Developing a workplace mental health strategy

A how-to guide for health services

Heads ûp

Better mental health in the workplace

beyondblue

Acknowledgements

Contents

Introduction

Working in a health service can be highly rewarding and satisfying. Health services are dynamic workplaces that rely on a diverse workforce and cutting-edge technology to make a difference in people's lives. However, the work can be demanding and the impact of this can pose significant risks to staff mental health and wellbeing.

In order to deliver quality care to the community, the health and wellbeing of staff is crucial. When staff aren't feeling their best, they can't provide the same high level of care.

Defining 'health services'

Health services are organisations that diagnose or treat injury and illness, and work to promote, maintain and restore health. These include hospitals, community health centres, and mental health, allied health or other health facilities.

Often, health services exist as a network of healthcare facilities, defined by their business group, geographical area or the community they serve. For the purposes of this document 'health service' refers mainly to hospitals and the network of services provided by hospitals. However, the principles in this guide can still be applied to a variety of healthcare and non-healthcare workplaces.

Under Australian work health and safety (WHS) legislation employers must take steps to protect workers against risks to their physical and mental health. Beyond meeting this obligation, organisations that focus on promoting and supporting the mental health and wellbeing of their staff see better patient care and improved productivity, as well as greater staff engagement, recruitment and retention.

Staff mental health strategies are important for all workplaces. However, the unique nature of the health services environment makes a workplace mental health strategy even more important.

Creating a mentally healthy workplace is a shared responsibility. All health services staff – from specialised health professionals through to accountants, volunteers and cleaning and food services staff – have a role to play.

The board, executive and other leaders must understand the need for action to support the mental health and wellbeing of their staff, and the wide-ranging benefits that flow on from promoting this. This includes meeting the expectations of patients, their families, government, staff and their representatives (e.g. unions and professional associations).

As the drivers of workplace culture, senior leaders must be active participants in creating a mentally healthy workplace. Leaders need to ensure that staff mental health and wellbeing is a strategic priority and a day-to-day focus for their health service.

What is a mentally healthy workplace?

In a mentally healthy workplace people at all levels have a shared vision of, and commitment to, positive mental health. Work demands are realistic in a way that balances the needs of the staff and the employer and do not pose an unreasonable risk to the mental health of individuals. Everyone in the workplace feels comfortable to speak openly about mental health and mental health conditions, without fear of stigma or discrimination. This creates a culture of respect and inclusivity.

Goals of this guide

The goals of this guide are to:

- provide practical, step-by-step guidance for health services to develop and implement a tailored mental health and wellbeing strategy for their staff
- drive organisation-wide change toward a culture of positive mental health and wellbeing in health services.

This guide was developed as part of *beyondblue's* Workplace and Workforce Program and to complement the Heads Up initiative (**www.headsup.org.au**). *beyondblue,* in collaboration wtih the Mentally Healthy Workplace Alliance, developed Heads Up to highlight the benefits of mentally healthy workplaces and give individuals and businesses across all industries the tools to take action.

Given the unique nature of the work environment in health services, *beyondblue* has developed this guide to address their specific needs and challenges.

Who is this guide for?

This guide is designed to be used by any person or group responsible for developing and implementing a mental health and wellbeing strategy in their health service. This includes, but is not limited to, people working in the areas of WHS, staff wellbeing, human resources (HR), and people and culture. The guide is also designed for current and future champions of promoting mental health and wellbeing within health services, who might work in any role in the organisation.

Senior leaders (board members, chief executive officers and executive members) can also benefit from this guide. They play a critical role in driving policies and practices that promote mental health in the workplace and positively influence workplace culture, management practices and the experience of staff.

How was this guide developed?

beyondblue has developed this guide based on practical advice and input from a Steering Committee made up of representatives from health services across metropolitan, regional and rural Victoria. *beyondblue* has also consulted widely with members of its blueVoices community, representatives from other health services, unions, professional associations, employer bodies, regulators, government, national industry peak bodies and academics in the area of workplace mental health. To further inform this guide *beyondblue* reviewed existing resources and evidence relevant to workplace mental health and wellbeing.

This guide has been designed to allow users to easily access the information about each step in the process of developing a workplace mental health strategy, independently. This acknowledges the different stages health services may be at in creating mentally healthy workplaces. Some will be starting from scratch whereas others may be well into the process. The steps are outlined on page 11 of this guide.

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Understanding mental health and wellbeing

Mental health is a positive concept related to the social and emotional wellbeing of people and communities. The concept relates to the enjoyment of life, ability to cope with stress and sadness, the fulfilment of goals and potential, and a sense of connection to others.[1]

Positive, healthy functioning

Severe impact on everyday functioning

Adaption based on Corey Keyes' mental health continuum model[2]

Mental health is about wellness rather than illness and is not merely the absence of a mental health condition. Mental health exists on a continuum, or range: from positive, healthy functioning at one end through to severe symptoms of mental health conditions at the other. A person's mental health moves back and forth along this range during their lifetime, in response to different stressors and circumstances.

At the **green** end of the continuum, people are well; showing resilience and high levels of wellbeing. Moving into the **yellow** area, people may start to have difficulty coping. In the **orange** area, people have more difficulty coping and symptoms may increase in severity and frequency. At the **red** end of the continuum, people are likely to be experiencing severe symptoms and may be at risk of self-harm or suicide.

Some symptoms of people who may be at the **red** end of the continuum include:

- disturbed sleep
- social withdrawal
- feeling overwhelmed
- feelings of hopelessness and worthlessness
- reduced productivity
- irritability
- alcohol and drug use.

Risk factors and protective factors influence mental health and can nudge people back and forth along the continuum. Risk and protective factors can be individual or related to family, work or other life circumstances. Risk factors may increase the strain on our mental health, while protective factors can counteract these by helping us to stay or become well.

With much of people's time each day spent at work, the workplace is a very influential environment when it comes to mental health and wellbeing. A positive and supportive workplace can mean the difference between being 'in the green' or 'in the orange'.

Anxiety, depression and suicide

AROUND **2 MILLION PEOPLE** IN AUSTRALIA LIVE WITH **ANXIETY**

AROUND **1 MILLION PEOPLE** IN AUSTRALIA LIVE WITH **DEPRESSION**

NEARLY **8 AUSTRALIANS TAKE THEIR OWN LIVES EVERY DAY** 6 OF WHOM ARE MEN

1 IN 3 WOMEN & 1 IN 5 MEN ARE LIKELY TO EXPERIENCE **ANXIETY** IN THEIR LIFETIME

1 IN 6 WOMEN & 1 IN 8 MEN ARE LIKELY TO EXPERIENCE **DEPRESSION** IN THEIR LIFETIME

One in five employees in Australia are likely to be affected by a mental health condition. In any given year around three million people in Australia experience the most common mental health conditions of anxiety or depression.[3] Every day an average of eight people take their own lives.[4]

People who live with a mental health condition often experience significant levels of stigma and discrimination which can lead to delayed access to support and treatment, and impede recovery. Discrimination is also a risk factor for poor mental health and wellbeing.

Mental health in health services

There is evidence to suggest that doctors and nurses experience higher psychological distress than the general community.[5] Young doctors, medical students (particularly Indigenous students) and doctors working in rural and remote areas also appear to be particularly vulnerable to poor mental health.[6] Female doctors and male and female nurses in Australia appear to have higher rates of suicide compared to other occupations.[7] However, evidence about the mental health of other health services staff is limited.

Research suggests that an alarming number of doctors feel that having anxiety or depression causes embarrassment for them.[8]

Additionally, patients with mental health conditions report experiencing stigmatising attitudes from health professionals at similar levels to the general population.[9]

"It's a very stressful environment, not just for patients. It is hard to avoid mental health issues just from the work alone; add to this any other stresses or risk factors and you're a sitting duck."

Midwife, regional health service, VIC

There are a range of risk factors that can impact health professionals' mental health and wellbeing at work. These include heavy workloads, long working hours, shift work, compassion fatigue, occupational violence, exposure to trauma, bullying and harassment, and abuse/mistreatment from patients and patients' families.

At the same time, the characteristics of health service workers and the nature of their work, can help protect their mental health and contribute to wellbeing. Having a job that is meaningful and provides significant social benefits, such as working in a health service, is linked to high levels of job satisfaction.

