

4TH EDITION  
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## Mental Health and Mental Well-being Policy

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RESPONSIBLE CARE

# Mental Health and Mental Well-being Policy

## Foreword

Mental health is one of the greatest current leadership challenges impacting on all public and private sectors. I therefore very much welcome the addition of this signpost guide to CIA's Health & Well-being Strategy Series under the industry's Responsible Care® initiative. In our position as employers, I firmly believe that we are uniquely placed to make the most positive contribution to our employees' health and well-being.

These guidelines for developing and implementing a 'Mental health and Mental Well-being Policy' explore the legal duties, costs arising from employee mental health conditions on our businesses and reasons for action. It also looks at developing a policy and the aspects to consider and tips for making it a success. The emphasis is very much on helping and supporting individuals.

Mental health and wellbeing have remained a top priority for CIA members, often being linked to managing the COVID-19 pandemic. Organisations have evaluated the many potential issues and needs of a range of different types of workers, those at home, hybrid, and on-site working, and now have tackled the challenge for progressing a systematic, phased, safe and healthy returns to work.

We have heard many experiences from members, with good suggestions for promoting leadership in Mental Health, building flexibility within your arrangements, and developing compassion and understanding in leaders. We have also heard how important it is to look out for each other's mental health, and have those informal conversations, helped, and supported by core value statements to transition to this new future way of working.

I thank the CIA Team behind the signposting guide and also the many CIA members who I know have contributed to this. On behalf of CIA, I would also like to acknowledge the input from Annette Bell and Susan Gimson, Health & Work Specialists with NHS Scotland in proof-reading the first edition of the members' signposting guide. I'm sure you'll join me in thanking everyone involved.

The CIA recommends that this signpost guide be used in conjunction with the '**CIA Mental Health and Mental Well-being Leading Indicator Tool and Scorecard**' which has been written to accompany the guide as an appendix (also available on our website in excel format). This proactive tool allows users to check and give an 'indicator' score for their own mental health programme against a number of elements and identify areas for improvement.

The CIA Team hopes this updated version of the signpost guide will benefit your organisation by helping you to be better prepared in meeting this challenge. We also welcome any feedback on the document.

The chemical industry is an industry that matters.

A handwritten signature in black ink, appearing to read 'S Elliott', written in a cursive style.

**Steve Elliott**  
Chief Executive, Chemical  
Industries Association



## Do you have a **MENTAL HEALTH AND MENTAL WELL-BEING POLICY?**

If **NO**, your company should consider having one – these high level guidelines aim to help you develop a policy to manage, support and increase your individual and organisational resilience.

If **YES**, please check that consideration has been given to the aspects covered here.

**You should develop your policy in a systematic way, ensuring high level leadership to implement recommended standards, raise awareness, reduce stigma, and provide support and information to all individuals in your organisation. Employers' providing support towards mental health at work leads to a more productive, loyal and engaged workforce who strive to make their businesses succeed.**

**It is fundamental that health, safety, and well-being considerations form the core of the Mental Health and Mental Well-being Policy.** As with other workplace health policies, the application of this policy should be based on these considerations.

Mental health is on a continuum. Every day we all move backwards and forwards along a mind spectrum, with a state of

positive mental health (well-being) at one end and poor mental health at the other. It is therefore vital for businesses to work across the mental health continuum to achieve sustainable health workplaces. By understanding the signs of poor mental health and mental illness, businesses can provide employees with information on available support which in turn will have a positive impact on employee and company resilience.

Tackling mental health issues within organisations as part of health and well-being leadership initiatives, is challenging, yet CIA believes these challenges are not insurmountable. Through the introduction of a Mental health and Mental well-being policy, businesses can make 'inroads' to change.

*World Health Organization (WHO) defines Mental Health as:*

'A state of well-being in which the individual realises his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to contribute to their community.'

*...and a Healthy Workplace as:*

'One in which workers and managers collaborate to use a continual improvement process to protect and promote the health, safety and well-being of workers and the sustainability of the workplace'

'It is encouraging to see an association such as Chemical Industries Association, addressing mental health and supporting its members to make real changes to achieve sustainable healthy workplaces.'

*NHS Health Scotland*

'There is increasing recognition at all levels of society about the importance of promoting positive mental health. Leading employers are taking action to support their workforce recognising the benefits to individuals, the wider community and their own companies' performance.

This guide, produced by the Chemical Industries Association, is a valuable contribution to understanding the issues and how you can make a difference in your workplace.'

*Peter Brown, Former Director Health and Wellbeing Programme, Health & Safety Executive*



## Legal duties

Businesses and organisations have a duty of care for employees under health and safety law – both statute and common law; this includes Mental Health. The Health and Safety at Work etc. Act (Duty of Care); Management of Health and Safety at Work Regulations (Risk Assessment) and Equality Act 2010 (Disability Discrimination) all cover the legal duties related to Mental Health. Other requirements such as a duty to protect employees from harassment; working time and consultation with employees and safety representatives are also relevant when developing a workplace policy.

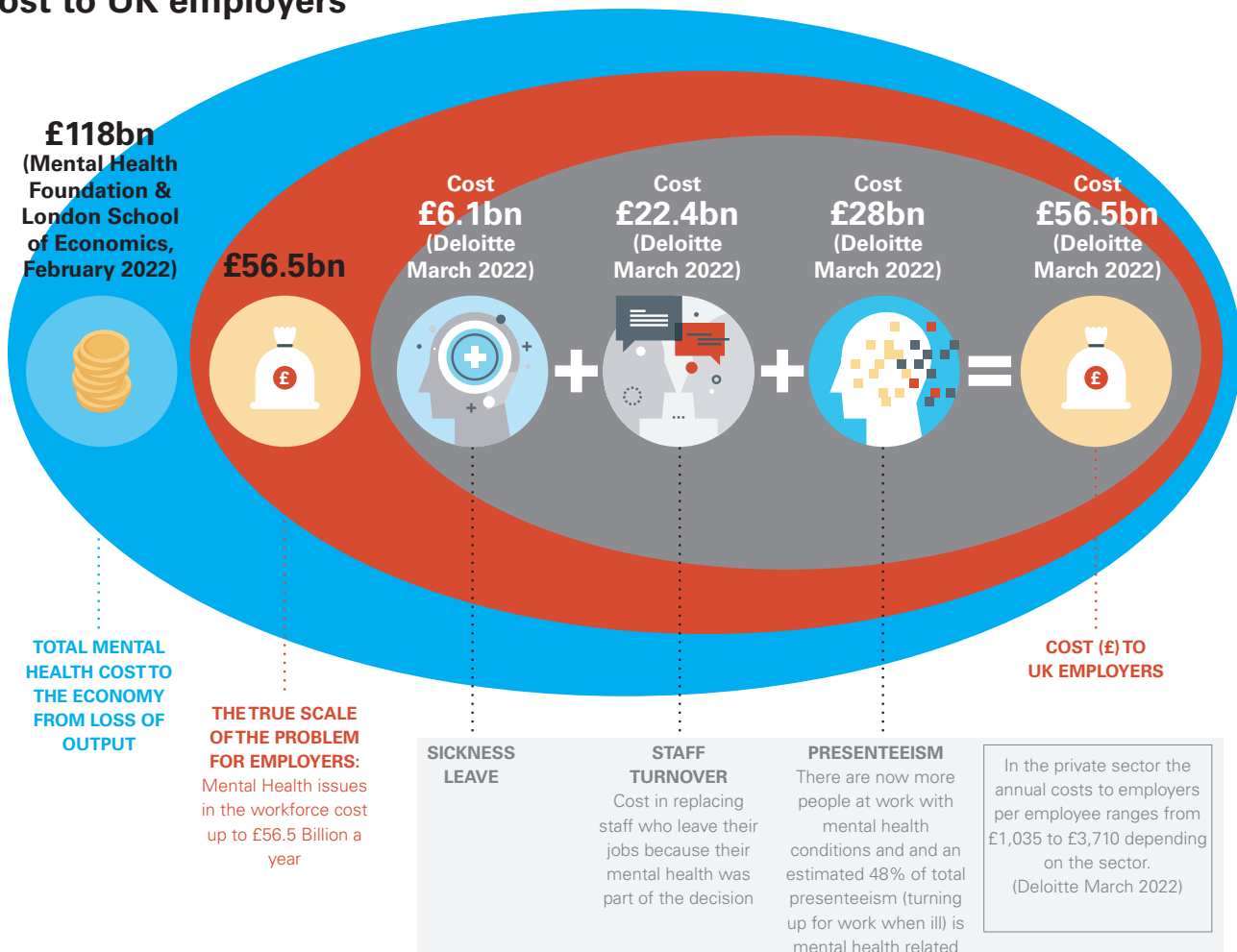
### The cost

In addition to legislative requirements, there is also a robust economic case 'for action'. Reports from DeLoitte (2017 and 2020) and toolkit from Business in the Community in partnership with Public Health England (2017) identified the scale of the problem for

both employers and employees in **financial, organisational and social terms**.

This is considerable in the context that each year mental health conditions are reported to affect **1 in 4 adults** and **1 in 10 children** (source: NHS England). In terms of cost to the UK economy, the Mental Health Foundation and London School of Economics estimates this to be **£118bn** (February 2022). Regarding costs to employers from poor mental health (private and public sectors), a study published by Deloitte in March 2022 estimates this to be **£56.5 billion** in 2020-2021 (£46bn private sector; £10.5bn public sector). This cost has increased from £45 billion in Deloitte's 2019 study, and Deloitte equates this to 2.6% of the UK's annual Gross Domestic Product. The cost to employers comprises costs arising from absenteeism, presenteeism and staff turnover. For the chemicals and pharmaceutical sectors, it is more than probable that this figure is even higher due to the required technical knowledge within job roles.

## Cost to UK employers





Considering the above, there is a case for action/intervention. Evidence is available to show that early implementation of supporting activities is not only better for employees, but also in terms of being the best economic approach for the business/organisation. This is highlighted in the Deloitte study (2022) with an updated return on investment (ROI) analysis showing a complex but positive case for employers to invest in the staff well-being, with a return of £5.30 for every £1 spent (just over 5:1).

