provides advice for staff on disclosing a mental health problem and reinforces the support that will be given to them. The document also provides guidance for managers in supporting those employees who disclose mental health problems or become unwell. Line managers are the key people in the University to spot the early warning signs when an employee is not coping at work. This guidance will help managers support the wellbeing of employees, identify the signs when an employee is not coping and support employees with mental health problems.

This guidance has been written in line with information on supporting mental health at work produced by various organisations including; Mind, SHiFT, ACAS and the Chartered Institute for Personnel and Development (CIPD).

Where appropriate, this guidance should be read in conjunction with the Sickness Absence Guidance available on the Human Resources webpage.

The guidance applies to all employees and the University. Mental health of students is dealt with by the Student Services department.

**3 Responsibilities**

**3.1 Employees** have a responsibility to:

* Raise issues of concern for themselves and other employees and seek help from either their line manager, Human Resources or the employee assistance programme (see appendix 1 for details).
* Disclose if they are experiencing problems at work in relation to mental health
* Work with their line manager and/or Human Resources to find solutions to work-related problems.
* Maintain an acceptable standard of behaviour at all times

**3.2 Managers** have a responsibility to:

* Create a mentally healthy workplace
* Support the wellbeing of employees (see section 4)
* Be aware of workplace triggers for mental health (see section 5)
* Spot the signs when someone is not coping (see section 7)
* Assist and support employees who have disclosed mental health problems
* Maintain an acceptable standard of behaviour at all times

**3.3 Human Resources** have a responsibility to:

* Provide advice and support to managers and employees in relation to mental health problems, referring to experts where necessary.
* Monitor and report on sickness absence levels which relate to mental health problems.
* Carry out awareness raising and training sessions.

**4 Advice for employees in disclosing a mental health problem**

The University encourages employees with mental health problems to disclose their situation to their line manager, in order that the line manager is aware of their needs and can support them. Employees should consider how and when to do it, how much information they want to give and what kind of information. If employees feel unable to disclose to their line manager they could contact the Human Resources department or one of the sources of support outlined in Appendix 1. Employees do not have to go into personal details and could just focus on their requirements for the job i.e. whether any reasonable adjustments are required.

The potential benefits of disclosure are:

* It could make it easier to go to work at times when symptoms are greater
* It enables employees to receive the support of their line manager and other colleagues, as disclosure allows.
* Keeping it secret may be too stressful
* Being open can encourage others in the same situation
* It gives a stronger basis for requesting adjustments to work or the work environment
* It gives the opportunity to receive specialist advice

Following disclosure managers should discuss with employees whether it is appropriate to inform the next level of line management, in order to ensure continuity of support during their absence or annual leave.

1. **Guidance for managers on supporting the wellbeing of employees**

By focusing on wellbeing rather than mental ill-health, managers are more likely to overcome any stigma attached to mental health. Managers can help support employee wellbeing by promoting the following practices:

**Managers need to ensure they are approachable and have time for their staff.** Managers who regularly ask staff how they are and take an interest in their team’s lives outside work are more likely to build trust and therefore effectively prevent and manage stress at work. However, managers should be aware that some employee’s will be less comfortable sharing details of their personal lives than others.

**Help new employees understand the University** and the faculty/service faster and support them in their role. Use a buddy or mentor system which enables colleagues to support other colleagues outside the line-management structure. Refer to Induction information on the Human Resources webpage.

Ensure that employees have the **right level of skills for the job** and are provided with the resources and training required.

**Engage employees in their work**. Employees who know where the University and their faculty/service is heading and are able to feed back their views will be better motivated and more able to help meet faculty/service objectives.

**Facilitate effective communication and information transfer**. All employees should have regular **one to one meetings** with their line manager to enable a regular discussion about work and personal development issues. Regular meetings also provide an opportunity for managers to determine whether employees are coping at work and for employees to disclose mental health problems.

Monthly **team meetings**, which provide the opportunity for upwards and downwards communication and team building should also be held. **Performance and Development Reviews (PDRs)** should be held with all employees and include a discussion of learning and development opportunities.

Refer to the Maximising Performance Human Resources webpage for guidance on carrying out one to one meetings, team meetings and PDRs.

**Develop a culture where open and honest communication is encouraged and support and mutual respect are the norm.** Encouraging an ethos where employees know that it is okay to talk about mental health and that it is safe to disclose their own mental health problems help reduce the stigma that surrounds it. It will also allow employees to tell managers if they need any adaptations to working practice that will support them in doing their job.