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The benefits of taking action

Creating an environment that supports and promotes the wellbeing of staff is ethically responsible. It also ensures that your health service is meeting WHS requirements to provide an environment that is both physically and mentally safe and healthy.[10]

Employers have other legal obligations related to mental health in the workplace. These include making reasonable adjustments for staff with a mental health condition, protecting the privacy of a staff member who has a mental health condition, and ensuring that they do not take any adverse action against a staff member because of their mental health condition.[11]

In addition to these legal obligations, there are many other benefits to health services having a mentally healthy workplace, including the following:

- Patient experiences are better when staff feel they have a good working environment, low emotional exhaustion, and support from their co-workers and manager/s.[12]

- Every dollar spent on creating a mentally healthy workplace will, on average, have a positive return on investment of $2.30.[13]

- Employers who create and sustain a 'great place to work' will attract and keep the best workers.[14]

- When staff are engaged, they are more willing to extend an extra hand or discretionary effort to assist others. The result is improved performance, productivity and quality.[15]

"Mental health affects everything and everyone. Healthcare professionals need to look after their mental health as much as the next person. We can only care for others effectively when we are also caring for ourselves."

Nurse, metro hospital, SA

A strategic approach

The integrated approach model

It can be difficult to know everything that needs to be covered in order to create a mentally healthy workplace. As you think about your approach, there are three areas you should focus on: **protection**, **promotion** and **intervention**. These three areas make up the 'integrated approach'.[16] They help to define what a mentally healthy workplace looks like.

An integrated approach to mental health and wellbeing draws on evidence and principles from the areas of work health and safety, public health, psychology and psychiatry, to address legal and ethical obligations. It also embraces best practice from each of these areas.[17]
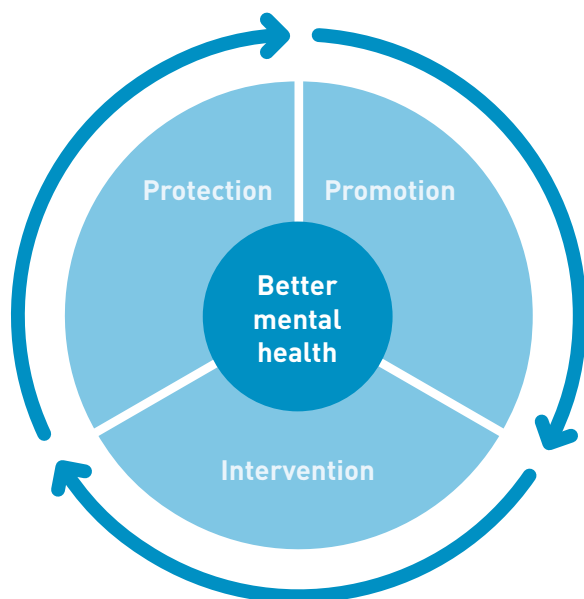
An integrated approach to better mental health, based on Tony LaMontagne's integrated approach model

Defining an 'integrated approach'

The term 'integrated approach' can have a number of different meanings when referring to staff wellbeing. It can relate to drawing on different health-related functions such as WHS, HR and staff wellbeing. It can also refer to integrating staff mental health activities into the broader staff wellbeing and organisational strategy. Generally, integrated approaches recognise the value of addressing a wide range of factors that may impact staff health, safety or wellbeing.

For the purposes of this document, the term 'integrated approach' defines actions that contribute to creating a mentally healthy workplace. These actions focus on protecting the mental health of staff, promoting wellbeing, and intervening to address mental health conditions, regardless of cause.[18]

In addition to applying the integrated approach model, there are two key principles that will help you successfully implement a mental health and wellbeing strategy for your health service – **ongoing meaningful participation** and **ongoing communication**.

Ongoing meaningful participation

Research shows that the meaningful participation of people who are the targets of any public health or occupation health initiative is essential to the success of the initiative.[19]

Your approach to developing a workplace mental health strategy should be grounded in co-design, promoting different ways for staff to become active participants in the development, implementation and review of your strategy to feel they own the change and the results. Co-design is based on the notion that the future users of any product, service or strategy are experts of their own experience, bringing different points of view that will inform the direction.

Tips to help you enhance participation:

- Identify champions and supporters early from various levels and disciplines. Keep them engaged throughout the process, helping to guide the strategy and communicate it across the organisation, engaging others as they go.

- Encourage staff to have a voice, taking care to involve those who may be less powerful so they can participate freely (e.g. anonymous suggestion boxes).

- Provide safe and open communication forums where staff can express opinions and be open to new ideas.

- Provide open access to all information and progress made in developing and implementing the strategy.

- Encourage managers to provide regular opportunities for staff to give feedback about issues related to mental health and wellbeing and the overarching strategy (e.g. through staff surveys, suggestion boxes, small group meetings, a dedicated email account, etc). Ensure this includes options to give feedback anonymously.

- Inform staff of the efforts to make change across your health service (e.g. at the board and executive level) making it clear that you are not just asking staff to make change, but are working on multiple levels.

Ongoing communication

Staff want to know what's going on in their own workplace. Informed staff are engaged staff. Embrace the appetite for information, and get ready to communicate regularly.

Regular and ongoing communication will help break down barriers to addressing mental health and wellbeing, and also contribute to reducing stigma. It's vital to educate staff about why good mental health is important. Broader promotion and recognition of good mental health assists in making it more commonplace to openly discuss emotions and mental health concerns. Regular communication will also help you to build momentum and broader organisational buy-in for your workplace mental health strategy and initiatives.

There are five key questions to answer when communicating about any organisational change initiative:

- Why change ... why now?
- What happens if we don't change?
- What will change look like?
- What's in it for me?
- What can we expect?[20]

Your communications should answer these questions and improve your staff's knowledge and understanding of their health and wellbeing at work. Ensure everyone is aware of the strategy, the supports that are available, the role they're expected to play and the immediate benefits available to them. For some examples of suggested content for communicating with staff about mental health at work and to download editable Word templates, visit **www.headsup.org.au** and search for 'Communication pack'.

Overcoming communication challenges

It can be difficult to communicate across the different health service sites and disciplines. To overcome communication challenges, consider using your intranet portal, staff payslips, training sessions or handover times, paper-based notices, activities or events. Appointing dedicated champions within each section of the workforce can also keep different workforces updated. Medical 'Grand Rounds' or other educational forums may be a good vehicle for communicating with the medical workforce.

"A [workplace] mental health strategy should involve people at all echelons in the hospital; senior staff alone will result in a very biased system. It should be communicated with everyone in an accessible fashion including email and social media."

Medical intern, metro health service, QLD

Tips to help with communication[21]

- Highlight the benefits that the strategy can have for patients, your staff and the organisation/employers (continuously reiterate the value proposition, or 'what's in it for me?').
- Avoid being driven exclusively by incidents or problems. Language that identifies concerns, problems or deficits, or worse still 'crises', has the potential to close down communication and engagement.
- Frame the issue in positive and negative terms – ask both what is and isn't working.
- Don't define individual people as reasons for the problems; instead, focus on the influence of the work environment and nature of work.
- Use clear and simple language.
- Use evidence to support what you are doing.
- Communicate regularly to reiterate key messages.

Developing a workplace mental health and wellbeing strategy

This guide aims to provide practical guidance on how to develop a mental health and wellbeing strategy. However, it's important to acknowledge that every health service is different. The size, location, catchment area, organisational structure and specific issues your health service is facing will influence what your strategy looks like.

Your health service may already have a mental health and wellbeing strategy in place, or a number of initiatives to support your staff. If this is the case, this guide can be used as a means to identify any gaps in your strategy.

Each of the following steps is based on extensive evidence and research, tailored to the health services setting. This should help you to easily apply the principles of each step to your health service, no matter what stage of the process you are currently at.