The original Deloitte study *Mental Health and Employers* was carried out to support the Lord Dennis Stevenson and Paul Farmer 2017 Review *Thriving at Work – An independent review of mental health and employers*. Additional figures can also be found in the document *Mental health at work: the business costs 10 years on* (Centre for Mental Health, 2017). Updated figures are contained in ‘Mental health and employers – Refreshing the case for investment’, Deloitte 2020; and ‘Mental Health and employers- the case for investment pandemic and beyond’, Deloitte 2022). Annual reports on Mental Health from Business in the Community (BITC) are also available (October 2018, 2019, 2020). These pieces of work set the current scene identifying the main issues as:

- Cost to employers in terms of both turnover, presenteeism and absences;
- The scale of the problem for employees; and
- Employee’s fear of disclosing they have an issue (as it impacts career progression and creates stigma).

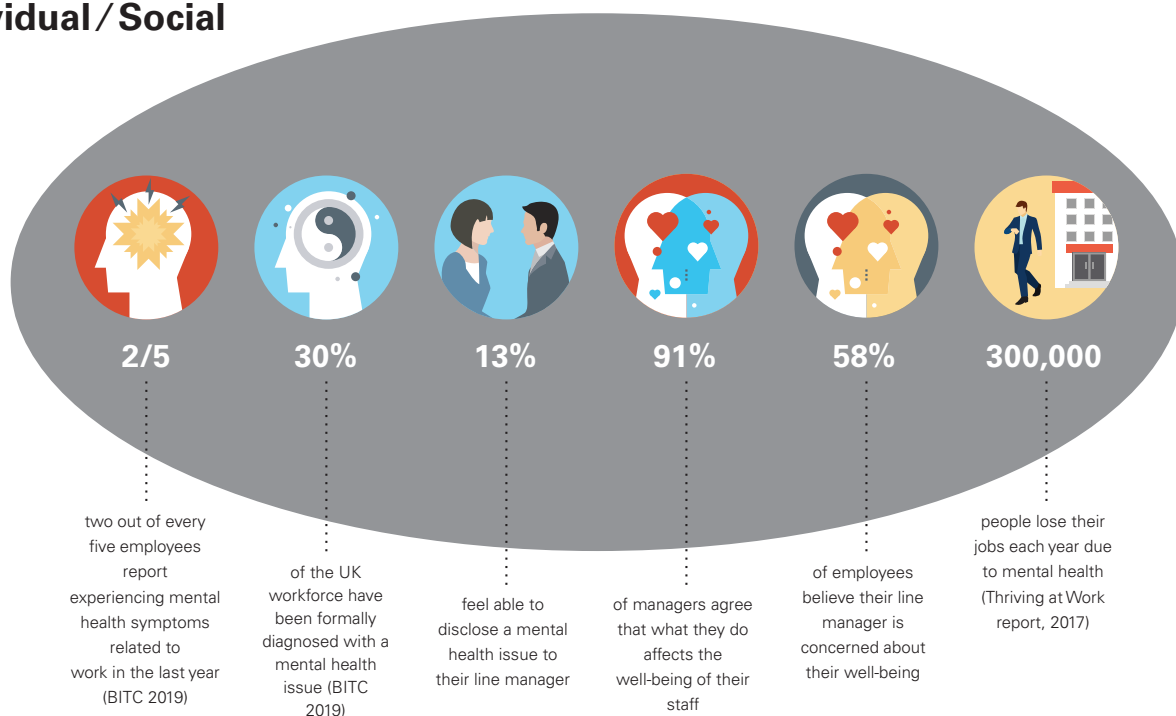
In addition there is a general lack of understanding of mental health issues for all; a lack of high quality training for managers particularly line managers; a disconnect between what senior leaders believe and what actual support is provided; and that financial wellbeing is increasingly a cause for concern with a causal link between financial wellbeing and mental health.

The reports highlight that it is those companies that are taking bold innovative action for good mental health at work that are reaping the benefits through improving staff recruitment and retention.

The HSE has also released its stress, anxiety, and depression statistics for 2018, 2019, 2020 and 2021.

The infographic on the previous page and below is our quick ‘snapshot’ of the headlines from the study and associated reports (see high-level signposted references and tools available sections).

## Individual / Social



## Developing your policy

A positive leadership culture and managing all aspects of its activities to provide a high level of protection is an integral part of our commitment to the chemical industry's Responsible Care® principles. The emphasis of your Policy needs to be on helping and supporting individuals through health leadership from the top down, allowing confidential self-referral as needed. It should be designed to ensure problems are dealt with effectively, consistently and early on in the process.

**Your Mental Health and Mental Well-being Policy** content should take into account relevant legislation, and we would encourage you to carry out a review of available guidance. In terms of its framing, we recommend to:

- Do what's right for your business – whilst each business environment is different it is still important to implement a mental health policy or plan (this can be something specific or a more integrated approach) and this should be adequate and appropriate for your circumstances;
- Take time in planning and implementing the policy, making sure to involve employees and trade union safety representatives;
- Managers should receive training on working with the policy, to include practical help on how to manage having conversations with staff, what to say or do when someone discloses a mental health issue and how to have difficult conversations;
- Make sure you include an education programme for both line managers and individuals that covers mental health awareness, the signs to look-out for, information on the support available to manage mental health and where to get help when people are struggling;
- Foster a culture that is open and stigma free to encourage people to talk about mental health;
- Provide employees with good working conditions, good work-life balance and effective people management skills; and
- Monitor employee mental health and well-being on a routine basis.

Remember raising awareness and providing education for mental health is never a substitute for appropriate competent medical professionals. You should ensure clear boundaries are in place with respect to the roles of management, and also trained persons so that they are aware of when to refer to the appropriate professional support available.

Useful checklists, tools, links, resources and items to consider when drawing up a policy on Mental Health are provided by the Health and Safety Executive on their website work related stress

pages; see 'High-level signposted references' and 'Tools' sections for web link. An example template is provided on their website.

### How do I go about developing a policy or checking on what my company/organisation does?

The visual schematic provided in these high-level guidelines, which uses the Health and Safety Executive's (HSE) 'Plan Do Check Act' model in HSG 65 as its basis, provides tips for consideration when developing/improving your Policy. High level signposting to key information sources is also provided below. Remember that these suggestions are pointers for you to evaluate and does not constitute a definitive list, you should include anything additional as appropriate from your assessments or organisational needs.



#### High-level signposted references

##### **Thriving at Work – A Review of mental health and employers:**

An independent review by Lord Dennis Stevenson and Paul Farmer. [https://assets.publishing.service.gov.uk/government/uploads/](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/658145/thriving-at-work-stevenson-farmer-review.pdf)

[system/uploads/attachment\\_data/file/658145/thriving-at-work-stevenson-farmer-review.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/658145/thriving-at-work-stevenson-farmer-review.pdf)

##### **DeLoitte (October 2017) – Mental Health and Employers:**

The case for investment supporting study for the independent review. <https://www2.deloitte.com/content/dam/Deloitte/uk/Documents/public-sector/deloitte-uk-mental-health-employers-monitor-deloitte-oct-2017.pdf>; **DeLoitte (January 2020)** <https://www2.deloitte.com/uk/en/pages/consulting/articles/mental-health-and-employers-refreshing-the-case-for-investment.html>; **and**

**DeLoitte (March 2022)** <https://www2.deloitte.com/uk/en/pages/press-releases/articles/poor-mental-health-costs-uk-employers-up-to-pound-56-billion-a-year.html>

##### **Mental Health Foundation and London School of Economics (March 2022) –**

The economic case for investing in the prevention of mental health conditions in the UK <https://www.mentalhealth.org.uk/explore-mental-health/publications/economic-case-investing-prevention-mental-health-conditions-UK>

**Mental Health – the business costs 10 years on:** Centre for Mental Health. <https://www.centreformentalhealth.org.uk/publications/mental-health-work-business-costs-ten-years>

**Mind Disability Discrimination, 2017:** A general guide on how you are protected from discrimination under the Equality Act and what your rights are (England and Wales) [https://www.mind.org.uk/information-support/legal-rights/disability-discrimination/#.Ww\\_DRe4vzIU](https://www.mind.org.uk/information-support/legal-rights/disability-discrimination/#.Ww_DRe4vzIU)

*(continued overleaf)*



**Mind** – How to implement the thriving at work report <https://www.mind.org.uk/media-a/4659/how-to-implement-the-thriving-at-work-mental-health-standards-final-guide-online.pdf>

**ACAS (Advisory, Conciliation and Arbitration Service):** Health and Wellbeing Webpages <https://www.acas.org.uk/health-and-wellbeing>

**The CBI Front of Mind Report:** prioritising health and wellbeing in your workplace <https://www.cbi.org.uk/articles/front-of-mind-prioritising-health-and-wellbeing-in-your-workplace/>

**WHO Mental Health:** [https://www.who.int/health-topics/mental-health#tab=tab\\_1](https://www.who.int/health-topics/mental-health#tab=tab_1)

**HSE Managing work related stress as part of a prevention culture:** [https://books.hse.gov.uk/gempdf/Managing\\_WRS\\_as\\_part\\_of\\_a\\_prevention\\_culture.pdf](https://books.hse.gov.uk/gempdf/Managing_WRS_as_part_of_a_prevention_culture.pdf) and **HSE website** <https://www.hse.gov.uk/stress/>

**World Mental Health Day – 10 October:** <https://www.who.int/campaigns/world-mental-health-day> and <https://www.mind.org.uk/get-involved/world-mental-health-day/>

**Responsible Care® Guiding Principles:** <https://www.cia.org.uk/Policy/Health-and-Safety/Responsible-Care>

**ISO standard 45003:** managing Psychological Health in the workplace <https://www.bsigroup.com/en-GB/iso-45003/>



## Tools

**HSE Management Standards:** These look at work design across six key areas: demands, control, support, relationships, role, and change. [www.hse.gov.uk/stress/](http://www.hse.gov.uk/stress/)  
Also *Tackling work related stress using the management standards approach – A step by step workbook* [www.hse.gov.uk/pubns/wbk01.htm](http://www.hse.gov.uk/pubns/wbk01.htm)