**Promote positive working relationships**. Bullying, harassment and negativity are detrimental to a successful working environment. Employees should not be made to feel isolated due to the nature of the work they do or as a result of more personal factors such as cultural or religious beliefs, race, sexuality, disability, age and gender. It is important that managers promote a positive working environment; challenging inappropriate behaviour quickly and sensitively. A work culture should be developed where everyone is treated with respect and dignity and issues such as bullying and harassment are not tolerated

**Ensure employees have a good work/life balance**. In the short term, long hours might seem manageable and boost productivity. However, a lack of sleep and relaxation time can quickly take its toll on employees and lead to irritability, lower productivity and poor performance.Flexible working hours could help employees to balance the demands of home life with work. Managers need to ensure that work is planned to ensure that employees are not required to work additional hours at short notice.

**Encourage exercise and social events, including those available at the University.** Staff can take part in activities at the Centre for Sport or Centre for Performing Arts during their lunch break or after work. Physical activities boost employee health, mental wellbeing and team work.

Managers should check the **work environment** and eliminate potential stressors. Noise, temperature and light levels can all have a big impact on wellbeing. Space dividers, quiet spaces or music may improve the environment or could be part of the problem, leading people to feel isolated and disconnected.

**Be aware of risks outside the workplace.** Be aware of what is happening in people’s personal lives as stress outside of work, for example due to illness, bereavement or financial worries might be contributing to them struggling to cope in the workplace.

Regular monitoring of workloads to ensure that employees have **manageable workloads.**

**6 Workplace triggers for mental health**

Everyone has mental health and like physical health, it fluctuates along a spectrum from good to poor. Work can have a huge impact on mental health by promoting well-being or triggering problems. Managers need to be alert to the potential workplace triggers for distress, such as:

* long hours and no breaks
* unrealistic expectations or deadlines
* high-pressure environments
* poor working environment
* unmanageable workloads or 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

**7 An overview of mental health problems**

Mental health problems range across a spectrum from mild to severe. Appendix 2 outlines the different forms of mental health problem and the possible impact on the workplace. The extent to which mental health problems cause particular distress depends on the following:

* The level and type of mental health problems
* Previous history of mental ill health
* The extent of the support and social network (friends, partner, family, work colleagues)

Mental health problems may be a constant phenomenon in a person’s life. However, they are sometimes experienced as episodic with periods when the person functions very well, but intermittently has recurring periods of illness. A mental health problem is sometimes a one-off event from which the person, with appropriate support, fully recovers.

**8 Spotting the signs when an employee is not coping**

Managers and colleagues may observe a colleague not coping at work. Spotting the signs when an employee is not coping at an early stages means that managers can intervene before the problem escalates into a sickness absence or crisis. A key part of spotting the signs is managers and colleagues observing what they see as they walk around the workplace or in one to ones or team meetings.

Some of the key things to look out for are changes in the employee’s usual behaviour e.g. poor performance, tiredness or increased sickness absence. A normally punctual employee may start arriving late or may begin arriving much earlier and working later.

Managers and colleagues may notice an increased use of alcohol, drugs or smoking. Others signs might be tearfulness, headaches, loss of humour and changes in emotional mood. Managers who know their staff will be better placed to recognise any changes in usual behaviour.

Managers who have spotted the signs of a member of staff not coping, or when another employee has raised concern about a member of staff, should arrange an informal meeting to discuss their concerns. Refer to the Level one - emerging or mild concern in appendix 3 for guidance on carrying out the meeting.

**9 Guidance for managers in supporting employees with mental health problems**

At any one time, one is six adults in Great Britain will be experiencing a mental health problem. Managers are very likely to have an employee affected in some way at some time. However, even during periods of mental distress, employees can continue to make a valuable contribution with the right support.

Some people with mental health problems have a clear grasp of their personal challenges and needs. Others will be aware but may be afraid to tell anyone or ask for help. However, a proportion of people have very little insight into their problems, which can make their management at work more complex.

While mental ill health is a sensitive and personal issue, like any health problem, most people prefer honest and open enquiries over reluctance to address the issue. Shying away from the subject can perpetuate fear of stigma and increase feelings of anxiety. Often employees will not feel confident in speaking up, so a manager making the first move to open up a dialogue can be key. It **is often the everyday things that make a difference, like asking ‘How are you?’** They might want to talk about it, they might not. But just letting them know they don’t have to avoid the issue is an important first step.

