Thriving at work: a whole system approach

From roots to branches of the mental health and well-being tree
Session One

Has your mental health and well-being strategy taken root and now bearing fruit? An overview of best practice in developing mental health and well-being policy, strategy and implementation. What’s new in 2019?
Talk Works

• **Our Belief** – that we can help people to understand themselves better and to live better

• **Our Approach** – to use psychological knowledge to work together to build resilient people and teams

• **Our Values** – to work with organisations that share our mindset: understanding and caring for people is at the heart of good organisations
At Talk Works we know that taking care of staff wellbeing is not just the “decent thing to do,” it is a genuine business case.

“Everyone is somewhere on the mental health spectrum, so this is a business productivity issue which should be dealt with alongside other health and safety considerations. Creating a positive environment for mental health demonstrably costs less than failing to do so.”

(Nigel Carrington, University of the Arts London)
Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.

(First principle set out in the preamble to the Constitution of the World Health Organization, 1946)
A national picture

• *Bringing together physical and mental health: A new frontier for integrated care* (Naylor, Das, Ross, Honeyman, Thompson & Gilburt, 2016)

• *Psychology at Work: Improving well-being and productivity in the workplace* (Weinberg & Doyle, 2017)

• *Thriving at Work* (Stevenson/Farmer, 2017)
Bringing together physical and mental health

Exemplify “joined-up thinking”

Accept that there will be challenges

Be prepared to get innovative!

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Psychology at work: Improving well-being and productivity in the workplace

Promote strengths

Recognise individual difference

"We need to develop evidence-based policy to support neurodiverse adults to succeed at work"

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Thriving at Work

Figure 2: Percentage of people leaving employment with no long-term mental health condition, a physical health condition and long-term mental health condition, per quarter. Please see Annex C for further information.

300,000 people leaving work each year

This increases to 4% looking at those with constant long term physical conditions

This chart shows the chance of an individual who is in work losing their job in the next quarter. It is significantly higher for those with a long term mental health condition than a physical health condition or no long-term mental health (LTMHC). Annex C provides more details

Absenteeism cost: £8bn

Presenteeism cost: £17bn to £26bn

Staff turnover: £8bn

Total cost: £33bn to £42bn
ACAS Framework for positive mental health at work

**Managers**
- Build rapport with staff
- Plan work with ‘people’ in mind
- Have confidence and knowledge in managing mental health
- Handle difficult conversations effectively
- Support work-life balance

**Individuals**
- Look after their own wellbeing
- Use positive coping strategies
- Identify personal stress triggers
- Engage with line managers
- Take notice and support colleagues

**Employers**
- Lead and embed wellbeing strategy
- Reduce stigma
- Tackle the causes of workplace stress
- Support and train managers
- Understand the impact personal issues can have on mental wellbeing


- strategic and coordinated approach to promoting employees' mental wellbeing
- assessing opportunities for promoting employees' mental wellbeing and managing risks
- flexible working
- the role of line managers

https://www.nice.org.uk/guidance/ph22

Details of specific, evidence-based, organisational-level, educational and wellbeing interventions, associated with improvements (or not) in mental health and wellbeing.

Details of specific, evidence-based, work-place interventions associated (or not) with improvements in mental wellbeing and work-related outcomes.

Consider whether this recommendation should be stood down and reference made to NICE Guideline NG13 instead.

Consider evidence on line managers’ skills to deal with mental health and support staff well-being.

Research. Evidence regarding the effectiveness of wellbeing interventions in particular groups of employees.
Aim

• What is your goal?

• To create a workplace environment that promotes the mental wellbeing of employees

• To promote mental wellbeing for all staff in the workplace

• To create a workplace environment that promotes and supports the mental wellbeing of all employees

• To ensure that the working environment promotes the mental health and wellbeing of employees, clients and visitors

• To provide a working environment that promotes and supports the mental health and wellbeing of all employees

• To support our employees by encouraging safe and healthy workplace settings, promoting good mental health and wellbeing at work, and applying non-discriminatory practice.
Strategy

• What are your objectives?

• To develop a supportive culture, address factors that may negatively affect mental wellbeing, and to develop management skills.