**HSE Stress Indicator Tool** and **Talking Toolkit** to start a conversation with your workers and help prevent work-related stress in your organisation. Also available to purchase on the HSE website to assess attitudes and increase opportunities to talk both formally and informally are the **HSE's Safety Climate Tool (SCT); Safe Deal Playing Cards** and **Healthy Deal Playing Cards** [www.hse.gov.uk/stress/assets/docs/indicatortool.pdf](http://www.hse.gov.uk/stress/assets/docs/indicatortool.pdf)  
[www.hse.gov.uk/stress/assets/docs/stress-talking-toolkit.pdf](http://www.hse.gov.uk/stress/assets/docs/stress-talking-toolkit.pdf)

**HSE Stress Management Competency Indicator Tool:** a series of tools to allow managers to assess whether they currently have the behaviours identified as effective for preventing and reducing stress at work; its aim is to help managers reflect on their behaviour and management style. [www.hse.gov.uk/stress/mcit.pdf](http://www.hse.gov.uk/stress/mcit.pdf)

**Business in the Community – The Mental Health Toolkit – 8 steps:** to help every organisation support the mental health and well-being of its employees. Its aim is to help employers take positive actions to build a culture that champions good mental health and provides a greater understanding of how to help those who need more support. Many other toolkits are also available on the BIC website related to musculoskeletal health; drugs, alcohol and tobacco; physical activity, healthy eating and healthy weight; sleep and recovery. <https://wellbeing.bitc.org.uk/all-resources/toolkits/mental-health-employers-toolkit>

The **Mental Health Report 2018: Seizing the momentum;** **Mental Health Report 2019: Time to take ownership;** **Mental Health at Work 2020: key findings** and their **Work Well** models. <https://wellbeing.bitc.org.uk/all-resources/research-articles/mental-health-work-report-2018>  
<https://www.bitc.org.uk/report/mental-health-at-work-2019-time-to-take-ownership/>  
<https://wellbeing.bitc.org.uk/workwellmodel>  
<https://www.bitc.org.uk/report/mhaw2020/>

**Public Health Wales – Mental Health in Wales** Strategy for mental health and well-being; reports and links: [www.wales.nhs.uk/healthtopics/conditions/mentalhealth](http://www.wales.nhs.uk/healthtopics/conditions/mentalhealth)

**Public Health Scotland: Mental Health and Wellbeing** <https://www.publichealthscotland.scot/>

**Better Health – Every Mind Matters Campaign:** <https://www.nhs.uk/every-mind-matters/>

**Resource Centre:** <https://campaignresources.phe.gov.uk/resources/campaigns/111-better-health---every-mind-matters>

**For companies:** you can signpost this all against the campaign key message of **'what works for me'** and link to the Digital Support which contains: The Mind Plan; Covid-19 Hub; Tips Info on Anxiety; Stress; Low Mood and Sleep and self-help activities e.g., breathing, CBT Posters, email banners, tweets, mind plans, comms and leadership training. All available on the PHE Campaign Resource Centre

**NHS Choices:** Tips and advice to boost mental health and living well. <https://www.nhs.uk/live-well/>  
<https://www.nhs.uk/conditions/stress-anxiety-depression/>

*(continued overleaf)*

### **ACAS (Advisory, Conciliation and Arbitration Service):**

Supporting mental health in the workplace- the law, information, training and support <https://www.acas.org.uk/supporting-mental-health-workplace>

### **CIA Sustainable Health Metrics Indicator Tool with relevant good practice (2018):**

Part of CIA's Health and Well-being Leadership Strategy Series with the following key areas: culture; organisation; hazards and exposure control; exposure monitoring; performance and well-being; contains a collection of members' leading relevant good practice available free to members at <https://www.cia.org.uk/Responsible-care/Networks/Health-network?folderId=122&view=gridview&pageSize=10> and for non-members <https://www.cia.org.uk/Shop#!curr/GBP/cat975bdbf6-ee03-e711-80cf-0050568729dd/page/1/sort0>

### **Mental Health Foundation: Information, tools and support**

[www.mentalhealth.org](http://www.mentalhealth.org)

**Return to Work: The IGLOo Model** <https://www.mentalhealthatwork.org.uk/resource/guide-for-employees-what-can-you-do-to-make-sure-you-thrive-on-your-return-to-work?read=more>

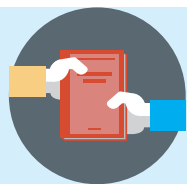
**MIND/ACAS/BITC Returning to the workplace after the COVID-19 lockdown – toolkits** [https://www.som.org.uk/Returning\\_to\\_the\\_workplace\\_COVID-19\\_toolkit\\_FINAL.pdf](https://www.som.org.uk/Returning_to_the_workplace_COVID-19_toolkit_FINAL.pdf)

**MIND:** Contains information, support, section with tools, resources and training materials for the workplace. <https://www.mind.org.uk/workplace/mental-health-at-work/> and <https://www.mind.org.uk/workplace/mental-health-at-work-website/>

**YouthinMind:** Specifically, for young people, a resource to find books, websites, services and helplines that are relevant to you. <http://youthinmind.info/py/yiminfo/>

**Samaritans:** Business section with advice information and training services. <https://www.samaritans.org/> and <https://www.samaritans.org/how-we-can-help/workplace/>

**'Making a Commitment:** The Mental Health at Work Commitment (Mind) is a simple framework that is based on the Thriving at Work standards, and builds on knowledge and existing pledges available. <https://www.mentalhealthatwork.org.uk/commitment/> for organisations with a more global footprint. The Global Business Collaboration for Better Workplace Mental Health <https://betterworkplacemh.com/pledge/>



## **Developing awareness, understanding and competence**

The Health and Safety Executive (HSE) has updated its First Aid guidance to clarify that when carrying out your First Aid 'needs assessment' you should also consider mental health alongside physical health

risks. Once you have completed this assessment, although not yet a mandatory requirement, you may decide that it would be beneficial to have additional personnel trained to identify, understand the symptoms, and support someone who might be experiencing a mental health issue.

Developing mental health awareness and competency among employees is a key recommended action for employers, along with making information, tools and support available and accessible.

### **Leaders, Managers and Supervisors**

Making sure that Leaders understand the impact of mental health at work, how they implement the policy, its procedures and processes and what competent support is available is also needed. It is important to:

– Have an organisation that sets the tone for mental health, with concerns high on the leadership Agenda. One which fosters a positive culture, reducing stigma and promoting open conversations about good mental health and healthy behaviours in which employees feel comfortable talking about their mental health when in the workplace.

- See that senior leaders understand and are committed to health improvement. They lead by example; relating with empathy and compassion; are actively involved in health activities and programmes; creating psychologically safe places to work. The challenges of the recent pandemic should be seen as an opportunity to learn from experience.'
- There is an understanding by all that mental health operates on a continuum and is an integral part of health, along with physical health.
- An understanding that mental health issues are not restricted to the workplace but can be caused by many other outside factors not related to the working environment (such as bereavement, illness, financial worries or family issues), and that these can affect you whilst at work. Individuals can be affected differently within the workforce ( e.g. young people; those who care for others; families of key workers; and employees from minority groups).
- Awareness that as an employer you are ideally placed in the workplace to play a vital role during these difficult times, by offering support, tools, information, and resources to help individuals with their own mental health and well-being whatever the cause of poor mental health.
- Promoting the understanding that as individuals we also play a key role in our own health resilience; encouraging personal responsibility and action for maintaining your mental health and well-being.

*(continued overleaf)*



You should also ensure managers, supervisors and leaders have additional training to:

- Know how to implement the policy, procedures and support effectively; and
- Develop competencies to fully support staff including understanding the impact of work on mental health.
- Develop the confidence to know what to say and do when somebody discloses mental health issues; particularly managing difficult conversations and situations with vulnerable people.
- Clearly understand role boundaries, and when to seek competent support (particularly those with additional training such as Mental Health First Aid).

### ***Mental Health Training and Awareness***

There are many courses available from a range of providers that cover different levels of training, depth of awareness and competence. The level and competencies that you should develop are individual to your organisational needs and the exact requirements for these can often be determined from your risk assessment. The identified requirements can then be addressed within your programme plan and appropriate competent support services for employees provided. It should be noted that it is likely that additional external professional mental health provision will be needed to support your organisation; this is in addition to having in place trained managers, awareness programmes and any existing on site occupational health resources.

**Remember raising awareness and providing education for mental health is never a substitute for appropriate competent medical professionals.** You should ensure clear boundaries are in place with respect to the roles of management and trained persons so that they are aware of when to refer to the appropriate professional support available.

### ***Mental Health First Aider (MHFA)***

You may also find it beneficial to have specific training for a group of employees, and many of our members have considered having an additional role of a Mental Health First Aider (MHFA). They are in place within the organisation to recognise the signs and symptoms of mental ill health, provide help on a first aid basis, and guide people to the appropriate support services.

The MHFA is a relatively new role and qualification, which is being enhanced over time to reflect current workplace experience and practice. This will mean existing guidance will be strengthened on the boundaries and role of the Mental Health First Aider, plus guidance for those trained as Mental Health Aware (Half Day) and as Mental Health First Aid Champions (One Day).

Refresher courses will be made available, and re-qualification periods similar to those for the First Aid at Work.

Mental Health First Aid Training (MHFA) is government signposted mental health awareness training, which is available from many providers across the country. A 'Summary of the evidence on the effectiveness of MHFA training in the workplace' is available on the HSE website at <https://www.hse.gov.uk/research/rrhtm/rr1135.htm>

The CIA does not endorse any particular course provider or organisation. There are many organisations that provide support, awareness and training appropriate to your needs, some of which are listed in the 'High-level signposted references' and 'Tools'.



## ASPECTS for consideration in your policy

Tackling mental health issues within organisations as part of health and well-being leadership initiatives is challenging, yet CIA believes these challenges are not insurmountable. Challenges exist because mental health is not a tangible physical health disease (in the sense of a typical workplace disease such as for example skin and lung diseases), nor is it solely attributable to the workplace and there is also confusion on its definition. There is no set prescriptive method for companies to follow as each company will address Mental Health and Mental Well-being according to their business needs.