Step 1. Gain leadership support

Step 2. Analyse your situation

Step 3. Establish your action plan

Step 4. Monitor, review and improve
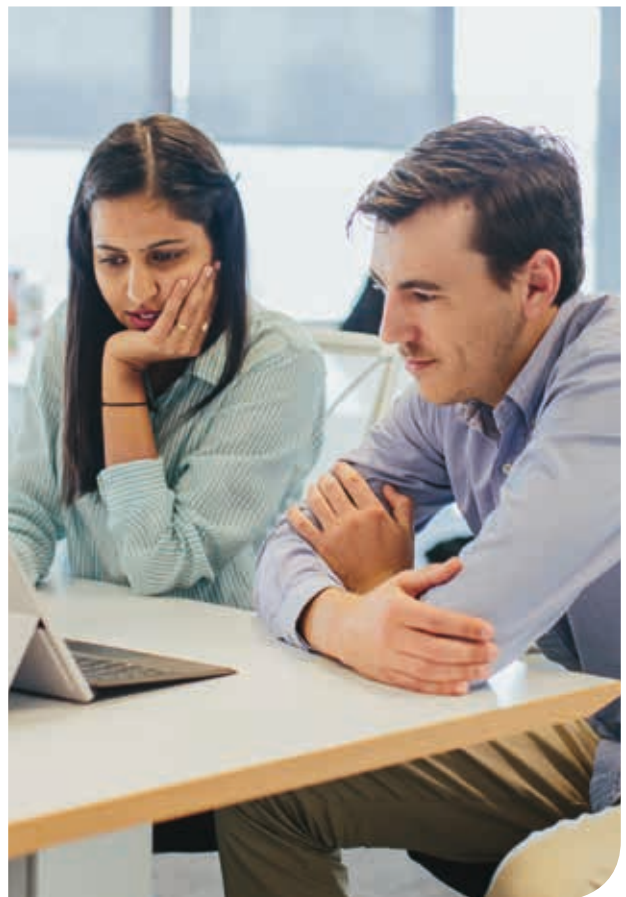
STEP**1**

Gain leadership
support

A. Build your business case

The rationale for addressing mental health can vary for individuals. While some senior leaders will be driven by the legal, ethical or moral importance of looking after the mental health and wellbeing of their staff, for some the strongest driver will be financial; for others it will be the quality of patient care, risk management, productivity and efficiency. Different arguments appeal to different leaders.

Ask

Which arguments and levers might work best in my workplace?

Consider the financial, ethical and legal imperatives that may be most relevant to your health service by using the information in the previous section, 'The benefits of taking action', as guidance.

Use the knowledge and understanding you have to write a business case about why it's important for your health service to create, or build on an existing workplace mental health and wellbeing strategy. Your ability to do this will depend on the information and data you currently have. You may need to complete all or some of your 'situational analysis' (see 'Step 2: Analyse your situation' on page 19) before writing your business case.

Whatever your work environment, the business case should link to organisational priorities, values and key performance indicators (KPIs) around issues including patient care, recruiting and retaining a skilled workforce, economic efficiencies and public reputation.

Often, examples from other organisations with successful programs can be useful, as can stories of individuals' personal experiences with mental health conditions, from within your organisation (providing confidentiality can be protected or you've received express consent to share). Real, personal accounts like these help to capture the hearts and minds of senior leaders. Talk to different staff members about their experiences (good and bad) to make it specific to your health service.

B. Identify champions and establish governance

It's important to have support from all levels of the organisation. Establishing a strategy team with broad representation and levels of accountability across a steering committee, working group and identified champions will help to guide development and implementation of your strategy. The team should establish clear KPIs to monitor, implement and measure success.

Consider how you can ensure that there is a balanced representation of people across different levels and areas of the health service. You can use your health service's organisational chart as a starting point. However it's also important to consider those who may not be represented, such as volunteers, locums, students, contractors and maintenance, or security staff.

Ask

Who are the key influencers and groups in my organisation? Who could have the passion and commitment to champion mental health?

The main influencers in your organisation will be the senior leaders and managers. The role of leadership in your health service is pivotal to the success of your strategy. Leaders need to be engaged from the start and continue to endorse and participate in the strategy as it evolves.

One way to ensure senior leaders are engaged is to establish a steering committee. The **steering committee** should include people in senior management positions and strategic areas of your health service including directors of HR, communications, and education, as well as clinical representatives (e.g. psychiatrists). This group will provide overall guidance and strategic direction for the process, help engage other members of senior management and provide evidence of management support. Although regional and rural health services are likely to establish smaller steering committees, some formal structure should be established to ensure senior leaders are ultimately responsible for the strategy.

The steering committee will be most effective if it is led by an **executive sponsor**. The executive sponsor will ideally be someone in authority who is passionate about mental health and wellbeing. They will report back to your organisation's executive and have a key role in

regular communications to all staff that mental health and wellbeing is a priority. For this role, consider people who are respected by staff and who contribute positively to the workplace culture.

The steering committee will oversee the strategy's development, but is unlikely to be responsible for implementing it. The best way to kick-start action is to create a **working group**. A working group should include staff from each relevant area and/or site across the health service. You should aim to include frontline staff, risk managers, peer support workers, staff from WHS and HR, and health and safety representatives in this group. In smaller health services where there may not be a dedicated role for these areas of the organisation, one person may be wearing multiple hats. The working group will be responsible for key actions associated with developing and implementing your workplace mental health strategy. These include:

- encouraging staff participation[22]
- coordinating focus groups or the distribution of surveys
- reviewing survey results
- identifying priority areas
- establishing goals
- developing an action and project plan
- monitoring timelines
- implementing and reviewing actions.

The working group will report back to the steering committee regularly.

Every health service will have staff members with the passion and commitment to champion mental health and wellbeing. Spend some time identifying who these **champions** are, and how they can help feed into the development of the strategy to get it off the ground. Champions are likely to be active at mental health and wellbeing events and willing to share personal experiences and role model desired behaviour. In some cases they may not be involved in the dedicated working group, but will work to create momentum and wider buy-in from staff. It's important to involve people who are trusted by different groups and professions, including those who may be resistant to change.

Clearly defined and regular ongoing communication between the steering committee, working group and relevant champions, is essential to creating a clear and effective governance structure. Your steering committee, working group and other relevant stakeholders should have clearly defined terms of reference outlining the group's roles and responsibilities.

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C. Commit financial, human, and other resources

Remember, every dollar spent on creating a mentally healthy workplace will, on average, have a positive return on investment of $2.30.[23]

Investing in workplace mental health does not always require many resources.[24, 25, 26] In fact, in the longer term, neglecting mental health takes a significant toll on the resources of health services – financial, human and otherwise.[27, 28]

However, it can be challenging to reprioritise the distribution of resources, as health services have many competing priorities.

When considering resourcing, keep in mind that more than monetary support will be required. Resources also include the time needed to build the business case, engage with and influence the attitudes and behaviour of leaders, and the time required to manage the process of developing and implementing your workplace mental health strategy.

All staff working on the strategy should have dedicated time for meetings and other work relevant to the development and implementation of the strategy. This is especially important if the people or person responsible has been given this responsibility on top of their current role.

There are a number of very simple yet powerful things health services can do that are not resource-intensive when developing a workplace mental health strategy. There is also always the potential to grow your strategy over time, and scale up your activities once you have started. Proving the value of initial activities will help you along the way – working towards an integrated approach.

Case study

"We engaged our Employee Assistance Program (EAP) provider to assist us in drafting a mental health and wellbeing strategy. We linked this strategy to other wellness and cultural initiatives already underway across the organisation.

We identified a sponsor for the strategy – the Executive Director of HR – who presented the strategy to the executive team for consideration. The draft strategy was also reviewed by a representative from the Mental Health Unit and presented to the multidisciplinary staff Healthy Options Committee for review. When the strategy was finalised it was discussed with the Board as part of the annual Health, Safety and Wellness Board meeting for review for endorsement."

Elizabeth
Director Employee Relations & Health,
Safety & Wellness
Austin Health, VIC

STEP**2**

Analyse your
situation

A. Identify existing policies, programs, supports and practices

You want to know how your health service officially talks about, thinks about and acts when it comes to mental health and wellbeing in the workplace. Conducting a 'situational analysis' will help you get to know which policies, programs, supports and practices exist for different groups of staff – particularly if these are different across various geographical sites.

Ask

What do we have and what don't we have?

Often organisations know what they have, but not what they don't have.

First think about what questions you want to ask. What do you want to know or learn? What improvements does your health service hope to make?

To help you unearth gaps in your health service and discover which areas may need more attention, you can use the integrated approach highlighted in Step 3C, 'Develop a realistic, achievable plan' (page 29). This step outlines a number of specific activities that may be missing from your current approach.

B. Review and analyse existing data and research

Ask

How does your data compare to other health services or national standards on workplace mental health?

Some health services have easy access to a range of data, and others have separate, disconnected groups of data. Combine your sets of data, establish a baseline for improvement and compare this against relevant external reports or research. You will need to analyse your findings in a way that highlights the key areas for improvement in your health service so you know what to measure.