• We will assess and control, where possible, workplace factors that may have a negative effect on an employee’s mental health.

• To provide support and assistance for employees experiencing mental health difficulties.

• We will support employees to raise any issues in the workplace.

• We will seek to de-stigmatise mental health issues in the work-place and thereby create an open and non-discriminatory environment.

• To encourage the employment of people who have experienced mental health problems.

• We will seek to remove any barriers to employment for people who have, or have had, mental health problems.
Implementation

• What are your actions?

• We will provide regular information for all employees on mental health and wellbeing, and opportunities to participate in health promoting activities.

• We will create and promote a range of training opportunities for staff and managers.

• Provide opportunities for employees to look after their mental wellbeing, for example through physical activity, stress-buster activities and social events.

• Offer employees flexible working arrangements that promote mental wellbeing.

• Encourage staff to consult the occupational health department, their own GP or a counsellor.

• Treat all matters relating to individual employees and their mental health problems in the strictest confidence and share on a ‘need to know’ basis only with consent from the individual concerned.

• Provide adequate resources to enable managers to implement the organisation’s agreed workplace mental wellbeing policy.

• Complete an employee survey to identify mental health needs.

• Monitor working hours and overtime to ensure that staff are not over-working.

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https://www.nhsggc.org.uk/media/396631/nhsggc_health_safety_policy_mental_health_and_wellbeing.pdf
https://www.fullyfocussedolutions.co.uk/resources/FFsolutions_workplace_MH_wellbeing_policy_sample.pdf
https://www.barnsley.gov.uk/media/.../sy_mental_health_and_wellbeing_policy_v3.doc
Case Study #1

- Company in the North East of England
- 350 employees

<table>
<thead>
<tr>
<th>Company Culture</th>
<th>Wellbeing Champions</th>
<th>Creative activities</th>
<th>Wellbeing Month</th>
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<tbody>
<tr>
<td>• Everyone Matters</td>
<td>• Mental Health</td>
<td>• “Lose an elephant”</td>
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<tr>
<td>• Wellbeing is always important</td>
<td>• Physical Health</td>
<td>• Workshops</td>
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<td>• Pop-up events</td>
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<td>• Sharing life experiences</td>
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<td></td>
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<td>• Every year</td>
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Training Programs
Case Study #2

**Approach**
- Each person given the opportunity to self-assess and create their own “resilience kit”

**Example**
- Man caring for parent with dementia

**Vulnerability factors**
1. Tiredness in the morning
2. Time to attend appointments with parent
3. Lack of support

**Resources**
- Flexible hours in the morning
- Time to allow appointments
- Colleague support
- More contact with Manager / Occ Health
- Sessions with Counsellor

**Organisation**
- Identifying the use of creating communication pathways for colleagues to share life experience
Case Study #3

MARS

• 2011: high levels of mental health problems in work were noted
• Introduced – resilience workshops
• Outcome – “A year later, mental health related absence reduced, employees reported reduced anxiety, improved work performance and productivity”
Case Study #4

How well did you sleep?

The project

- To improve sleep
- To improve wellbeing and resilience
- To change company culture
- To gain a 1000 days more productivity
- To have fun...
The seed

mental health training for a 100+ staff in a company of 1000+ employees

a lot of people reported that they sleep poorly... shift work did not help.

The business case

• On average every worker loses 11 days productivity a year to poor sleep. That is £100,000 of lost revenue to company

• Poor Sleep results in more accidents at work
Phase 1

• Poster campaign
• Online Sleep Survey
• Outcome: <50% of staff sleep well
• Sleep Champions

Phase 2 – The Fun

• Sleep training events
• Pop-up clinics
• Prizes
• Finding out more
The next steps...