A number of high-level aspects to consider covering policy developments are elaborated.

### **Mental Health Definitions**

**Mental Health:** 'A person's condition with regard to their psychological and emotional well-being.'

(Oxford Dictionary – Online)

**Mental Disorders:** 'A wide range of mental and behavioural disorders described in the International Statistical Classification of Diseases (ICD) and Related Health Problems – include depression, bipolar affective disorder, schizophrenia, anxiety disorders, dementia, substance use disorders, and intellectual disabilities and developmental and behavioural disorders that typically arise from childhood through adolescence, including autism.'

(Oxford Dictionary – Online)

**Mental Health** 'is not just the absence of mental disorder. It is defined as a state of well-being in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.'

(World Health Organisation)

Mental health crosses all aspects of our lives, and is related to our ability to enjoy life and in fact cope with change to deal with life's challenges.

Mental well-being describes your mental state, how well you are coping with life and how you are feeling. It is a dynamic state subject to change from one day to the next, depending on internal and external influences. If you have good mental well-being you are feeling confident in yourself, have positive self-esteem, are able to engage with others and maintain healthy relationships. You are able to cope with the stresses of daily life, to work productively, have a sense of belonging and in times of change, be able to manage and adapt to any new challenges.

It is often helpful to think of mental health as a continuum, with quadrants representing different times and situations that could affect an individual both internally and externally. As individuals we are affected differently by life's challenges. Everyone at some point in their life will likely experience some more serious issues, whether or not they have a diagnosed mental health illness or disorder. Mental health issues are not restricted to the workplace but can be caused by many other outside factors not related to the working environment (such as bereavement, illness, financial worries or family issues), and that these can affect you whilst at work. It is good to remember that individuals who have a diagnosis of mental illness can have positive mental health, be coping well and make a significant contribution at work.

Mental health an integral part of health, along with physical health. Poor mental health can contribute to numerous physical problems or exacerbate pre-existing ones. e.g. cardiovascular disorders, gastrointestinal disorders, etc.

A helpful model to reference is *The Mental Health Continuum (Health Promotion: Models and Values R.S Downie et al; Mental Health Promotion: Paradigms and Practice Keith Tudor 1996)*

### **Framing your policy and programme**

The policy must be driven by health, safety and well-being and a company's duty of care to protect others. It should set out what it is trying to achieve. The emphasis needs to be on helping and supporting individuals through health leadership, fostering an open culture that is stigma free, raising awareness, giving people strategies and tools to cope, and communicating what resources are available to help (allowing self-referral as needed). Your policy should take into account legislation and a review of available guidance and tools together with providing details of support organisations where deemed necessary. Most importantly



do what's right for your business and take time in planning and implementing the policy making sure to involve employees and trade union safety representatives. As an employer you are ideally placed in the workplace to play a vital role by offering support, tools, information, and resources to help individuals with their own mental health and well-being. Supporting employees to play a key role in their own health resilience; to facilitate their capability in taking personal responsibility and action for maintenance of their own mental health and well-being. As an employer, it is imperative to keep in mind that you may be asking for (and holding on record) sensitive information from individuals. In certain circumstances there may be a legal requirement to report an issue, so it is also important not to make a promise that you are unable to meet.

**Leadership, Supervisors' and Line Managers' role**

Senior Managers driving health leadership, setting objectives, expectations and monitoring performance is an important role in fostering a positive culture within the organisation. All Supervisors and Line Managers should be supported and trained in order to manage their people effectively, developing an open culture that encourages positive mental health and well-being. All leaders are best placed to know their people well, pick up the signs that something is wrong, assess the organisational culture or issues that are affecting them and build confidence and capability in their teams. Remember to define roles clearly and set boundaries, so that individuals are fully aware of when to refer to more specialist support. Make sure your organisation is not contributing to poor mental health (through stress, lack of support or reasonable adjustments) by its work practices. Ensure leaders are supported with practical training for confidently having the right conversations with individuals, and are familiar with the practices and processes within the policy to support their staff and refer when needed.

**Occupational Health's (OH's) role**

OH's role is advising the managers on the fitness of an employee to work as well as providing general advice to the company. There are important protocols for OH to adhere to when disclosing medical information to an employer including Access to Medical Reports Act (1988). Typically this allows the employee to withhold or give consent for the employer to receive information from OH. Medical information is considered to be Sensitive Data under the Data Protection Act (2018) so there are important principles around confidentiality and accuracy to be adhered to. Occupational Health may make recommendations to the company around proposed working adjustments and restrictions for due consideration by the company. Medical physicians are governed by the General Medical Council (GMC); OH Nurses are governed by Faculty of Occupational

Medicine (FOM). In general, all OH services should be SEQOHS registered (Safe, Effective, Quality, Occupational Health Service). An organisation may need to contract in aspects of their competent OH provision for routine exposure monitoring, and often include other resources such as physiotherapy, counselling and an Employee Assistance Programme.

**Human Resources (HR's) role**

HR's role is to ensure the company Mental Health policy and procedures are understood by all employees and advise managers and employees on appropriate support when issues arise. HR is often a contact point for employees who are suffering health issues and by managers/colleagues concerned about the health of other individuals. Such cases require sensitive handling. Increasingly, health and well-being are key enablers for, and also can be barriers to, effective employee engagement. Both at the collective and individual level, the health and well-being of workers is now high on the HR agenda and workplace health and well-being initiatives, including support provisions where necessary, have become increasingly important elements of employment policy.



**Communication between OH and HR**

Responsibilities for the communication of sensitive information by OH and HR should be defined. This should include aspects such as when to disclose and to whom, what can be disclosed etc.

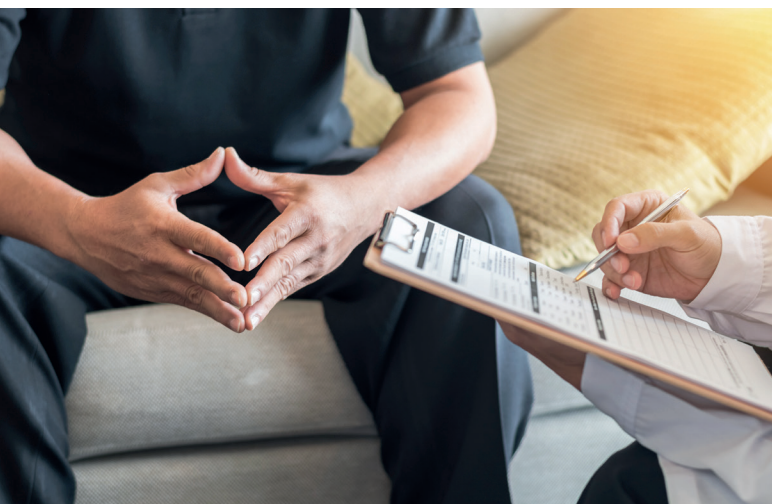
**Health conditions and medication**

As with physical health conditions, organisations should be ready to make necessary adjustments to help people with mental health issues and have effective policies and procedures in place that promote and support the attainment and maintenance of positive

mental health e.g. flexible working, work adjustments, work life balance, grievance policies.

Established support mechanisms and procedures for managing return to work are used, with well supported management procedures for recurring conditions of specific diagnosis (where some absence will be expected from time-to-time).

There are health conditions that may cause impairment (not fit for work, or fit for work with restrictions). Many prescription drugs can impair a person's ability to work safely including impacting on mental health well-being, so asking the employee to present evidence from their GP of a prescription should be standard practice to avoid any potential disciplinary action under an organisation's drug and alcohol policy – more information available in *CIA Guidelines for Developing and Implementing Drug and Alcohol Policies*. Many companies use employee self-notification forms for this process.



### **Regular review ('reality check')**

The policy should be regularly reviewed for a number of reasons:

- To check it stands up on the current legal front;
- To measure policy performance and investigate the results obtained; and
- Assess what actions have been taken and if they are suitable and sufficient.

It is also useful here to continue dialogue with any working groups that have been set up to implement the policy, such as employee and union representatives, and obtain feedback from individuals as to their experience of the policy process. To see a full picture, it is not sufficient to only review the paperwork. If a regular review is carried out, the policy and process can be updated and enhanced to be maintained as fit for purpose.

Make sure the process doesn't end here and start again with a revised plan as part of your improvement programme.

**PLAN** | **DO** | **CHECK** | **ACT** Cycle.



## Developing **CORE STANDARDS**

It has been recommended in a review for government (Stevenson & Farmer Review *Thriving at Work* 2017) that all employers, regardless of workplace type, industry or size should adopt a set of mental health core standards to provide a framework for workplace mental health. These have been designed in a way that they can be tailored to suit a variety of workplaces and be implemented by even the smallest employers. The Review recommends employers should adopt the following standards:

### **MENTAL HEALTH 'CORE STANDARDS'**

- **Produce, implement and communicate a mental health at work plan** that promotes good mental health of all employees and outlines the support available for those who may need it.
- **Develop mental health awareness among employees** by making information, tools and support accessible.
- **Encourage open conversations about mental health and the support available when employees are struggling**, during the recruitment process and at regular intervals throughout employment, offer appropriate workplace adjustments to employees who require them.
- **Provide employees with good working conditions and ensure they have a healthy work life balance and opportunities for development.**
- **Promote effective people management** to ensure all employees have a regular conversation about their health and well-being with their line manager, supervisor or organisational leader and train and support line managers and supervisors in effective management practices.
- **Routinely monitor employee mental health and well-being** by understanding available data, talking to employees, and understanding risk factors.

Additionally, it is recommended that all companies with more than 500 employees, should consider setting further **enhanced standards** for mental health which are more challenging and lead the way. It is recognised that larger employers often have significant influence through their supply chains, customers and contractors, and thereby could use this influence to encourage and support smaller employers to implement mental health core standards, as well as sharing their resources and knowledge.