Some examples of internal data include the following:

- Absenteeism rates and reports
- Bullying and sexual harassment reports and claims
- Workers' compensation claims
- Stress claims
- WHS risk assessments and meeting minutes
- Accidents and injury rates
- 'Code grey' (occupational violence) reports
- Lost time to injuries
- Employee Assistance Provider contacts
- Peer support program use and trends
- Clinical register information

- Turnover rates
- Exit interview data
- Measurements of workplace productivity
- Avoidable errors in judgement, particularly dosage amounts and surgical decisions
- Self-reported substance abuse
- Drug/alcohol related incidents
- People Matter Survey (e.g. for public health services) results
- Staff survey results

Some examples of relevant research and reports include the following:

- Research papers
- Industry or practitioner surveys
- State Government and Department of Health reports
- Industry reviews or reports
- *beyondblue* National Mental Health Survey of Doctors and Medical Students[29]
- Auditor-General's Office reports and publications
- Institute for Safety, Compensation and Recovery Research (ISCRR) evidence
- Heads Up website by *beyondblue:* **www.headsup.org.au**

C. Consult with staff and other stakeholders to identify issues and seek feedback on the current approach

As health service environments have such diverse workforces, there will be issues and risk factors specific to particular groups of staff. It's important to seek out broad feedback and identify the issues specific to a range of workforce representatives.

. . . .

Ask

How is our current approach working and not working, and why?

. . . .

Seek feedback to ensure you have a broad and accurate picture of current issues and gaps. You can verbally gather this information using the members of your working group and also through qualitative techniques such as emails, in-person interviews, surveys, phone calls and suggestion boxes.

It's also important to seek external feedback to ensure you are gathering information from a range of sources to inform your strategy. External stakeholders could include the family members of staff, unions, people who have exprienced a mental health condition, membership bodies and government.

Case study

"Northern Health has always been mindful of its health and safety and fair work obligations. After the release of *beyondblue's* National Mental Health Survey of Doctors and Medical Students, our Safety First and Medical Workforce teams thought it was time to complete a situational analysis to better understand the level of risk associated with psychological distress and work-related contributing factors.

Prior to the situational analysis, our Safety First team completed a brief literature review and an environmental scan to better understand the incidence of mental health conditions nationally and within the healthcare sector, and to also understand what risk assessment tools were available to help us.

We used validated tools – the Kessler 10 (K10) and the Health Safety Executive UK Management Standards tool. These tools were distributed to medical officers, nurses and allied health staff in paper and electronic formats, with the aim of achieving a minimum of 30 per cent uptake and statistical significance in each of the above areas of our workforce.

All data we collected was non-identifiable. The team also gathered qualitative data from each area by using the Bowtie risk management approach (an approach that visually presents major hazards to facilitate workforce understanding of hazard management).

The greatest benefit from completing the situational analysis is that we are now clearer about the state of mental health within our medical, nursing and allied health professions. It has also helped us identify the potential incidence of bullying and harassment, and determine the cost benefits to the business, which we will be presenting to our executive".

Johnathan
Health, Safety and Wellbeing consultant
Northern Health, VIC

Establish your
action plan

A. Establish desired outcomes and set goals

Now that you've completed your situational analysis, you can start work on your action plan.

To narrow down and identify some specific goals, follow the process below:

1. Rank the issues you have identified in a sequential order, twice. First, rank them by the level of importance in enhancing mental health and wellbeing. Next, rank them by the perceived level of organisational motivation to change them.

2. Next, consult with your working group, champions and/or steering committee to understand the level of need and perceived importance of the issues you have identified. Crosscheck these issues against baseline data and other information you collected through the situational analysis as you go.

3. Prioritise the issues you and your team have identified as the most important and with the most 'buy-in' for action.

4. From the remaining issues, choose perhaps five and turn them into goal statements. Imagine what success looks like. For long-term goals, you might need to identify short-term, more obtainable goals. Come up with goal statements for each individual goal.

> Goal statements need to be challenging enough to be stimulating but not so complex that people become discouraged. Look at common goal-setting tools like S.M.A.R.T (specific, measurable, achievable, relevant and timely) for help with this.

5. Discuss the final list of goal statements with other internal and relevant external stakeholders to seek feedback and agreement.

6. Create an overarching statement of the goals for the workplace mental health strategy that is clear and simple enough for the strategy team to work toward.

7. Devise a plan as to how you are going to measure success for each goal.

Refer to the Action plan template on page 48 for an example of what a goal might look like.

B. Identify need for collaborations/external expertise

There are many resources available online that can give you more guidance on developing a workplace mental health strategy. You can visit the Heads Up website (**www.headsup.org.au**) for support whenever you need it.

The 'Useful information and resources' section of this guide on page 46 is also full of useful materials. Working with others from within and outside of your health service can also be beneficial.

• •

Ask

How can we work with others?

• •

Maybe the expertise lies with someone else in the health service. Maybe it lies with another health service. You don't have to do it alone – you can partner with others. Work with them, share knowledge, support developments and find additional support. Could another organisation benefit from what you're doing? Reach out and see where it leads.

If the resources are available, you could also work with a consultancy in health, social impact, management or change, for further guidance.

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C. Develop a realistic, achievable action plan

It's time to start developing your actions and interventions.

Ask
What does success look like?

Now that you have identified and prioritised the high-impact, high-risk areas uncovered in your situational analysis, crosscheck your goals against the three focus areas of the integrated approach model. Do your broader goals cover the three primary areas of promotion, protection and intervention?

The diagram below shows the areas of focus of the integrated approach as identified earlier in 'A strategic approach' (page 8). It details recommended goals – some of which you may have already identified in the previous steps of the process – that will help ensure you are covering the three areas key to creating a mentally healthy workplace.
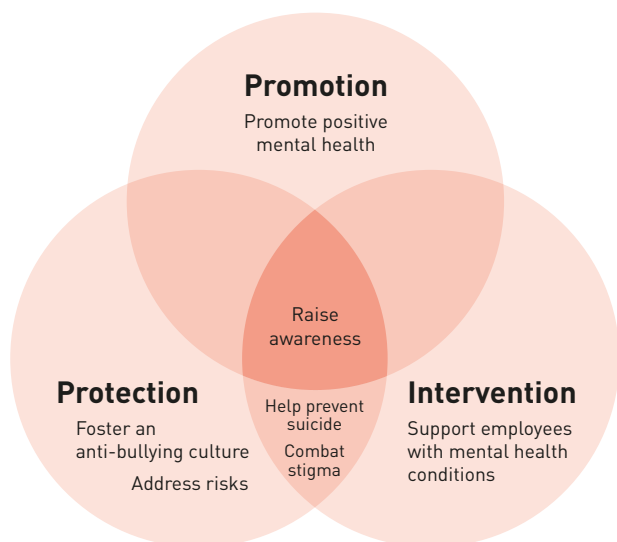
The recommended goals are detailed in the next part of this section, with suggestions for specific actions you could adopt in each.

If you don't have the resources to undertake multiple actions, you can start with low-resource, high-impact options across the three focus areas, and work up from there. **These 'easy to do' actions are marked with this symbol** ⊘

Ensure you consult with staff and others along the way, providing opportunities for co-design and reinforcing that mental health and wellbeing at work is a shared responsibility.

Promotion
Promote positive mental health

Raise awareness

Protection
Foster an anti-bullying culture

Address risks

Help prevent suicide
Combat stigma

Intervention
Support employees with mental health conditions

Case study (continued from page 17)

"In drafting our mental health and wellbeing strategy we identified a range of outcome areas: staff safety; resilience; support services; mental health awareness and skill building. Within each of these outcome areas, priority interventions were developed based on the data analysis, links with existing programs, resources and demand for service. Actions were prioritised over a three year plan with each year building on the previous year's actions.

Developing a staged plan over several years with 'bite sized chunks' of change made implementation easier. Also linking the plan to existing programs and embedding it into the overall organisational strategic plan has helped ensure it gained momentum."

Elizabeth
Director Employee Relations & Health,
Safety & Wellness
Austin Health, VIC

Recommended goals

Goal: Raise awareness

Actions

- Provide information and resources about the signs and symptoms of common mental health conditions and suicide risk, self-care advice, positive coping strategies and resilience. ✓
- Ensure staff are aware of their roles and responsibilities regarding mental health in the workplace, including legal obligations.
- Regularly, and through multiple channels, provide information to staff about mental health and wellbeing services and supports, including those provided by external organisations such as *beyondblue*.
- Promote events such as Australian Mental Health Week, World Mental Health Day, R U OK? Day, and Work Safe Health and Safety Week/Month, to affirm mental health and wellbeing as an important part of the workplace, and to encourage open conversations. ✓
- Develop a clear communication plan for spreading the word about your organisation's workplace mental health strategy within and beyond your organisation.
- Include staff members' families in communications about mental health and wellbeing initiatives and services wherever possible, recognising the important relationship between work and home life.