Regular catch-ups/one to one meetings are an opportunity to start the conversation, which should always be in a private, confidential setting where employees feels equal and at ease. Questions should be simple, open and non-judgemental to give employees ample opportunity to explain in their own words.

The level of support and action required by managers will very much depend on the circumstances and whether there is an emerging or mild, serious or very serious level of concern. Appendix 3 outlines the action to be taken by managers concerned about an employee.

**10 Wellness Recovery Action Plan (WRAP)**

A WRAP contains practical, mutually agreed steps that will be taken to support employees who experience a mental health problem. WRAPs can help managers balance supporting employees’ mental health needs and ensuring they undertake key functions of their jobs, in the context of the legal duty to make reasonable adjustments (appendix 4).

WRAPs are usually drafted by the employee, sometimes with the support of a health professional (occupational health, GP or specialist) and discussed and agreed with managers. Working with employees to develop this will help managers and employees identify together what the early signs of mental distress are, who may need to be contacted and how the employee would like to be supported.

A template WRAP is contained in appendix 5 and should cover:

• the signs and symptoms of their mental health problem(s)

• any triggers for distress

• what support can help – including reasonable adjustments

• who should be contacted in the event of a mental health crisis

For those employees who have already disclosed a mental health problem, it is better to prepare a WRAP when they are well. This enables managers to refer back to the WRAP when they have spotted early warning signs/triggers and discussions should be easier if the WRAP has already been agreed. For employees who have not previously disclosed, the WRAP should be prepared as soon as possible.

The WRAP should be a living document and reviewed regularly between managers and employees, including the review of reasonable adjustments.

**11 Treatments – things to consider at work**

There are many different treatments for people suffering with mental health problems. The type of treatment may affect people and impact on work differently. For some their behaviours may alter and/or they may need time off to attend medical appointments or treatment sessions.

The National Institute for Clinical Evidence (NICE) usually recommend drug-based or talking therapies. For those with mild to moderate problems, talking therapies are usually the initial treatment. For people with more severe forms of mental health problem drug therapies may be unavoidable and essential to ensure a good quality of life. If talking therapies are not sufficiently effective, drug therapies are then usually recommended, or a combination of drug and talking therapies.

GPs are usually the initial point of contact and provide access to more specialist treatments. People are often guided through a “stepped care” model of provision.

**12 Formal procedures**

There will inevitably be occasions when interventions at levels one to three are not sufficient to maintain an employee’s health and wellbeing at work, and their capacity to manage their duties is severely impaired. At these times, it may be necessary to adopt a more robust strategy and consider suitability of the use of more formal procedures. Even if mental health is a primarily at the root of the concerns, a formal procedure may be considered if business needs are significantly compromised.

**13 Guidance for managers in supporting the rest of the team**

Managers should be aware of the impact of one employee’s mental health problem could potentially have on the rest of the team. The team may react negatively to the employee’s behaviour while unwell, to any reasonable adjustments that are made or to an increase in their own workload if the employee is not well enough to work. It is advisable to manage this by:

* Being honest and open with the team, so long as it does not breach confidentiality.
* Creating an environment where employees can air their concerns
* Treating all employees fairly

**14 Dealing with a change of line manager**

Employees who move into a new role with a new line manager need to consider how information on their situation is passed on to the new line manager in order that support continues. Similarly, if the line manger changes due to resignation or promotion. The best method of informing the new line manager is a 3-way meeting between the employee, existing line manager and new line manager. However, it is the employee’s decision on whether they are happy for disclosure and how this occurs.

**Appendix 1**

**Sources of support and information**

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| **If you consider an employee has serious intention to harm themselves or others:** |
| Contact emergency services by dialling 999. If on site dial Security Internal: 9999 External: 0117 328 9999  If current deliberate self-harm or suicidal/homicidal feelings have recently been expressed advise employee to contact their GP, NHS Direct or Bristol City Council Mental Health Care Service:  **NHS Direct** can put people in touch with a GP and also provide further information or advice:  Tel: 0845 46 47 or [www.nhsdirect.nhs.uk](http://www.nhsdirect.nhs.uk)  **Bristol City Council Mental Health Care Services** can also be contacted for help and advice tel: 0117 922 2700.  In an emergency or crisis tel: 0117 942 9224 or outside office hours tel: 01454 61 5165. |