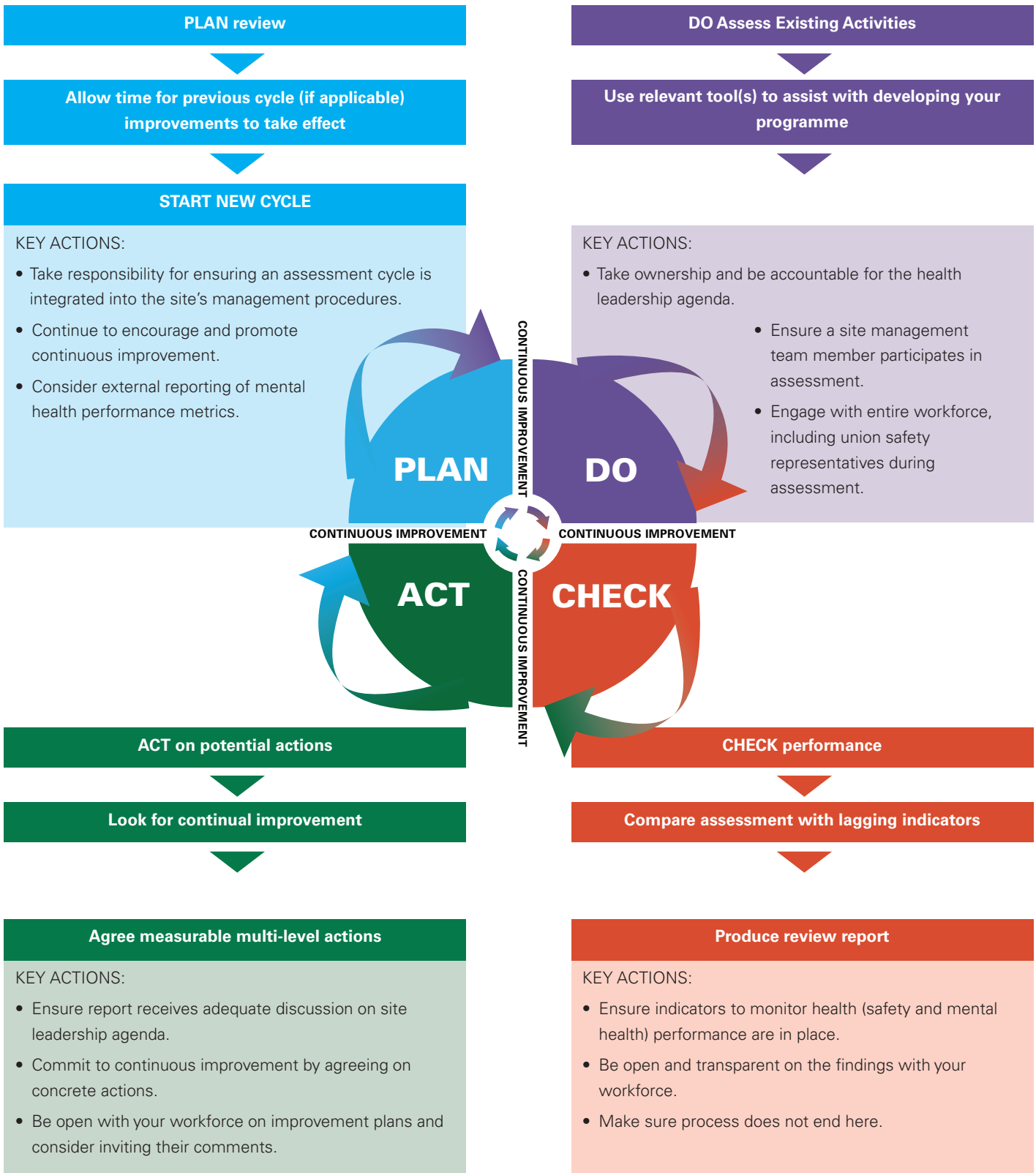
### **MENTAL HEALTH 'ENHANCED STANDARDS'**

- **Increase transparency and accountability through internal and external reporting;**
- **Demonstrate accountability;**
- **Improve the disclosure process;** and
- **Ensure provision of tailored in-house mental health support and signposting to clinical help.**



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# KEY TIPS for Developing/Improving your MENTAL HEALTH AND MENTAL WELL-BEING POLICY



... **PLAN** | **DO** | **CHECK** | **ACT**

## PLAN (Policy, plan)

- What should your policy cover? What is its objective? Who should write it? Which groups should it impact (e.g. employees, 3rd parties, contractors)?
- Consider other related policies that may need to be updated or changed to reflect aims of this policy e.g. flexible working or attendance management.
- Identify the health and well-being issues within your organisation to develop your programme.
- How does your policy (or if no separate policy to EHS) fit into the organisation's operation and culture?
- Understand your business environment, organisational structure physical environment, strategy and activities – a successful programme should take all of these into account.
- What legal requirements, codes of practice and guidelines need to be considered?
- Who are you going to involve and consult with regarding the policy?
- Develop a plan of implementation, with a core framework that looks at how you coordinate, deliver and measure performance against your identified need. How will this be funded, and what intervention(s) should you have in place?
- Put together a project team and look at what resources you have to support the programme.
- Conduct a gap analysis, a survey; look at statistics on site for a baseline for information gathering against available data. Create a 'snapshot' of your current performance using relevant KPIs so you can measure against future progress.
- Develop a health and well-being strategy with a long-term lean towards positive mental health and well-being and developing the resilience of your greatest asset, your employees.
- Prioritise your important objectives so that you have those within a 12 month plan and those less so, plan for more long-term.
- Make a commitment to mental health, ensure leadership from a senior level and then cascade through the organisation, think of making a statement such as setting objectives or signing a 'pledge' (see 'Tools' section – Time to Change).

### Examples of Relevant Good Practice:

- Some organisations have separate policies for mental health, others include as part of their zero harm culture, general EHS policies, or under overall health leadership with a stress policy, and HR and Well-being policy.
- Understand the legal situation and what is current and relevant for your organisation.
- Consider consulting with trade union reps and employees throughout the process and setting up a working group (union reps, senior management, OH, HR and employee reps) to plan and implement the policy e.g. some organisations have consulted with unions, staff representatives and benefit providers as well as external support such as consultants and NHS (Public Health) to assist with programme development.
- Develop a site health programme and a steering committee; create a team hub, with on-going communication via newsletters and a continual plan of events. Think of relevant areas of interest across different aspects of well-being (applicable to the site) in addition to any corporate focus issues as appropriate.
- Look at OH data and anecdotal evidence from managers, use of statistics available from government organisations such as the HSE, NHS, MIND and the Deloitte Survey within the Stephenson/ Farmer review report for government 'Thriving for work' 2017.
- Conduct data analysis such as absence data; impact on the business; employee performance; and retention levels (prior to starting any programmes).
- Appoint a mental health Champion at a senior level; be open and visible within the organisation. Make a workplace commitment such as signing a pledge (e.g. Mental Health at Work/ MIND see Tools section references).

NOTE: This is not a definitive list, but are suggestions as pointers for inclusion that have helped our members and may be used along with additional considerations specific to your organisation's needs and requirements.

## DO (Risk profile, organise, implement plan)

- Undertake a **risk assessment** with respect to your organisation; identify the hazards and individual job roles to determine the most appropriate policy.
  - Continue communicating throughout the process, and create a positive culture that promotes healthy behaviour, which supports and values employees.
  - Promote effective people management, with good working conditions; working practices; opportunities for development
  - Think about health promotion, access to information with regular promotion of positive mental health in the workplace.
  - Conduct training and awareness sessions that detail implementation of the policy, responsibilities, statement of intent for your policy (for health, safety and well-being).
  - Use appropriate professional services and qualified staff (especially when considering available support resources). Think about in house facilities and resources, and identify providers to assist you.
  - Know your people and foster a team environment that encourages supporting people as individuals. Think about external factors that could affect mental health at work such as personal financial difficulties, bereavement, illness, looking after young children or elderly parents and factor this into the types of support or flexibility you can offer.
  - Have a procedure drawn up and communicated for mental health with respect to opportunities to discuss them.
  - Conduct a health needs assessment survey that includes questions on mental health concerns.
  - Include considerations with respect to human factors and fatigue within the resilience programme.
  - Offer proactive resilience support through promotion of a number of health topics.
  - Have a programme that suits your organisation's needs and those of your employees.
  - Use the hierarchy of control to protect your people from harm and ensure that your workplace practices are not contributing to poor mental health. Consider hazard elimination first rather than concentrating solely on individual resilience.
- ### Implement the plan
- Decide on preventative & protective measures needed to implement the policy, the tools & equipment required, and document these in specific site procedures and protocols that support the policy.
  - Implement the annual plan that addresses the goals you have identified from your original objectives and how they fit into the overall health and well-being plan, HSE objectives or organisational strategy.
  - Train and instruct all people involved in support arrangements, ensuring competence and provision of supervision, and check arrangements are in place as intended.
  - Launch the programme, and think of 'branding' as appropriate so it generates interest and engagement.
  - Conduct interactive sessions for health and link with national awareness days. Continue communicating throughout the process.



### Examples of Relevant Good Practice:

- HSE Management Standards were used as an effective individual approach to Risk Assessment to allow exploration and compartmentalisation of areas of their life, record significant concerns, and allow for reflection and prioritisation.
- Risk assessments are in place for return to work, stress, reduced hours and restricted duties.
- Look at setting Guiding Principles for employees' work-life balance covering issues such as expected behaviours, respect of the individual, timing of electronic communications, scheduling of training and meetings. Good to establish codes of conduct and including well-being in values, and appraisals.
- Communicate regularly with the working group, consulting all stakeholders during the process including as appropriate employees, their representatives, contractors, unions and visitors to sites.
- Implement and communicate a mental health at work plan that promotes good mental health of all employees and outlines the support available for those who may need it.
- Mental health champions were trained to Mental Health First Aid level, with clear role boundaries assigned.
- Promote good people management to help with career progressions, supporting individuals with change, new responsibilities with managing and supporting others. A focus on 'taking your time' and working with the person as an individual, optimising their strengths and supporting when necessary.
- A health promotion website was developed with topics chosen such as prevention, self-care, supervisor awareness, well-being tips. Produced a staff handbook/guidance, conducted an employee survey.
- All managers attended a half day mental health workshop which covered the stigma of mental illness, causes of stress, how to recognise the signs, how to manage health issues sensitively and effectively. This included practical solutions to problems and reasonable work life adjustments, training for individuals on how to manage stress (diet, meditation, exercise, hobbies); training for supervisors on how to identify signs of stress in employees.
- All employees have access to Employee Assistance Programme, used NHS resource, insurers and benefits providers to develop training and awareness sessions and programme.
- Occupational health discussions through drop-in sessions, at medicals, self-referrals (employee discloses problem, employee unable to attend work) or manager has concerns that support may be needed (referral).
- Discussions promoted through monthly poster campaigns; mental health regularly discussed as a topic of interest at union committee meetings, especially to recognise the link between engagement and well-being. Health topics covered such as sleep hygiene, exercise, sensible eating, drinking, healthy eating etc.
- A bespoke Mental Health Resilience programme purposely designed and adapted for use to include training and work on personal, team, and organisational resilience. A number of different platforms used to deliver the message, as not everyone has access to a computer.