"Mental health should be recognised as a focus in every workplace – especially a health service environment where stress is always present."

Dental assistant, QLD

Goal: Address risks

Actions

Your situational analysis will have helped to identify a number of specific risks. However it is important to adopt a systematic approach to risk management.

- Consider staff who may be at greater risk of experiencing stress or a mental health condition. For example, research suggests young doctors experience higher levels of work stress, burnout and mental health conditions compared with senior doctors, and may be less likely to seek support due to concerns about career development and progression.[30]

  Other staff that may be at greater risk include other new and young staff, Aboriginal and Torres Strait Islander people, contractors and shift workers, workers with poor literacy skills, new or expectant mothers and people with a disability.

- Establish a process to monitor risks and consult directly with staff to discuss and develop solutions. This may also be a good time to engage a risk manager from within your organisation for assistance.

- Consider a range of factors affecting the mental health and safety of your staff including:
  - organisational factors (e.g. work design, low levels of control, shift work, long working hours, poor support, bullying, harassment, lack of communication and consultation)
  - operational factors (e.g. exposure to trauma, occupational violence)
  - environmental factors (e.g. external emergency or multi-casualty incident, exposure to lethal drugs)
  - individual factors (e.g. compassion fatigue and acknowledgement that people respond to stressors at work in different ways).

Work design

Work design is about how an entire job is organised within an organisation. Good work design eliminates or minimises risks to physical and mental health, and optimises performance, job satisfaction and productivity.

Effective work design looks at:

- how the work is performed
- the physical working environment
- the capabilities and needs of staff.

Improving work design in health services could include:

- regularly reviewing workloads and resources
- designing rosters for equity and fairness
- enabling skill development and job variation
- making key duties and expectations clear
- involving staff in decisions around changes to work
- strengthening communication systems
- managing exposure to trauma.

Goal: Foster an anti-bullying culture

> "In recent years we have been talking a lot about the mental health of doctors, which is fantastic. However, very little has been done to address the systemic issues ... for example, long working hours."
>
> *Junior doctor, metro health service, VIC*

Actions

- Create greater awareness of bullying and inappropriate behaviours to break the cultural expectations that bullying – especially by senior staff in training situations – is commonplace and acceptable. ⊘

- Conduct programs and activities that teach staff, including managers, how to identify bullying and understand what are appropriate and inappropriate behaviours.

- Watch out for those at risk, identify the source of any bullying, encourage people to stand up, and act promptly to resolve issues.

- Create or improve policies and protocols around workplace bullying, setting a zero-tolerance approach.

- Implement confidential reporting and response procedures for when bullying occurs, treating all matters seriously. Ensure policies and procedures protect anyone who reports or witnesses workplace bullying from victimisation.

- Communicate links between bullying/harassment, risks to mental health and patient and staff safety.

> "I experienced shocking bullying from a manager which resulted in me taking two weeks of unpaid leave. Support was not offered in any form at all from management, despite them being aware of the situation. My support came from other staff who had also had similar negative experiences with this staff member ... I feel exhausted at the end of a shift, I'm hyper vigilant the entire time."
>
> *Nurse, metro health service, WA*

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Goal: Promote positive mental health and wellbeing

Actions

- Focus training and development of managers on positive, proactive leadership (e.g. promoting employee strengths, providing constructive feedback and recognition, supporting employee growth, and matching employee skills and goals with jobs).

- Emphasise the meaningful aspects of work and the social benefits that the health service creates, celebrating achievements and praising effort as well as results. ✓

- Encourage staff to work together on tasks, discuss ideas, share skills and take part in social activities. ✓

- Regularly collect two-way feedback from staff, where staff are evaluated by their managers, and managers are reviewed by their staff.

- Encourage staff to have a say in how the wider organisation is run by requesting their feedback and letting them know how their feedback is being used for improvement.

- Promote healthy eating, physical activity, non-smoking and alcohol/substance control. Educate staff on the links between physical and mental health.

- Encourage mindfulness as a simple, quick and evidence-based action.[31, 32]

The power of mindfulness[33]

Mindfulness involves a series of attention-training practices and cognitive strategies that can help you unhook from unproductive thought patterns and behaviours. It involves learning to pay attention to the present moment rather than worrying or dwelling in the past. It also involves developing an attitude of friendliness toward yourself, as opposed to criticism or judgement.

Research shows that mindfulness can reduce stress, enhance cognitive performance, improve study/work performance and help improve relationships and overall wellbeing. It can complement approaches which aim to address the work-related sources of stress, such as fatigue and occupational violence.

Goal: Combat stigma

Actions

- Invite people with a personal experience of recovery and management of a mental health condition to share their story in the workplace (e.g. at a Grand Round or other educational forum). ✓

- Encourage senior leaders and managers to speak openly about mental health in the workplace by actively endorsing and participating in activities and events aimed at reducing stigma. ✓

- Promote zero-tolerance for discrimination against staff who have a mental health condition.

- Establish a track record of supporting staff with mental health conditions to stay at or return to work, by providing reasonable adjustments.

- Provide information resources (websites, flyers and booklets) and training which challenges inaccurate stereotypes about suicide and mental health conditions. ✓

- Promote a range of internal and external mental health support options (e.g. your EAP or *beyondblue*'s Support Service: **www.beyondblue.org.au/get-support**). For a full list of support options, see the 'Useful information and resources' section beginning on page 46.

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Goal: Support employees living with mental health conditions regardless of cause

Actions

- Develop the capability of leaders and managers through training that focuses on people management skills, mental health and suicide prevention in the workplace (identifying staff at risk and supporting those with mental health conditions).

- Provide and promote access to a range of external and internal mental health supports (e.g. EAP, welfare staff, grievance officers, HR, peer supporters, 'wellbeing champions', and health services for health professionals). Stipulate confidentiality and make the pathway to accessing support clear.

- Break down any misconception about the process and requirements of the mandatory reporting of health professionals who may not be practising safely (a requirement under the Health Practitioner Regulation National Law) and the related negative consequences of seeking support. ⊘

- Develop stay-at-work or return-to-work plans for staff who have been diagnosed with a mental health condition. Plans should be tailored to their individual needs and incorporate any reasonable adjustments to their job. They should be developed in collaboration with the staff member, their treating health professional(s), their family members and those who support them, and reviewed regularly.

- Ensure that all policies and procedures relating to supporting staff to stay at or return to work, offer the same level of support and assistance to staff with non-work related conditions as they do to those with work-related conditions.

- Provide flexibility, where possible, regarding work hours and tasks for people to stay at and return to work, prioritising mental health and wellbeing above performance expectations.

Goal: Prevent suicide

Actions

To work towards preventing suicide, focus on promoting a mentally healthy workplace that addresses risk and protective factors, prioritises mental health, destigmatises mental health conditions and encourages help-seeking.

By creating a mentally healthy environment and encouraging staff to seek support when they are at the yellow or orange end of the mental health continuum, they are less likely to go into the red area of the continuum (see page 4). Below are some of the ways you can work towards preventing suicide:

- Invite people with a personal experience of recovery related to suicide, to share their stories in the workplace. Ensure that appropriate support is provided to the speaker, and staff are aware of who to talk to if the speaker's experience brings up any issues for them – particularly if they have been affected by suicide directly themselves. ⊘

- Provide specific suicide prevention and intervention training to staff, such as Applied Suicide Intervention Skills Training (ASIST).

- Develop clear policies and protocols around suicide and suicide risk.

- Provide additional support to staff bereaved by the suicide of a colleague, family member, close friend or patient (acknowledging anniversaries, implementing peer support programs). Post-vention support is important whether it is a colleague or a patient who has taken their own life.

- Communicate information to staff to highlight the warning signs and key resources available to staff at risk. You could do this in line with dates such as World Suicide Prevention Day.