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| **Sources of support, advice and Information for employees:** |
| **Employee Assistance Programme – Right Management**  Tel: 0800 1116 387  <http://wellness.rightmanagement.co.uk/login> Login using unique user name - UWEuser  **Samaritans -** [**www.samaritans.org**](http://www.samaritans.org)  Tel: 08457 90 90 90  Email: [jo@samaritans.org](mailto:jo@samaritans.org)  The Samaritans provide a 24-hour source of support on the[**telephone**](http://www.samaritans.org/talk_to_someone/phone_calls.aspx), by [**email**](http://www.samaritans.org/talk_to_someone/email.aspx), by [**letter**](http://www.samaritans.org/talk_to_someone/write_a_letter_to.aspx) or [**face to face**](http://www.samaritans.org/talk_to_someone/visit_your_local_branch.aspx) for people who are experiencing feelings of distress or despair, including those which may lead to suicide.  **SANE –** [**www.sane.org.uk**](http://www.sane.org.uk)  Tel: 0845 767 8000  SANE runs a national, out-of-hours helpline offering specialist emotional support and information to anyone affected by mental illness, including family, friends and carers. Open every day of the year from 6pm to 11pm.  **MindLine telephone helpline**  Freephone: 0808 808 0330 Out of hours confidential listening service runs Wednesday to Sunday, 8:00 pm to midnight.  **National Mind InfoLine – mind.org.uk**  Tel: 08457 660 163 Offers information on topics ranging from types of distress, where to get help, drug treatments, alternative therapies, who's who in mental health and where to find advocacy and other services. Monday to Friday 9.15am - 4.15pm.  **NHS Direct -** [**www.nhsdirect.nhs.uk**](http://www.nhsdirect.nhs.uk)  Tel: 0845 4647  24 hour information and advice. The website has a [Mental health section](https://www.nhsdirect.nhs.uk/CheckSymptoms/SATs/mentalhealth.aspx) providing advice about what to do if you or someone close to you has a mental health problem. |

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| **Sources of advice and information for managers:** |
| **Employee Assistance Programme Manager Support Line – Right Management**  Tel: 0800 1116 385  As part of the [Employee Assistance Programme, Right Management](http://wellness.rightmanagement.co.uk/employee-assistance-programmes) provides a Manager Support line for managers to seek advice and support on dealing with difficult people issues at work. Manager Support can enhance confidence in handling human emotions in the workplace, crisis situations etc.  **Health for Work Adviceline**  Tel: 0800 077 8844  Free advice service by Occupational Health Professionals  **Mind–** [**www.mind.org.uk**](http://www.mind.org.uk)  Mind provides advice and support to empower anyone experiencing a mental health problem. Mind campaigns to improve services, raise awareness and promote understanding.  Guide to managing supporting mental health at work: disclosure tools for managers – produced by Mind and the CIPD: <http://www.mind.org.uk/assets/0001/6314/Managing_and_supporting_MH_at_work.pdf>  **Mindful Employer - www.mindfulemployer.net**  Developed, led and supported by employers, the MINDFUL EMPLOYER® initiative is aimed at increasing awareness of mental health at work and providing support for businesses in recruiting and retaining employees.  **Centre for Mental Health –** [**www.centreformentalhealth.org.uk/employment**](http://www.centreformentalhealth.org.uk/employment)  The Centre for Mental Health aims to help to create a society in which people with mental health problems enjoy equal chances in life to those without.  **Health and Safety Executive –** [**www.hse.gov.uk/stress**](http://www.hse.gov.uk/stress)  **SHiFT -** [**http://shift.org.uk/employers/lmr/**](http://shift.org.uk/employers/lmr/)  Although SHiFT closed in March 2011 web resources are still available. The Line Managers' Web Resource is a practical guide to managing and supporting people with mental health problems in the workplace  **Access to Work - www.direct.gov.uk**  A government run programme delivered by Jobcentre Plus to help overcome barriers that disabled people come across in getting into or retaining employment. A mental health support service is also available for employees. |

**Appendix 2**

**Different forms of mental health problem**

The majority of people who experience a mental health problem suffer from a common mental health problem. A very small number of people suffer serious disorders in comparison.

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| Mental health problem: | Impact on workplace: |
| anxiety, depression, mild obsessive compulsive disorder | with careful planning, these problems can often be managed at work. |
| schizophrenia, bi-polar (formerly known as manic-depression) | these problems can be chronic but well-managed through drug therapies. Employees may need periods away from work (when symptoms become more acute) but function reasonably well in-between |
| personality disorders a -complex diagnosis where common treatments are limited in effectiveness | symptoms of these disorders can lead to considerable problems in their management at work. |

**Other possible related conditions**

Stress – in itself is not a medical condition, but unmanageable stress can have physical, psychological and behavioural symptoms, which if not addressed can lead to mental health problems.