NOTE: This is not a definitive list, but are suggestions as pointers for inclusion that have helped our members and may be used along with additional considerations specific to your organisation's needs and requirements.

## CHECK (Measuring performance)

- Review the information received from the policy's implementation. Conduct a reality check. What feedback are you getting from implementation of the policy? It is important not just to look at the paperwork but to consider feedback from **all** individuals concerned with the process and their experiences. Check that all individuals are aware of the policy and know their responsibilities, and how to get support if needed.
- Make sure you have systems, information and support in place that are available to all e.g. often it is the most affected individuals who don't want to speak out, so consider those who wish to remain anonymous.
- Are you getting any results, experiences or scenarios that need to be further enhanced and investigated? Look at KPIs for health and those that specifically include mental health;
- make sure these are reviewed by the senior leadership team and action taken as necessary. Ensure KPIs are communicated and an open culture is developed.
- Continue communication with the working group, consulting with all stakeholders including as appropriate employees, their representatives, contractors, unions and visitors to sites.
- Ask yourself if anything has changed with respect to good practices, legal requirements or guidelines and knowledge that need to be acted on and incorporated, e.g. make sure signposting to local or national services is up to date annually, as it is important managers and staff can rely on it. Use employee surveys to track progress with initiatives and improvements; identify statistics that are relevant to your organisation.
- Look at how your programme is most effectively communicated and changed to suit your organisations dynamics.
- Although culture is a factor, know your employees. External individual factors may affect the mental health of employees at work that are not to do with work practices e.g. bereavement or financial difficulties. Have arrangements in place for support, understanding and flexibility.
- Review survey results and conduct additional surveys, feeding back to employees on a regular basis progress against goals and actions.
- Regularly evaluate your approach and share good practices with your peers in other organisations.
- Consider not only absenteeism figures and staff turnover, but also how presenteeism (being at work when ill) is impacting your workplace.

### Examples of Relevant Good Practice:

- To ensure we remained current, we attended current 'legal update' seminars, relevant HSE conferences, local well-being conferences (for local contacts to support programmes), discussed the programmes with benefit providers, looked at what associations and professional organisations are producing on the topic and also government organisations (NHS; Public Health England, Scotland, Wales; MIND).
- Some organisations found different dynamics within their employees, with younger groups being more open to discussions and coming forward with issues; older generations, particularly males, are less likely to 'open up' and discuss issues; check access for all to programmes and information and that flexibility for shift workers or those without a computer can access information, resources and training as others do.
- A set of comprehensive and organisational specific KPI's were generated for mental health, and these are in place. All measures and feedback are subject to senior management review, and communicated openly to all.
- Suggested measures have included how the policy, programme, and its implementation, and support services are operating effectively; as well as the accessibility, use of and update for information.
- There are open communication mechanisms for all information (in a non-confidential format only), with employee surveys used to track progress with initiatives and improvements.
- Health promotion, mental health and well-being programmes are subject to formal auditing campaigns.
- Measures included reportable stress cases; sickness absence; reasons for absence; referrals for counselling; company survey results; number of managers trained on mental health; number of awareness promotions; number of individuals working > x hours a month; number of individuals using site gym facility.

## ■ Use of the CIA MENTAL HEALTH AND MENTAL WELL-BEING LEADING INDICATOR TOOL – SCORECARD AND QUESTIONNAIRE

NOTE: This is not a definitive list, but are suggestions as pointers for inclusion that have helped our members and may be used along with additional considerations specific to your organisation's needs and requirements.

## ACT (Lessons learned, review performance)

- Review learnings from the CHECK process on a regular basis and, in particular, after any organisational change, a change in statistics, new survey results, new standards, or new best practices have been introduced.
- Update policies and procedures and start the process cycle again, e.g. consider policies on flexible working, or attendance management procedures so that they allow for phased return to work after an absence.
- Conduct an annual review of any signposts to national/local services or relevant information you have provided. It is important that managers and staff can rely on it working and being up to date.
- Discuss with teams any potential changes or enhancements to the process and conduct a further reality check before implementing.

### Examples of Relevant Good Practice:

- Over time one organisation noted a decline based on survey results and attendance numbers, this resulted in more local incentives being implemented to get people involved, so that not just centralised training was being carried out.
- After conducting some initial training it was noted that not all persons were 'open' to discussions in larger groups. The programme was then tailored, with more discrete sessions and different platforms used to deliver the message in smaller groups. This allowed people without access to a computer to engage, at suitable times and in ways more comfortable for them.
- One organisation gave Mental First Aid Training to selected employees, and although this was an excellent start, felt that it was not a substitute for good management, who know their staff and had an open culture to discuss issues. They made sure that clear boundaries were set in training and policies, with respect to the competencies of the individuals, and when to call for help from competent health professionals. They made sure their system was comprehensive with an open culture, good management practices and plenty of opportunities to discuss issues were in place.

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sustainable healthy workplaces

NOTE: This is not a definitive list, but are suggestions as pointers for inclusion that have helped our members and may be used along with additional considerations specific to your organisation's needs and requirements.

# EXAMPLE POLICY TEMPLATES, CASE STUDIES AND ON-LINE TRAINING VIDEOS for Mental Health and Mental Well-being

A number of templates are available related to mental health, some helpful examples to refer to can be found at:

- **Rochdale Borough Council** Wellbeing at work and policy templates <https://www.rochdale.gov.uk/social-care-health/wellbeing-work/3>
- **British Heart Foundation** <https://www.bhf.org.uk/informationsupport/publications/health-at-work/health-at-work-policy-template>
- **Health and Safety Executive** [www.hse.gov.uk/stress/assets/docs/examplepolicy.pdf](http://www.hse.gov.uk/stress/assets/docs/examplepolicy.pdf)

In addition to this a number of organisations provide on-line training, information videos and case studies, which may also be helpful:

- **Mental Health at Work Case Studies** <https://www.mentalhealthatwork.org.uk/case-study/>
- **Business in the Community, Case Studies and Impact Stories** <https://www.bitc.org.uk/impact-stories/>
- **Mind Case Studies** <https://www.mind.org.uk/workplace/influence-and-participation-toolkit/tools-case-studies-and-other-resources/#Casestudies>

## Example MENTAL HEALTH AND MENTAL WELL-BEING POLICY template

Drawn from Template © British Heart Foundation 2017, registered charity in England and Wales (225971) and in Scotland (SC039426) <https://www.bhf.org.uk/publications/health-at-work/health-at-work-policy-template>

<b>A mental health policy for:</b>	[Insert organisation]
<b>Effective from:</b>	XX/XX/20XX
<b>Next review date:</b>	XX/XX/20XX

### Notes

#### 1. This section of the policy could include information on some of the following topics:

- why and how mental health affects health, wellbeing and work-life balance
- quality-of-life benefits
- how the organisation can create an environment that supports and encourages mental health
- how the support of health at work initiatives can demonstrate that the workforce is valued and the work-life balance is respected.

#### Mental health

Mental ill health and stress are associated with many of the leading causes of disease and disability in our society. Promoting and protecting the mental wellbeing of the workforce is important for individuals' physical health, social wellbeing and productivity.

Mental wellbeing in the workplace is relevant to all employees and everyone can contribute to improved mental health at work.

Addressing workplace mental health can help build individual and organisational resilience, strengthen the positive, protective factors of employment, reduce risk factors for mental ill health and improve general health. It can also help promote the employment of people who have experienced mental health conditions, and support them once they are at work.

Important aspects of mental health includes providing information and raising awareness, management skills and leadership to deal with issues around mental health and stress effectively, providing a supportive work environment, with good working conditions, effective people management and promoting a healthy work life balance with opportunities for development. To offer assistance, advice, appropriate workplace adjustments, and support to anyone experiencing poor mental health or returning to work after a period of absence due to poor mental health. To foster a culture that is stigma free, and encourages open conversations about mental health.

#### 2. This section of the policy should include your mental health aims for the organisation. Examples are given on the right.

#### Aim of the policy

The aim of this policy is:  
 To create a workplace environment that is stigma free, fosters open conversations about mental health, and promotes and supports mental health to builds resilience of all employees.  
 To ensure that the working environment promotes the mental health of employees, contractors and visitors

#### Mental health

- a) To develop an open supportive culture, tackle factors that may negatively affect mental health, and to develop management skills.
- Provide positive leadership for mental health that cascades from senior managers throughout the organisation.
- Give employees information on and increase their awareness of mental health.
- Give non-judgemental and proactive support to staff that experience mental health problems.
- Include information about the mental health policy in the staff induction programme.
- Provide opportunities for employees to look after their own health and mental health, for example through physical activity, stress-buster activities and social events.
- Offer employees flexible working arrangements.
- Set employees realistic targets that are mindful of work life balance and do not require them to work unreasonable hours.
- Ensure all employees have...