- **Occupational Health** and **Human Resources** will refer colleagues to **Talk Works** for specialist advice on sleep

- Further **training/pop-up events**

- Feedback from **Sleep Champions**
A reminder
1. Predict Demand

- 1 in 4 staff are stressed
- 1 in 6 staff have significant mental health problem

125 STRESS

500

83 MENTAL HEALTH PROBLEMS

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2. Create Business Case

• The **PAIN**
  ➢ On average, for every employee, the cost of poor mental health is £1,035 per annum (*MIND, 2011*)
  ➢ E.g. → 500 staff = £517,500

• The **GAIN**
  ➢ identifying problems early or preventing them could result in cost saving of 30% (*NICE*)
  ➢ E.g. → 500 staff = £155,250
• There is a need for joined up thinking
• There will be challenges
• You will need to get innovative
• Promote strengths
• Recognise individual differences

• It is about thriving not just surviving
Mental health and well-being tree

Leaves

Branches

Trunk

Roots

People

Implementation – actions

Strategy - objectives

Aim - goal
Conclusion: A farmer’s daughter’s final thoughts
Q&A
Session Two

A practical and interactive workshop in which you will be introduced to a selection of evidence-based psychologically informed strategies which can be used to foster resilience in self and colleagues in order to promote thriving in the workplace.
Resilient organisations

- Leaves
- Branches
- Trunk
- Roots

- People
- Implementation – actions
- Strategy - objectives
- Aim - goal
Resilient individuals

• Resilient action
• Resilient non-action
• Resilient thinking
Resilient non-action

- Stop
- Take a breath
- Observe – what am I thinking? What am I reacting to? What am I feeling in my body?
- Pull back – put in some perspective. See the bigger picture. Is this fact or opinion? How would someone else see this?
- Practise what works – what’s the best thing to do for me, for others, for this situation?
Resilient thinking

- What is the unhelpful thought?
- What am I feeling?
- What happened?
- What is my evidence for the unhelpful thought?
- What is my evidence against the unhelpful thought?
- What is an alternative perspective?
Resilient action

One minute praisings
(K. Blanchard)

• Praise the person as soon as you can.
• Tell them, in specific terms, what they did right.
• Let them know how good you feel about it.
• Encourage them to do more of the same.

"That’s great."
"Perfect."
"Wow! I don’t know how you do it."
"You are a brilliant artist."
"Good job."
"I don’t know what I’d do without you."
"I’m very proud of you."
"You’re so good at this."
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**Talk Works**

- **Our Belief** – that we can help people to understand themselves better and to live better
- **Our Approach** – to use psychological knowledge to work together to build resilient people and teams
- **Our Values** – to work with organisations that share our mindset: understanding and caring for people is at the heart of good organisations
Talk Works

• **Therapy services** – Talk Works can provide rapid access to on-to-one counselling and psychological talking therapy for employees who are struggling with difficulties and mental health concerns. It is not just work-related issues that we help with.

  Therapy can address a range of challenges including:

<table>
<thead>
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<th>OCD</th>
<th>Bereavement and grief</th>
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<td>Abuse</td>
<td>Relationship problems</td>
<td>Stress</td>
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<td>Suicide</td>
<td>PTSD</td>
<td>Trauma</td>
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<tr>
<td>Depression</td>
<td>Eating disorders</td>
<td>Addiction</td>
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<td>Anxiety</td>
<td>Low self-esteem</td>
<td>Work-related issues</td>
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• **Training**– Our Learning & Development team help to maximise the potential of the workforce via staff training and workshops, helping employees to identify and respond to mental ill health and establish a culture of wellbeing in an organisation.

**We offer a range of bespoke workshops and packages to increase engagement and productivity, including:**

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<th>Workplace Resilience</th>
<th>Mindfulness</th>
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<td>Stress Awareness</td>
<td>Well-being</td>
<td>Loss and Grief</td>
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<td>Improving Sleep</td>
<td>Suicide Awareness</td>
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<td>Sleep for Shift Workers</td>
<td>How to Have a Better Day</td>
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Talk Works

- **Consultancy** – Talk Works can work with organisations to support them to implement policies and strategies that promote positive well-being, mental health and engagement.

Based in the North East, we bring in-depth experience, working with local organisations across different sectors. Our local knowledge enables us to provide responsive, appropriate support to the organisations we work with.
“Partnering with Talk Works has completely changed our provision of mental health services with us moving from a one size fits all ‘counselling’ approach to tailored treatment based upon an individual’s particular case and severity level. Until meeting and working with the Talk Works team we did not know that this variety of provision existed.”
We’d love to hear from you...

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