Addictions difficulties (drugs, alcohol, gambling, eating disorders) - are often associated with mental health problems. Addictions can be complex conditions and their management at work may often require considerable medical support

**Appendix 3**

**Action to be taken by managers concerned about employees**

Managers who have spotted the signs of employee not coping should take the following actions (level one, two or three) depending upon their level of concern. It is not necessary to commence at level one if the concern is vey serious.

**Level one - emerging or mild concern**

***If employee already disclosed a mental health problem:***

* Arrange to meet with employee to discuss concern; providing examples of changes in their behaviour.
* Refer to Wellness Recovery Action Plan (WRAP) if already developed.
* Check whether employee visited their GP and support/advice given.
* Discuss any existing reasonable adjustments and whether further adjustments required.
* Discuss if need more regular one to one meetings required
* If WRAP not already developed, consider developing if appropriate. See section 10 and appendix 5.

***If not already disclosed a mental health problem:***

* Raise concern with the employee informally (I have noticed ........ and I wonder if we could meet to discuss etc). If the situation is not causing urgent concern, it may be better to wait to raise the matter in a regular catch ups/one to one meeting. Refer to appendix 7 for guidance.
* Ensure that examples of behaviour are given.
* Advise employee of support available through the Right Management employee assistance programme and refer to further sources of support available (appendix 1).
* Be clear about who else, if anyone, needs to be informed. Consider limits to confidentiality.
* Consider developing A WRAP, if appropriate. See section 10 and appendix 5.

Level two – serious concern

* Before taking any action contact Human Resources and discuss the employee’s health and behavioural observed.
* Invite employee to a meeting – consider whether invite should be verbally or in writing.
* Be clear about the purpose of the meeting (i.e. continued concern about wellbeing and conduct). Be clear about who will be present at the meeting. Hold meeting according to format in appendix 7.
* Ascertain whether there is any formal medical diagnosis - provided the employee is happy to give this information.
* Advise employee of support via Right Management employee assistance programme and further sources of support (appendix 1).
* Determine whether employee visited GP and advice/support given
* Recommend referral to occupational health. If the employee is unwilling to attend, this should be noted.
* Consider whether reasonable adjustments are appropriate (see appendix 4)
* Clarify next steps in writing– including expectations of behaviour
* Continue to monitor and put in place a further review meeting to review needs.
* Develop a WRAP (see section 10 and appendix 5).

Level three – very serious concern. Employee very unwell or in clear danger

* If consider employee has serious intention to harm themselves or others – contact emergency services by dialling 999. If on site dial Security Internal : 9999 External : 0117 328 9999
* If current deliberate self-harm or suicidal/homicidal feelings have recently been expressed, advise employee to contact their GP, NHS Direct or Bristol City Council Mental Health Care Service (see appendix 1)
* Managers should support employee in obtaining the specialist support they need and should signpost to an appropriate support organisation. Managers are not responsible for resolving the employee’s issues or providing 24 hour support.
* Consult with Human Resources for further advice. Human Resources will consider duty of care obligations (to the individual and other employees) and whether life might be at risk.
* Human Resources to contact Right Management Severe and Enduring Mental Illness Service Clinical Director (Kevin Friery) for advice.
* If possible, employee to be invited to a meeting with line manager and Human Resources. However, by the time an incident has reached crisis (or demands an urgent response) a collaborative approach with the employee causing concern may not be possible. Hold meeting according to format in appendix 7.
* Recommend referral to occupational health. If the employee is unwilling to attend, this should be noted.
* At earliest point draw up a Wellness Recovery Action Plan (WRAP) (see section 10and appendix 5).
* At all stages of action try to seek the employee’s support and agreement on next steps. At the very least inform the employee what you are doing/have done.
* Clarify actions/next steps in writing and continue to monitor and review.

**Appendix 4**

**Department of Health**

**Advice for employers on workplace adjustments for mental health conditions**

At any one time, one in six adults1 will be experiencing a mental health condition. It is crucial that employers are playing a full part in supporting job retention and return to work for people with such conditions. In this document we use the term mental health condition to refer to early signs of stress as well as medically diagnosed conditions such as depression, schizophrenia or bipolar disorder.

In many cases simple and cost-effective workplace adjustments can make a big difference and can allow people with mental health conditions to keep in touch with the working world and live healthy and productive lives. The adjustment needed could be a change in practice or workload.