#### 3. Objectives should be SMART (Specific, Measurable, Achievable, Realistic and Time-specific).

See the examples opposite.  
 Each objective should be followed by what the organisation will do – policy actions – to meet the objectives.

ons, or mental health first aiders are appropriate  
 en to refer to the appropriate professional me  
 place is free from bullying and harassment, disc  
 staff involvement, particularly during periods of  
 mental health difficulties.  
 n are treated fairly and consistently and are not ma  
 department (if there is one), their own GP, use the  
 their choice.  
 return to work (mental health) risk assessment, and  
 vment, in full discussion with the employee, where a  
 risks or other factors.  
 ir mental health illness in the strictest confidence  
 om the individual concerned.  
 enced mental health ill health.  
 b applicants with a mental health illness. This  
 e.  
 e briefed on mental health issues and the  
 in appropriate interview skills.  
 illness will be more vulnerable to workplace  
 applicant.  
 managing mental health in the workplace.  
 o eliminate stress or control the risks from  
 action relating to the prevention of

APPENDIX

## **MENTAL HEALTH AND MENTAL WELL-BEING LEADING INDICATOR TOOL – checklist, questionnaire and scorecard**

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DISCLAIMER: CIA's Mental Health and Mental Well-being Leading Indicator Tool, developed by members for members, is an aid to help businesses check and give an 'indicator' score for their own mental health programme against a number of elements and identify areas for improvement. Its use does not guarantee there will be occupational health events, but can help in reducing and preventing them.

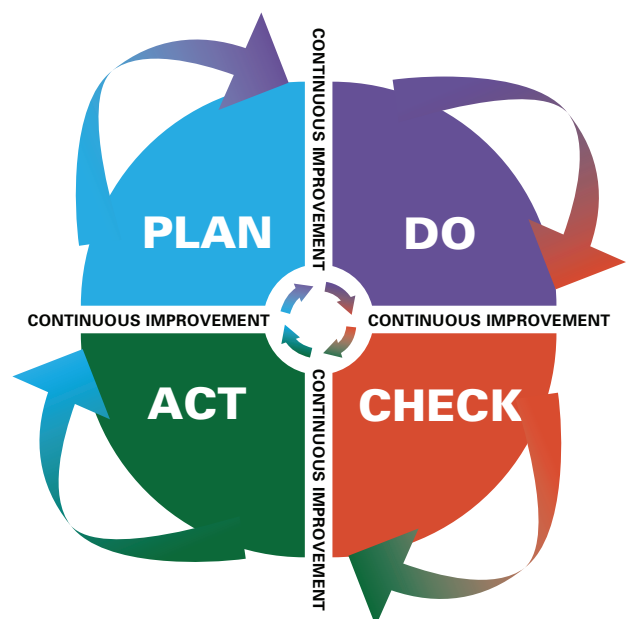
## MENTAL HEALTH AND MENTAL WELL-BEING LEADING INDICATOR TOOL – scorecard and questionnaire

Using the format of the CIA's Sustainable Health Metrics Indicator Tool, which is the overarching evaluation tool for Health Leadership, we have designed the following specific checklist and questionnaire (with scorecard) with respect to Mental Health and Mental Well-being as a support tool to help you be better prepared and assess your organisational arrangements. The CIA recommends that this Mental Health and Mental Well-being Leading Indicator Tool and Scorecard be used in conjunction with the CIA's Signpost Guide "Mental Health and Mental Well-being Policy". All the documents in the CIA's Health Leadership Strategy Series use the Health and Safety Executive's (HSE) 'Plan Do Check Act' model in HSG65 as their basis.

**This Tool has been designed as an 'indicator' tool only, to allow you to assess arrangements and put an action plan in place. It is the output of the assessment that is the most important feature of the exercise, so please do not focus too heavily on assigning an actual score itself; but concentrate on your own action plan for improvement.**

### Good health leadership in mental health means ...

- ☑ An organisation that fosters a positive culture, reducing stigma and promoting open conversations about good mental health and healthy behaviours in which employees feel comfortable talking about their mental health when in the workplace.
  - ☑ Senior leaders are committed to health improvement, they lead by example, and are actively involved in health activities and programmes.
  - ☑ There is an understanding by all that mental health operates on a continuum and is an integral part of health, along with physical health. Poor mental health can contribute to numerous physical problems or exacerbate pre-existing ones. e.g. cardiovascular disorders, gastrointestinal disorders, etc.
  - ☑ An understanding that mental health issues are not restricted to the workplace but can be caused by many other outside factors not related to the working environment (such as bereavement, illness, financial worries or family issues), and that these can affect you whilst at work.
  - ☑ Awareness that as an employer you are ideally placed in the workplace to play a vital role during these difficult times, by offering support, tools, information, and resources to help individuals with their own mental health and well-being.
  - ☑ Promoting the understanding that as individuals you also play a key role in your own health resilience; encouraging personal responsibility and action for maintaining your mental health and well-being.
- ☑ An effective and inclusive culture with regular communications, both top down and bottom up, on all aspects that have the potential to impact on health within the organisation's health programme are in place.
  - ☑ There is assessment, future planning and management during times of change e.g. organisational change (people, roles, shift patterns), production changes, post incident, or a traumatic event.
  - ☑ Organisations are ready to make necessary adjustments to help people with mental health issues and have effective policies and procedures in place that promote and support the attainment and maintenance of positive mental health e.g. flexible working, work adjustments, work life balance, grievance policies.
  - ☑ There are infrequent absences arising from mental health issues, with appropriate measures and indicators in place that are subject to regular senior level review and monitoring.
  - ☑ Established support mechanisms and procedures for managing return to work are used, with well supported management procedures for recurring conditions of specific diagnosis (where some absence will be expected from time-to-time).
  - ☑ Management and supervision know their people well, fostering a team environment for all.
  - ☑ ABOVE ALL, people feel valued, and respected as individuals – the open positive culture allows everybody to make their individual contribution at work, to the best of their ability.



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## CHECKLIST

The following Checklist of questions enables a quick evaluation to be made on whether your organisation is taking relevant action. This is by no means definitive and can only be considered as a 'light touch' type of approach and it is recommended that the separate Mental Health Questionnaire and its accompanying Scorecard are used to ascertain a more accurate analysis for identifying continuous improvement actions.

### PLAN

- Has your business committed to addressing mental health in the workplace?
- Have you put in place a separate policy or encompassed this within other EHS, HR policy?
- Did you establish a working group led by senior leadership involving representatives from different job functions in creation of a policy and annual programme?
- Did you consult with all employees on this?

### DO

- Did you conduct a health needs risk assessment accounting for mental health and within this considered how external factors could affect mental health at work?
- Does your organisation promote people management, provide good working conditions, opportunities for development and a healthy work-life balance?
- Have you identified preventative & protective measures needed and the tools & equipment required for implementing the policy and developed an annual programme to help deliver this?
- Did you consider 'branding' for the policy and annual programme to generate interest and engagement?
- Have you identified, trained and instructed key people in support arrangements, ensuring competence and provision of supervision?
- Do you provide training and awareness interactive sessions for staff, linking in with national awareness days, as well as providing regular communications to employees?

### CHECK

- Is feedback collected on your mental health policy and the annual programme?
- Are the results from feedback surveys fed back to employees?
- Have you checked with individuals if they are aware of the policy, where to find information and how to get support if needed?
- Has your organisation established KPIs for health and is mental health specifically included?
- Are performance measure indicators reviewed by senior leadership and openly communicated?
- Does your organization share good practices with peers in other organisations?
- Is there a working group led by senior leadership overseeing these checks?

### ACT

- Have learnings been reviewed?
- Were potential changes discussed with employees / teams?
- Has an annual review of any provided signposts to national / local services or relevant information been carried out to ensure this is up to date?
- Has your organisation restarted the process cycle again after updating its policies, procedures and guidance?

## SCORECARD FOR QUESTIONNAIRE

Two versions of the Scorecard are provided for recording answers to the mental health questionnaire, one enables easy visualisation of scoring and the other allows for notes to be written. If you would like to assess health leadership more generally, we recommend you also refer to the 'CIA Sustainable Health Metrics Indicator Tool'. All questions apply to any type of facility.

SCORECARD FOR MENTAL HEALTH & MENTAL WELL-BEING QUESTIONNAIRE							
	QMH1	QMH2	QMH3	QMH4	QMH5	QMH6	QMH7
A							
B							
C							
D							
<b>FACILITY NAME:</b>	Policy & Planning	Assessing Risk	Implementation and Core standards	Competence	Communication	Measuring Performance	Reviewing Performance
<b>DATE:</b>	PLAN	DO			CHECK	ACT	

**KEY:** A = Advanced B = Best practice C = Controlling D = Developing

**SYSTEMS (OR LEADING INDICATORS):**

	<b>PLAN</b>
	<b>DO</b>
	<b>CHECK</b>
	<b>ACT</b>



SCORECARD FOR MENTAL HEALTH & MENTAL WELL-BEING QUESTIONNAIRE						
FACILITY NAME						
DATE UNDERTAKEN						
	HEALTH LEADERSHIP COMPONENTS	Questionnaire Question No.	Rating (A/B/C/D)	NOTES		
PLAN	Policy & Planning	QMH1				
DO	Risk Profiling	QMH2				
	Implementation and Core Standards	QMH3				
	Competence	QMH4				
CHECK	Communication	QMH5				
	Measuring Performance	QMH6				
ACT	Reviewing Performance	QMH7				

## QUESTIONNAIRE

This asks seven questions on your mental health and mental well-being programme. For each question, select the descriptor that best fits your activities (A = Advanced, B = Best Practice, C = Controlling or D = Developing); each aspect listed is not a prescribed must, but is a suggestion for your consideration as your site may have different needs. Record your results in either version of the Scorecard. **Remember this is an ‘indicator tool’ only – it is the improvement plan that is important, not the score.**