> "A key issue is to develop and use a peer mental health program so that employees can talk to someone who's been through it and survived. I wish I had that when I returned to a management position after I attempted suicide."
>
> *Nurse, private health service, QLD*

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D. Implement actions

Explore the philosophy behind the action and the motivation for change, rather than pushing people to comply. Communicate why these actions are important, what your goals are, and why this is the best way forward. Refer back to 'A strategic approach' beginning on page 8, for more information on communicating with staff.

Make a clear and consistent effort to address entrenched, and often hard to fix, structural issues which can contribute to fatigue and stress, such as un-rostered overtime and unachievable workloads. This engages staff and builds strong awareness before you try to implement other initiatives. All staff can then appreciate that a public effort is being made, and will be more accepting of smaller efforts; they will know it's part of a bigger picture. For instance, if you let people know that you're working with those in charge of the rosters to give staff more control over shifts and a better work-life balance, people may be more open to attending training sessions on mental health awareness.

In some cases, it may not be helpful to wait for additional resources before getting started. Additional resources may come as a result of some of the actions you have already taken. Work with what you have – no one wants your strategy to gather dust on a desk. Refer to the 'Overcoming challenges' section of this guide on page 43 for further inspiration.

STEP**4**

Monitor, review and **improve**

A. Monitor implementation and uptake of initiatives

Monitoring and evaluating your action plan is vital to the credibility and sustainability of your strategy and is key to establishing a cycle of continuous improvement (refer to the cycle below).

Your action plan has been developed to create change.

Monitor to ensure that the following actions are being taken:

- The action plan is being implemented by the right people, in the right ways for the best effect, and is as sustainable as possible.

- The initiatives are being planned, built and implemented in the health service.

- Everyone knows about the new mental health and wellbeing strategy, the initiatives being introduced and actions being taken, and why.

- There is a comprehensive and accurate understanding of how to access information, services or offerings that are part of the strategy.

Ask

Is the action plan being implemented?

B. Seek feedback from staff on implementation and effectiveness

Staff will be instrumental in the implementation of initiatives and actions. As the 'eyes and ears' of the strategy, they will be able to provide immediate and ongoing feedback about awareness and uptake on the ground.

Constant iteration is critical to ensure your actions align with the goals you developed in Step 3A. 'Establish desired outcomes and set goals'.

Ask

What is my strategy team seeing and experiencing in getting this off the ground?

C. Collect data to compare with your baseline and measure progress against goals

You established baseline measurements in your situational analysis. Now it's time to gather similar data to compare this to. Look again at what you collected before you implemented the actions in your strategy. Your aim is to look at the same indicators, so you can gauge any change that may have occurred.

Analyse your data for trends, changes and gaps. Compare the data you have collected – perhaps at monthly intervals – to your original findings. What's changed and by how much?

Communicate the effects of implementation and report back on your progress to your team, management and all other staff. This will encourage ongoing engagement with initiatives, reinforcing the sustainability of the strategy.

Don't be afraid of communicating when things don't go as well as expected. Honesty and transparency will build trust and the goodwill of staff. It will also help you discover why things went wrong, to help you find new solutions.

Crosscheck results against your goals and targets. Look at where you're headed, look at the direction of your change, and whether or not you're on track.

Ask

Are we on track to reach our strategic goals?

D. Review strategy and programs against baseline and goals

Now that you've crosschecked your results against your goals and targets, you should evaluate the success of your action plan. Depending on your resources, an evaluation is useful every 12 to 18 months.

Consider how the timing of your review aligns with your organisation's evaluation and development of broader organisational and WHS strategies. Aligning these activities will not only make the process easier to manage, it will also help to embed mental health and wellbeing into the minds of the senior leaders involved in strategic planning. This will help to ensure that mental health and wellbeing are part of your organisation's business as usual.

Look at the change you've achieved and whether it's the change you want.

Ask

How well does my action plan take the goals and make them a reality?

Look at what's working and what's not. Look at the strengths and weaknesses of the actions so you can constantly improve them. This is not a process of 'set and forget' – it's a journey of growth and change. You have to be adaptable to the many paths available now, and in the future. There's always room for improvement.

Case study

"To help address the vulnerability of our doctors to distress and burnout, and support them to thrive at work we developed our Monash Care mental health and wellbeing strategy.

To evaluate one of the immediate impacts of the strategy, we measured levels of awareness about mental health after an event to launch the strategy. Using a survey we found that 90 per cent of attendees reported that the event raised awareness about doctors' mental health, and 66 per cent reported the event raised awareness about where to go for help when experiencing psychological distress.

Reviewing some of the other actions we implemented highlighted some promising results. Our Wellbeing Officer now receives more than 30 contacts from doctors a month, EAP uptake is steadily increasing, and our Peer Support Program training has helped peer supporters feel better prepared to provide support to other doctors. As a result of these findings, we are also introducing coaches to support the peer supporters.

Although we are excited to have seen promising results since the launch of Monash Care, we acknowledge that there have been gaps in our evaluation process. If we had developed a review framework at the start of the process we would have been able to collect baseline data to compare to the data we collected after implementing our actions.

Additionally, evaluation surveys that reach all staff may not give a true picture of the support programs' usefulness. In the future we intend to engage people who have accessed programs as part of our evaluation so we can get more targeted information about the effectiveness of specific programs.

As our strategy has focused on supports for doctors, our next steps will focus on mental wellbeing, addressing the workplace structures, systems, and culture which contribute to job stress, and expanding the strategy to include all staff."

Anjali
Director of Medical Services
Monash Health, VIC

E. Amend and adjust strategy and actions where required

You've had a look at how you might improve. Nothing's holding you back; it's time to improve your workplace mental health strategy.

Strive to make the strategy and your plan for action the best it can be. Future-proof it by better tailoring it to your environment and/or the needs of the staff in your health service as they change and grow.

This is a learning process for the whole health service. These final steps will help you to work through setbacks, evolve your strategy and adapt to the changing needs of your health service.

Overcoming challenges

Any new endeavour is unlikely to be perfect from the start. Developing and implementing a mental health and wellbeing strategy can have its challenges and you may encounter some resistance, uncertainty, constraints or setbacks along the way. Don't be disheartened. Listen, consider, and use what you've learnt about your workplace, its people, systems and culture, to overcome challenges as they arise.

Draw on your champions or members of your working group and steering committee for support and guidance. Below are some common challenges to developing and implementing a workplace mental health strategy and suggestions to overcoming them.

Challenge	Solutions
Preference for the status quo; stress is an accepted part of health service life	• Use infographics (such as on page 5 of this guide) and information to highlight the prevalence of mental health conditions and suicide in Australia and Australian workplaces and health services, and the potential costs of not taking action. • Seek feedback from staff on the current approach to mental health and wellbeing to better understand perceptions of what is and isn't working currently. See page 23. • Use case studies of other health services that have successfully created change, highlighting the benefits of taking action.
Stakeholders are concerned that a workplace mental health strategy will cost them financially	• Provide information about the relationship between mental health and wellbeing and patient care and the financial benefits (e.g. return on investment) of taking action, to leaders and managers. See page 6. • Encourage leaders and managers to become involved in mental health and wellbeing activities. • Highlight potential low-resource strategies to complement those that are more resource intensive – health and wellbeing initiatives don't have to be expensive. See pages 29 to 34. • Explore opportunities to redirect resources from other areas. This could include initiatives that had limited uptake or, after evaluation, are not working.

Challenge	Solutions
Lack of enthusiasm, passion or engagement, holding you back from getting support	• Ask for verbal feedback in staff or team meetings, giving staff the option of emailing suggestions to a key contact, or via an anonymous suggestion box. • Listen to workers' needs, concerns and ideas and be responsive to them as a meaningful form of recognition. • Recognise and reward staff for their contributions (e.g. with their permission, recognise individuals in meetings or celebrate successes of the initiatives they contributed to through team lunches or morning teas) . • Use your champions and sponsors to rally around the cause.
Open resistance from stakeholders	• Be transparent and encourage participation. Have open and honest discussions with those who are resistant to understand why they are resistant. Try to address their concerns. • Provide relevant information on the impact of mental health in the workplace. See pages 5 and 6. • Use factual evidence-based information. • Make your champions, sponsors and working group familiar with the key messages of the business case to help support the case for change. See page 14. • Arrange some demonstrations or 'drafts' of plans or documents as examples. • Share the success stories of other health services or organisations. • Introduce the actions at a realistic pace and communicate expectations around timeframes for delivery. Consider creating a 'Working plan' spreadsheet to distribute.
Prevalence of stigmatising and discriminatory beliefs about mental health conditions	• Support staff to develop a more accurate understanding of mental health conditions by sharing evidence that challenges the myths and misconceptions of mental health conditions and those who experience them. See page 33. • Carefully make sure that staff know their legal responsibilities. • Use experiences from other organisations to show the positive impact of employing people with mental health conditions. • Invite a speaker who has experienced a mental health condition to talk with staff to educate the workforce. Visit **www.beyondblue.org.au/speakers** • Highlight the benefits of promoting positive mental health and its impact on improving the mental health and wellbeing of all staff, not only those with a mental health condition.
Low participation in activities	• Involve staff in the planning process, taking a participatory approach. See pages 8 and 9. • Ensure the action plan reflects staff concerns and needs. • Ensure information about the programs and their benefits is effectively distributed to staff in a simple and clear manner. • Ensure access to information, supports and services is easy and convenient with low cost. • Ensure staff are allocated the time to attend activities, events or initiatives.