These guidance notes are intended to help employers think through the kinds of adjustments at work which they can make for people with mental health conditions. They include practical advice and links to other resources which might help them to support job retention and return to work. The key thing to remember is that everyone’s experience of mental ill health is different – so two people with a diagnosis of depression may have very different symptoms and need different adjustments. This may seem complex, but often the person will be the expert on their condition and know their own support needs.

**Why should an employer make adjustments?**

There are a number of reasons why employers should take steps to make adjustments for people with mental health conditions.

From a regulatory perspective, the Equality Act (2010) outlines an employer’s duty to make reasonable adjustments for people with disabilities in order to ensure that they have the same access to everything that involves gaining or keeping employment as a non-disabled person. According to the Act a person is defined as disabled if they have a mental or physical impairment that has a substantial long term (i.e. more than 12 months) effect on their normal day to day activities.

A person is also protected under the Act if they have been affected in this way in the past but have been well for some time.

From a business perspective, proactive management of employees’ mental and physical health can produce a range of benefits, including reduction of sickness absence, greater employee engagement and productivity, and reduced employee turnover, recruitment and costs. Making a few small adjustments to enable an employee to continue doing their job is far less expensive than the costs incurred through recruiting and training a new employee. Most adjustments cost nothing and according to The Equality and Human Rights Commission, the average cost is just

£752.

There are ‘best practice’ arguments too. Evidence has shown that good work is beneficial for mental health and well-being and that - for people with a mental health condition - work can aid recovery (Waddell and Burton, 2006). However, stigma and lack of understanding, as well as lack of knowledge about how to support people in the workplace, means that a large number of people with mental health conditions remain unemployed. Anyone who wishes to work should be able to do so through making work more accessible. Employers who attach priority to inclusiveness and their wider social responsibilities will wish to ensure that both their policies and practices maximise opportunities for people with mental health conditions to stay in, or return to, work.

**What is a workplace adjustment?**

A **workplace adjustment** is a change or adjustment unique to a person’s needs that will enable them to do their job.

A person is eligible for adjustments termed **reasonable** if they are legally defined as disabled (see definition in previous section). A *reasonable* adjustment is an adjustment to the workplace or work practices that is effective for the employee without being too disruptive, costly or impractical for the employer to provide.

Whilst there is a particular imperative for employers to consider reasonable adjustments for those legally defined as disabled, it is good practice to consider workplace adjustments for anyone who is affected by a mental health condition or stress at work.

**When to make adjustments**

The adjustments that an employer can make are dependent on the employee or candidate disclosing about their health condition in the first place or at least be willing to discuss their needs. Employers have a duty to ensure that workplace adjustments are applied at every stage of employment including recruitment, induction, training and development and return to work.

**Agreeing adjustments**

Putting the individual at the centre of the discussion is vital for agreeing workplace adjustments in order to understand and meet their specific needs. Using the advice and guidance of other professionals such as the individual’s GP or asking for support from occupational health, Human Resources or Access to Work can also be invaluable in finding solutions.

The following tools can help as a starting point for discussions or can be used to record agreements of adjustments:

* Fit for Work Statement (“Fit note”) – an individual’s GP advises on the effects of their health condition and what changes you as an employer could make to help the individual return to work as part of their recovery.
* Tailored adjustment agreement – this is a live document recording the reasonable adjustments that have been agreed. It can help minimise the need to re-negotiate adjustments in the future and provide a basis for discussion in further meetings.
* Staying Well Plans, e.g. WRAP, work, health and wellbeing promotion plans– these are completed by an individual to help them and you to understand how they are when they are well, the signs when they are becoming unwell, and the best way to help them if they do become ill.

**Access to Work** is a government-run programme delivered by Jobcentre Plus to help overcome barriers that disabled people come across in getting into or retaining employment. The programme provides advice, a possible assessment of a persons disability needs in the workplace, and if required, a financial grant towards the cost of any necessary support. They have recently introduced a new Mental Health Support Service. It is provided where the employee requires support or adaptations beyond those “reasonable adjustments” which an employer is legally obliged to provide

under the Equality Act 2010. Information about the programme and how to access support can be found on the Direct Gov website - www.direct.gov.uk

**Practical examples of workplace adjustments**

Being flexible and creative is important when considering solutions. Below are examples which could act as prompts for line managers and employees exploring these issues together.