PLAN – ‘How would you best describe your...?’
<p><b>Mental Health &amp; Mental Well-being Policy &amp; Planning</b></p> <p><b>QM1 ...policy and planning for mental health?</b></p> <p>A) In addition to (B), responsibility and accountability is emphasised in performance evaluation of managers. Formal business review and planning process is in place for health programmes, with an improvement and implementation plan specific to mental health. The plan could consider your businesses working environment, organisational structure, strategy and activities. Mental health performance metrics and improvement plans are formally reviewed periodically by senior management and action taken accordingly. There is ongoing communication via possibly newsletters, a continual plan of events or internet hub and everyone is actively engaged in mental health promotion, activities and improvements. There is explicit senior management support for mental health and health promotion &amp; well-being programmes.</p> <p>B) Issues have been systematically assessed and identified with a mental health or related policy in place that adequately addresses key mental health risks associated with the business. Roles and responsibilities for mental health management are formally identified, assigned and documented in the policy. A long-term health and well-being strategy are developed with a plan of implementation developed, with a core framework that looks at coordination, delivery, resources and performance measurement (with suitable KPI’s identified) and long- and shorter-term goals. Business performance can be promoted by investment in programmes to enhance the health, well-being and productivity as part of the mental health strategy. This may also specify funding and what interventions could be in place. A project team (or equivalent) may be in place, meeting regularly to review progress against the agreed plan and reporting to senior management. Consultation has been carried out with unions (as appropriate) and employees, with the policy communicated to all, including third parties. Other related policies have been updated accordingly e.g. flexible working, attendance etc. Health promotion programme plan includes periodic health education campaigns to address the specific wellness needs of the workforce.</p>

<p>C) A general understanding of the legal requirements and guidelines (for mental health) exists with responsibilities and accountabilities assigned, however this may not be formally recorded. A project team (or equivalent) may have been assigned and a gap analysis, survey or statistical review is in the process of being completed. This plan could be used to create a snapshot of current performance, using relevant KPI’s for a baseline level of performance in order to assess current health and measure future progress. This may be used to develop the implementation plan. A commitment to mental health by leadership at a senior level has been made, or possibly a statement signed such as a ‘pledge’. There is some information available and circulated as part of occupational health &amp; well-being programmes, with occasional provision of health promotion information, plus ad-hoc communications with employees as appropriate.</p> <p>D) No written policy specific to mental health. Responsibility for mental health is not assigned. No formal implementation plan, team or resources assigned, with no readily accessible monitoring records. Little or no specific discussions or consultations around mental health with employees other than for general health and safety legal requirements.</p>
<p>Comments</p>

DO – ‘How would you best describe your...?’	
<p><b>Assessing Risk</b></p> <p><b>QMH2 ...assessment and control of all types of hazards to mental health on your site?</b></p> <p>A) Regularly benchmark risk control techniques with other organisations. Systems are in place for measuring performance.</p> <p>B) In addition to (C), can demonstrate continual improvement through comprehensive auditing of your mental health and mental well-being programmes.</p> <p>C) Hazards have been identified, with risks evaluated by trained and competent personnel and specific to individual job roles. Essential action is needed to maintain identified risk controls and ensure these are contained within the policy. Areas for remedial action are identified and tracked to completion. There is also assessment of wellness programme needs or provision of wellness support programmes for enhancement of both physical and mental health.</p> <p>D) Limited risk assessments for mental health may have been completed but significant further work is needed to achieve adequate control of exposure risks. There is limited assessment of wellness programmes for physical and mental health.</p> <p>Comments</p>	<p><b>Implementation and Core standards</b></p> <p><b>QMH3 ...implementation of your policy and core standards on your site?</b></p> <p>A) Recommendations fully implemented, as far as is reasonably practicable, with a philosophy of building resilience and prevention. Core and Enhanced Standards (e.g. Stevenson &amp; Farmer Review 2017) could have been developed and may be fully implemented. There is possibly a focus on extending beyond the individual, that incorporates team resilience, positive mental health and support.</p> <p>B) Recommendations from health risk assessments may be fully implemented, as far as is reasonably practicable, with considerations made in respect to human factors that affect health (e.g. fatigue, shift work, ageing workforce) within resilience management. There may be more dependence on preventative mechanisms for resilience than reactive support. Core Standards (e.g. Stevenson &amp; Farmer Review 2017) principles could be used to develop programmes. There are good organisational working practices in place that support the culture, with potentially additional funding for rehabilitation and treatment services, to manage absence and facilitate and encourage earlier return to work (inc. flexible working arrangements as appropriate.)</p> <p>C) General understanding of principles of control of mental health risks, as well as preventative and protective measures may be in place to implement the policy and these could be supported by relevant procedures incorporating Core Standards (e.g. Stevenson &amp; Farmer Review 2017). Employee health risk assessment surveys may contain questions on mental health. Can demonstrate efficacy of risk management controls e.g. with measures in place to check this.</p> <p>D) No clear strategy for control of mental health risks, and little data, information or measures are available (such as attendance, return to work). There may be significant reliance on support systems and rehabilitation rather than establishing prevention mechanisms.</p> <p>Comments</p>

DO – ‘How would you best describe your...?’	
<p><b>Competence</b></p> <p><b>QMH4. ...organisational support arrangements with respect to mental health?</b></p> <p>A) In addition to (B), systems, materials and competence could be subject to formal review to ensure continuous improvement. A bespoke Resilience programme may exist that looks at proactive management of mental health and well-being within the organisation, possibly developed and supported with the assistance of a specialist or professional support.</p> <p>B) Provision of competent resources significantly exceeds minimum regulatory requirements, with appropriate qualified staff, and potentially additional training to recognise mental health issues for those in supervisory and management roles (covering difficult conversations and / or difficult situations). In addition to First Aid, some consideration may have been made for specific mental health support provision e.g. Mental Health First Aiders. Clear boundaries are in place at all levels in the organisation with respect to roles and responsibilities, with these documented and communicated</p> <p>C) Appropriate professional services are in place to support the general occupational health requirements, with ad-hoc counselling or EAP services on demand. Some degree of general health promotion awareness may be available for all, which could include a reference to mental health and well-being.</p> <p>D) Competent persons could be in place to meet statutory requirements for Health, Safety, and employment.</p> <p>Comments</p>	<p><b>Communication and Awareness</b></p> <p><b>QMH5. ... provision of information, instruction and training for employees on workplace mental health hazards issues?</b></p> <p>A) Systematic and comprehensive mental health awareness training specific to job roles and responsibilities may be provided at all levels in the organisation. Regular simulation exercises related to mental health response could be conducted as part of major site emergency incident preparedness, post event support, drug and alcohol policy or crisis management scenarios.</p> <p>B) Information on all mental health hazards may be critically evaluated and instructions are included in relevant procedures. There are regular scheduled health promotion sessions that are available to all employees on a range of applicable topics thereby helping to create a positive culture that promotes healthy behaviour, as well as providing support and value to employees. Effective people management procedures and work practices could be in place, with relevant persons trained and competent in their discharge. Specific mental health awareness training is made available to all employees. Participation of all staff may be encouraged through incentive programmes for health promotion, mental health and well-being.</p> <p>C) Systems may be in place to provide appropriate information, instruction and training with documentation relevant to workplace mental health risks. Training could be given that details implementation of the relevant procedures, the statement of intent, competent person support and information available.</p> <p>D) Only limited systems and material for providing mental health awareness information, instruction and training may exist. Provision of mental health information is to statutory standards being appropriate for general health and safety instruction, training and awareness could be in place.</p> <p>Comments</p>

CHECK – ‘What...?’
<p><b>Measuring Performance</b></p> <p><b>QMH6 ...is the status of checking performance of the mental health programme on your site?</b></p> <p>A) In addition to (B), a formal system could be used to review links between mental health and any external factors such as organisational dynamics, managing change, individual factors not related to work e.g. bereavement, financial difficulties, illness, caring for relatives/children. Arrangements may be in place for individual assessments, special support and flexibility. The business could regularly evaluate its approach towards new guidance and any new developments or relevant good practices; it may openly share with external stakeholders.</p> <p>B) Regular surveys or information gathering is conducted (which can be anonymous). A set of comprehensive and organisational specific KPI’s could have been generated for mental health, and these are in place. All measures and feedback are subject to review that includes senior management and are communicated openly to all. Suggested measures can include how the policy, programme, and its implementation, and support services are operating effectively; as well as the accessibility, use of and update for information. This includes provision of services (such as physiotherapy, counselling, rehabilitation and private medical treatment as appropriate). There are open communication mechanisms for all information (in a non-confidential format only), with possibly employee surveys used to track progress with initiatives and improvements. Health promotion, mental health and well-being programmes could be subject to formal auditing campaigns.</p> <p>C) There may be a few KPI’s that can be related to mental health, and measures may relate to sickness absence, attendance figures etc. Accident and incident statistics and investigations could be reviewed to comply with specific regulatory requirements, but not assessed for mental health impact. There may be an employee survey, near-miss reporting system and feedback from health promotion programme; but nothing is specifically related back to mental health or used to progress in defining a mental health programme or project.</p> <p>D) There are no specific measures in place to monitor performance and no metrics may be collected or reviewed. Reactive response to mental health cases as they occur is evident.</p> <p>Comments</p>

ACT – ‘What...?’
<p><b>Reviewing Performance</b></p> <p><b>QMH7 ...changes have been made as a result of learnings from the delivery of your mental health programme on site?</b></p> <p>A) In addition to (B), Mental Health Risk Assessments could be reviewed for lessons learned and appropriate action taken. A Mental Health Risk Assessment may be in place for certain activities e.g. turnaround project, and form part of any Management of Change process thus enabling the review of the impact of change on mental health. Performance of the mental health programme may be reviewed regularly and systematically (potentially at least annually).</p> <p>B) Learnings from the implementation and delivery of the programme as noted during the CHECK process could be regularly reviewed, in particular after any organisational change, a change in statistics noted, results of new surveys, new standards are available or new relevant good practices have been introduced. Any changes may be discussed with relevant teams and communicated appropriately. Policies and procedures could be updated, with consideration given to flexible working, attendance management, and new measures monitored. There may be regular review of the support services and resources available, both people and guidance (don’t forget to check your signposted links in circulated information). This could be to ensure they are suitable and sufficient, that information is available and support systems are effective.</p> <p>C) Performance may be reviewed ad-hoc and often without structure as individual parts of the programme related to specific initiatives are reviewed separately rather than collectively, with appropriate action being taken. There may be no formal review or audit in place.</p> <p>D) There may be no active programme for reviewing performance.</p> <p>Comments</p>





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