Challenge	Solutions
Real or perceived lack of privacy or confidentiality	• Remind staff that privacy legislation requires employers to ensure personal information about a worker's mental health status is not disclosed to anyone without that person's consent. • Reiterate organisational policies concerning reporting duties and obligations. • Ensure opportunities to provide anonymous feedback are made available.
Waning momentum from staff	• Be results-oriented: focus not on providing an 'activity of the month', but rather legitimately tackling issues that positively impact employee mental health and wellbeing, and in turn the quality of patient care and savings to the health service. Communicate all results and strive to continue to improve. See the continuous improvement model on page 38. • Set realistic long and short term expectations of what the program can achieve (i.e. 'it won't happen overnight'). Research, literature and practice suggest it will take three to five years to reap the full benefits of workplace health programs. Teach patience. • Ensure programs are interesting and engaging for staff.
Maintaining personal motivation, especially when faced with other challenges	• Change takes time and is an evolving process. Be patient. Some people may not 'get it' straight away. • Set realistic expectations early on, for both your health service and yourself. • Be adaptive and listen to your strategy team. • Don't let small setbacks become big roadblocks. Practise persistence. • Remind yourself why you're doing this. Look back at the circumstances that brought you to this point. What's your motivation? • Remember you're playing a key role in helping people flourish in work, and in life. Remember the value you're creating for everyone.

Useful information and resources

Heads Up

www.headsup.org.au

Heads Up is an initiative of *beyondblue,* in collaboration with the Mentally Healthy Workplace Alliance, that aims to give individuals and businesses the tools to create mentally healthy workplaces. The Heads Up website offers practical advice, information and resources to take action, and covers all areas of workplace mental health. The training and resources section of the website has a wide range of resources available to support you through the process of creating a mentally healthy workplace including fact sheets, brochures, wallet cards and online learning programs. All Heads Up resources are free to order or download and can be delivered Australia-wide.

beyondblue

www.beyondblue.org.au

Learn more about anxiety, depression and suicide prevention.

beyondblue Support Service

1300 22 4636
www.beyondblue.org.au/get-support

Access free, confidential support from a trained mental health professional. *beyondblue's* Support Service is available by phone (24 hours/7 days a week), web chat (3pm–12am AEST/7 days a week) or email (response within 24 hours).

beyondblue online forums

www.beyondblue.org.au/forums

Access free, anonymous peer support around the clock from *beyondblue's* online forums. The forums are a group support space where people with experiences of anxiety, depression and suicidal thoughts share tips and advice on what works during the tough times. Also includes a section on trauma for discussing PTSD and emergency services workers' experiences.

Lifeline

13 11 14
www.lifeline.org.au

Lifeline provides 24/7 crisis support and suicide prevention services.

Safe Work Australia

www.safeworkaustralia.gov.au/sites/SWA

Safe Work Australia is an independent statutory body responsible for leading the development of policy to improve work health and safety and workers' compensation arrangements across Australia. Each state and territory has its own regulatory body that provides useful information and advice about addressing risks at work and creating a safe workplace:

- SafeWork NSW
- NT WorkSafe
- WorkCover Queensland
- SafeWork SA
- WorkSafe Tasmania
- WorkSafe Victoria
- WorkSafe WA
- WorkSafe ACT

Health and Safety Executive – UK

www.hse.gov.uk

The Health and Safety Executive (HSE) is the national regulator for work-related health and safety in Great Britain. It is the primary source of research, information and tools about the delivery of healthier, safer workplaces in the region. The HSE website includes links to tools and research including the HSE Management Standards Indicator tool which may be useful in conducting a situational analysis in your health service.

National Standard of Canada for psychological health and safety in the workplace

www.mentalhealthcommission.ca/English/ focus-areas/workplace

The Standard is a voluntary set of guidelines, tools and resources focused on promoting employees' psychological health and preventing psychological harm due to workplace factors.

SuperFriend

www.superfriend.com.au

SuperFriend is a national mental health promotion foundation focused on creating mentally healthy workplaces to reduce the incidence of suicide and the impact of mental illness on individuals and organisations.

Black Dog Institute

www.blackdoginstitute.org.au

The Black Dog Institute focuses on the development and dissemination of the knowledge needed to understand, prevent and treat the significant mental health challenges facing the world.

Hunter Institute of Mental Health/ Conversations Matter

www.conversationsmatter.com.au

A practical online resource to support safe and effective community discussions about suicide.

Mental Health First Aid Australia

www.mhfa.com.au

Mental Health First Aid (MHFA) Australia is a national not-for-profit health promotion charity focused on mental health training and research.

LivingWorks - Applied Suicide Intervention Skills Training

www.livingworks.com.au/programs/asist

LivingWorks - Applied Suicide Intervention Skills Training (ASIST) is a two-day interactive course in suicide first aid which provides practical training for caregivers seeking to prevent the immediate risk of suicide.

Crisis Intervention and Management Australasia

www.cima.org.au

Crisis Intervention and Management Australasia is a not-for-profit foundation dedicated to the prevention, mitigation and effective management of critical incident stress and trauma for personnel in emergency services, police, corrections, health, welfare and related services.

Doctors' Health Advisory Service

www.dhas.org.au/contact/contact-dhas-in-other- states-territories-and-new-zealand.html

The Doctors' Health Advisory Service aims to ensure that every doctor, dentist, veterinarian or student in these professions has ready access to healthcare. The website lists each state and territory's service details.

Australian Medical Association

www.ama.com.au

The Australian Medical Association (AMA) exists to promote and protect the professional interests of doctors and the health care needs of patients and communities. The AMA advocates on behalf of the medical profession and provides services to support doctors including peer support, mentoring and career counselling.

Australia Health Practitioner Regulation Agency

www.ahpra.gov.au

The Australian Health Practitioner Regulation Agency (AHPRA) is the organisation responsible for the implementation of the National Registration and Accreditation Scheme across Australia.

Allied Health Support Service

www.alliedhealthsupport.com.au

The Allied Health Support Service provides professional development, support, networking and other opportunities to allied health professionals.

Nurse & Midwife Support

1800 667 877
www.nmsupport.org.au

Nurse & Midwife Support is a 24/7 national support service for nurses and midwives providing access to confidential advice and referral.

Nursing and Midwifery Health Program

www.nmhp.org.au

The Nursing and Midwifery Health Program is an independent support service for nurses, midwives and students of nursing and midwifery, in Victoria experiencing health issues related to their mental health, or substance use concerns.

Pharmacists Support Service

www.supportforpharmacists.org.au

The Pharmacists Support Service offers support related to the many demands of being a pharmacist in Australia.

Action plan template

Step 3: Example template for establishing your action plan

Below is an example template you can use to help establish your action plan. An example of a recommended goal has been provided in the first row.

Goal	Raise awareness about mental health
Goal statement	Increase (by 20%) staff and leaders' awareness about good mental health, the signs and symptoms of mental health conditions and supports available by <insert date>.