***Working hours or patterns***

- Take a flexible approach to start/finish times and/or shift patterns

- Allow use of paid or unpaid leave for medical appointments

- Phase the return to work, e.g. offering temporary part-time hours

- Equal amount of break time, but in shorter, more frequent chunks

- Allow someone to arrange their annual leave so that is spaced regularly throughout the year

- Allow the possibility to work from home at times

- Temporary reallocation of some tasks

***Physical environment***

- Minimise noise – e.g. providing private office/room dividers/partitions, reducing pitch or volume of telephone ring tones

- Provide a quiet space for breaks away from the main workspace

- Offer a reserved parking space

- Allow for increased personal space

- Move workstation – to ensure for example that someone does not have their back to the door.

***Support with workload***

- Increase frequency of supervision

- Support someone to prioritise their work

- Allow the individual to focus on a specific piece of work

- Consider job sharing

***Support from others***

- Provide a job coach

- Provide a buddy or mentor

- Provide mediation if there are difficulties between colleagues

**Good practice for applying workplace adjustments**

* Have an open, honest and practical conversation with the person about how their mental health condition impacts their work and what adjustments can be made.
* Ask the individual what they need – they are often the best experts of managing their condition.
* Focus on what the person *can* do – not what they can’t.
* Tailor adjustments to the specific needs and abilities of the individual – be creative.
* Be flexible – as some mental health conditions can be episodic. It may be more helpful to agree adjustments that can be implemented as and when required and revoked when not.
* Agree the adjustments which are appropriate for the organisation and the individual.
* Be realistic about what you can offer. If you are unsure, consult your Human Resources department or the ACAS helpline may be able to offer you guidance.
* Regularly review the adjustments to ensure they are working and are still appropriate.
* With the permission of the individual communicate the adjustments to other team members to alleviate perceptions of favourable treatment.
* Consider the wider organisational context in which the adjustments are being made and whether or not they can be offered to all employees.
* Always take advice (as above) where you’re not sure what to do.

1 Office for National Statistics (2000), *Psychiatric morbidity among adults living in private households in Great Britain.*

2 Equality and Human Rights Commission, *Top Tips for Small Employers: A guide to employing disabled people http://www.equalityhumanrights.com/uploaded\_files/Employers/top\_tips\_for\_small\_employers\_emp5.pdf*

*www.****nhshealthatwork****.****co****.****uk****/****images****/****library****/****files****/.*

**Appendix 5**

**WRAP template**

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| **This is a document usually drafted by employees, sometimes with the support of a health professional (occupational health, GP or specialist) and discussed and agreed with managers to outline steps taken to support employee’s health at work. This information will be held confidentially and regularly reviewed. Employees only need to inform their manager about their health in relation to their role and the workplace and as far as they feel comfortable. The WRAP will help agree, together, how to practically support employees in their role and address any health needs.** |
| **In your own words, how does your mental health problem affect you? How might your**  **symptoms impact on your work?** |
| **Can you describe in your own words any triggers for mental ill health and early warning**  **signs that might be noticed?** |
| **What support or reasonable adjustments could the University put in place to minimise triggers or support you to manage your symptoms at work? Is there anything we should try to avoid doing?** |
| **If your health deteriorates, or we feel we have noticed early warning signs of distress, what**  **should we do? Who can we contact?**  *Please include contact names and numbers and account for scenarios when your health changes in a*  *minor way and you are still able to get into work.* |
| **What steps can you take? Is there anything we need to do to facilitate them?** |
| **Privacy Notice**  **1998 Data Protection Act, Consent to Process Personal Information**  The personal information collected on this form will be processed by the University in accordance with the terms and conditions of the 1998 Data Protection Act. We will hold your data securely and not make it available to any third party unless permitted or required to do so by law. The requested information will be used as follows:  1. The purpose for collecting the information is to support the employee’s health and work.  2. The information will be disclosed to appropriate managers and health professionals to enable them to support the employee.  3. The information will be kept for the duration of the employee’s employment or the earlier agreed date.  4. The information will be stored securely in a locked cupboard. The information will be shared either by confidential posting of paper copies, or when sending by email, the information will be password protected and the password conveyed in a separate email message. The information will be destroyed as confidential waste  The University Data Controller is William Marshall, Assistant Vice Chancellor, Finance ＆ Commercial Developments.    I agree to the University processing my personal data as described above.  Signed: Employee:  Signed: Manager:  Date: |

**Appendix 6**

**Legal considerations**

**Health and Safety at Work Act 1974**

Employers have a statutory duty to ensure the health and safety of all employees at work under the Health and Safety at Work Act 1974. Employers must take steps to ensure that employees are protected from reasonably foreseeable danger. In the context of managing mental health issues, the University is legally bound to ensure that the work environment is not unreasonably or unnecessarily stressful; neither should employees with evident health difficulties be knowingly exposed to such pressures. Universities have a general duty to take reasonable care, to take steps to prevent harm and avoid foreseeable physical injury or damage.