Action	Timeline	People responsible	Resources required	Review ideas
Action required to achieve goal statement. What is the specific program or initiative?	Is the timeline achievable? Does it allow time for adequate input from staff?	Who will be responsible for implementing this action? Who is responsible for ensuring the work is completed?	What resources are necessary to support the action? Have you allocated time for senior leadership and other staff involvement?	How will you ensure that you are on track to achieve your goal statement? What is working well/not working?
Hold a mental health and wellbeing event during Mental Health Week to raise awareness about good mental health at work, risk factors for poor mental health, the signs and symptoms of mental health conditions and the work being undertaken on the mental health and wellbeing strategy.	April – October <year> (6 months) **Event: 9 October** <year>	• Executive sponsor (senior leader) • Mental health and wellbeing strategy (MHWS) working group • Elected MHWS strategy working group member	• Time allocated for elected MHWS group member, communications manager and champion • Time allocated for senior leader to attend/chair event • Personal experience speaker (FREE) • Relevant mental health and wellbeing collateral for event (FREE) • Survey tools – to measure baseline and post event (FREE) • Time allocated to marketing/IT team • Research and statistics about mental health, links between staff mental health and wellbeing and creating a safety culture (FREE)	• Number of staff attending same as or greater than other events e.g. educational seminars • Increased awareness about the benefits of good mental health (captured through relevant survey) • Increased awareness about individual and organisational responsibility to create a mentally healthy workplace (captured through relevant survey) • Increased awareness about risk factors to mental health at work • Increased awareness of internal and external supports available to staff • Increased understanding about the links between mental health and a safety culture at work

Fillable template for establishing your action plan

Goal	

Goal statement	

Action	Timeline	People responsible	Resources required	Review ideas
Action required to achieve goal statement. What is the specific program or initiative?	Is the timeline achievable? Does it allow time for adequate input from staff?	Who will be responsible for implementing this action? Who is responsible for ensuring the work is completed?	What resources are necessary to support the action? Have you allocated time for senior leadership and other staff involvement?	How will you ensure that you are on track to achieve your goal statement? What is working well/ not working?

Definitions

Anxiety

Anxiety conditions, such as panic disorder, social anxiety, and generalised anxiety, are among the most common mental health conditions in Australia. While each condition has its own specific symptoms, anxiety conditions have a number of features in common including: fear/worry about something bad; avoidance of situations linked to the fear/s; and physical agitation, restlessness, tension and/or panic attacks. While many people may experience stress or anxious feelings that are a common and often normal reaction to a specific event, anxiety conditions are different and are characterised by anxious feelings which are ongoing, continue even after a stressful event, or arise without any particular reason or cause. If left untreated anxiety can be a serious condition that can impact on daily life.

Bowtie risk management

A risk evaluation method that can be used to analyse and demonstrate causal relationships in high risk scenarios. The method takes its name from a diagram that is shaped like a bow tie. A Bowtie diagram gives a visual summary of all plausible accident scenarios that could exist around a certain hazard, and their controls.

Co-design

Co-design is an approach to designing products, services or strategies in a way that actively involves all stakeholders (e.g. employees, partners, customers and end users) in the process, thereby helping to ensure the result meets their needs and is usable. It is an approach which is focused on processes and procedures of design (for instance creating, brainstorming and building) and is not a design style.

Continuous improvement

Continuous improvement is an ongoing effort to improve products, services or processes. It is where processes are constantly evaluated and improved in light of their efficiency, effectiveness and flexibility to ensure they are constantly getting better.

Depression

Depression is a common mental health condition, characterised by prolonged sadness (greater than two weeks), loss of interest or pleasure, feelings of guilt or low self-worth, disturbed sleep or appetite, feelings of tiredness and poor concentration. Depression can be one-off, recurrent or ongoing. Active depression can substantially impair a person's ability to function at work or university or cope with daily life.

Employee Assistance Program

A confidential, external counselling service offered to staff. Employee Assistance Programs (EAPs) aim to assist with the early detection and management of work and/or personal problems, including mental health conditions, which may impact on a worker's performance or wellbeing.

Grand Rounds

Grand Rounds are an integral component of medical education. They present clinical problems in medicine by focusing on current or interesting cases. They are also sometimes used for dissemination of new research information.

Health service

A health service is an organisation providing services that deal with the diagnosis and treatment of disease, and that work to promote, maintain and restore health. A health service can encompass one or more hospitals, community health centres, mental health facilities, allied health services and other health services. It can be thought of as a network of healthcare facilities, usually defined by its business group, geographical area or the community it serves. For the purpose of this document 'health service' excludes both general and private practice, instead looking at more acute health services connected to hospitals.

Integrated approach

An integrated approach defines actions that contribute to creating a mentally healthy workplace. These actions focus on protecting the mental health of staff, promoting wellbeing, and intervening to address mental health conditions, regardless of cause.[34]

Job stress

The International Labour Office defines occupational stress as the harmful physical and emotional responses that occur when job requirements do not match, or exceed, workers' capabilities, resources or needs.

Mental health

Mental health is a positive concept related to the social and emotional wellbeing of people and communities. The concept relates to the enjoyment of life, ability to cope with stress and sadness, the fulfilment of goals and potential, and a sense of connection to others.[35] Throughout this document, the term 'mental health' should be interpreted as a broad concept that includes wellbeing, and exists on a continuum from positive, healthy functioning, to severe impact on functioning.

Mental health condition

A mental health condition is a clinical condition (such as anxiety, depression or post-traumatic stress disorder) diagnosed by a mental health professional that significantly interferes with a person's cognitive, emotional or social abilities (to varying degrees of severity).

Mental health continuum

The mental health continuum reflects the fluid nature of mental health. The continuum ranges from positive, healthy functioning through to symptoms impacting on daily life, to severe conditions that impact on functioning. People can move back and forth along this continuum in response to different stressors and experiences over time.

Mental health professionals

A term that refers to qualified and registered health and mental health practitioners such as GPs, psychiatrists, psychologists, mental health nurses, mental health occupational therapists and social workers who are trained in the assessment and management of mental health conditions. It can also include emerging workforces such as mental health peer workers.

Mentally healthy workplace

A workplace that actively minimises risks to mental health, promotes positive mental health and wellbeing, is free of stigma and discrimination, and supports the recovery of staff with mental health conditions, for the benefit of the worker, organisation and community.

Peer support

Peer support is an avenue of staff support provided by a trained group of fellow staff, as part of a formalised peer support program. The relationship is not intended to be a therapeutic one. It is a contact, support and referral service with an emphasis on brief, practical interventions.

Peer support program

A peer support program is a formalised program or structure which enables and provides access to peer support in the workplace.

People Matter Survey

The People Matter Survey is an employee opinion survey run by a number of state public sector commissions. It contains questions about employee perceptions of the way the values and employment principles are demonstrated within the organisation by leaders, managers and colleagues, and measures employee satisfaction and engagement.

Pulse survey

A survey conducted on a periodic basis that measures an organisation's work environment and overall performance. Pulse surveys help organisations evaluate their employee satisfaction, attitude and productivity.

Reasonable adjustments

Reasonable adjustments are changes to a job role or workplace that help someone with a mental health condition to keep working, or return to the workplace if they've taken time off. Under the Disability Discrimination Act 1992, employers must make reasonable adjustments to support people with a disability or a mental health condition, provided the person is able to fulfil the core requirements of the job.

Self-harm

Deliberate injury or harm to oneself. It is usually done in secret and on parts of the body that may not be seen by others.

Staff

For the purposes of this guide, the term staff applies to anyone working for your health service, including employees, volunteers, locums and contractors.

Stress

A response to an event or situation which can be positive or negative. Stress is common in daily life and may be associated with work, family or personal relationships. It usually means that something is happening that's challenging our coping mechanisms and affecting how we are thinking and feeling.

Suicide

The act of intentionally causing one's own death.

Suicide prevention

An umbrella term for targeted efforts to reduce the incidence of suicide.

Stigma

Stigma marks a person as 'different'. The World Health Organization (2001) defines stigma as 'a mark of shame, disgrace or disapproval which results in a person being rejected, discriminated against, and excluded from participating in a number of different areas of society.'[36]

Treatment

An intervention delivered by a mental health professional to assist someone with a mental health condition. Treatment can take many forms, including psychological and/or medical, and exists alongside workplace support and personal coping strategies.

Wellbeing

A state of being comfortable, healthy or happy – to feel good and function well. Broader than just mental health, a state of wellbeing is where a person is considered to be flourishing in both mental and physical health.

Work health and safety

Work health and safety (WHS) is the discipline concerned with protecting the health and safety of all people in the workplace from exposure to hazards and risks resulting from work activities. Work health and safety legislation requires that employers take steps to protect staff against risks to their physical and mental health. The term WHS is used broadly and includes the occupational health and safety (OHS) model which exists in some Australian jurisdictions.

Workplace culture

A system of shared assumptions, values and beliefs, which influences, and is influenced by, how people behave in organisations. Often known as 'the way things are done around here'.

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