**The Equality Act 2010**

The Equality Act (2010) outlines an employer’s duty to make reasonable adjustments for people with disabilities. According to the Act a person is defined as disabled if they have a mental or physical impairment that has a substantial long term (i.e. likely to last more than 12 months) effect on their normal day to day activities. A workplace adjustment is a change or adjustment unique to a person’s needs that will enable them to do their job. Reasonable adjustments can be considered immediately; there is no requirement to wait 12 months. Further guidance and examples of reasonable adjustments, provided by the Department of Health is contained in appendix 4.

**Confidentiality**

An individual’s right to confidentiality (particularly with regard to medical information) is held in high regard under the law. This can lead to those who manage employees with complex mental health issues feeling unable to seek help and advice when required.

Before engaging with an employee managers should clarify that there are limitations to confidentiality. Managers should reassure employees that any breaches in confidentiality would only take place in very specific circumstances, (i.e. when there is concern that that individual or those around them may be at risk). Employees will be informed of who has been informed of their situation and why.

**Informed consent and disclosure**

Under the law it is important that disclosure of personal information occurs only with the explicit permission of the “data subject” (employee). There needs to be clear evidence that the employee has given permission on the basis of well-informed understanding and consideration of consequences. If disclosure of personal information is sought (usually for a medical practitioner or, on occasions, for the employer) it is usually best to request written (signed) consent.

**Data Protection Act**

Medical or health-related records are classed as sensitive personal information and therefore must be processed with the utmost confidentiality. The data must be held securely with restricted access.  Caution must therefore be exercised in the writing, storing and distribution of such data. Please be aware that the employee has the right to see all their personal information (including any written comments) held by the University. Sensitive personal information should be encrypted when being stored and sent electronically.

**Appendix 7**

**Guidance for managers in talking to employees about their mental health**

**Preparation:**

The content of meetings will vary depending on whether there is a mild, serious or very serious level of concern.

Be certain how you will open the discussion. Be clear about the purpose of the meeting and state the purpose as positively as possible.

Dialogue is best encouraged through presenting oneself as genuinely concerned, empathic and warm.

Articulate the concern verbally and clearly, with examples of behaviour/conduct witnessed. Be clear about expected standards of conduct. Be specific about what is and what is not acceptable.

Wait patiently for the employee to respond to the concerns raised and reflect back to the employee what you think you have heard them say.

**General tips:**

**Avoid clichés** like ‘Cheer up’, ‘I’m sure it’ll pass’ instead be open minded, non-judgemental and listening will help the conversation.

**Think about your body language:** Try to be relaxed and open - looking uncomfortable won’t go unnoticed and may perpetuate the taboo.

**Ask how you can help:** People will want support at different times in different ways, so ask how you can help.

Try not to ask too many questions: Offer many more reflections than questions.

**Be prepared to give them time:** Some people may not be able to tell you everything there and then. They may need time to get back to you when they feel ready.

**Holding the meeting:**

Ask open questions about what is happening, how they are feeling, what the impact of their condition is:

* *How long have they been feeling unwell? Is this an ongoing issue or something that an immediate action could put right?*
* *Are there any immediate support needs? Possibly suggest the employee seeks advice from their GP or NHS Direct?*
* *Are they receiving any support? Ensure they are aware of the employee assistance programme – refer to appendix 1*
* *Has work contributed to their distress? Are there any problems outside of work?*
* *Ask whether an occupational health appointment would be useful*
* *Is there any aspect of their medical care that it would be helpful for you to know about? (for example, side effects of medication that might impact on work)*
* *Do they have ideas about any adjustments to their work that may be helpful? Short or long term*
* *If they have an ongoing mental health problem – would it be useful to discuss their established coping strategies and how the organisation can help*
* *Establish communication of their situation to colleagues, if necessary.*

Decide what needs to happen next. Seek the opinions and suggestions of the employee.

Decide whether a review meeting is helpful and when.

Let employee know who will be informed about the outcome of your discussion.

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Managers should keep a note of the discussion at the meeting for future reference. Health information is classified as “sensitive personal data” under the Data Protection Act and should therefore be held in accord with the legal requirements. See appendix 6