Mental health at work
There’s a culture of praise for coming in when you’re sick
I *pleaded* for an Occupational Health referral

It never happened
People don’t have mental health problems here

High blood pressure maybe, but not mentally ill
After two weeks off with stress I got lots of stuff thrown at me. I left within the hour. No one even asked me how things were.
I hear terms like ‘nutters’ flying around the office.

I hesitate to ask for adjustments.
Let’s get everyone a basket of fruit on a Friday
And gym membership!
Does anyone recognise statements like this?

They’re all real.
And it’s not acceptable.
We all have mental health.

All the time.
What makes us unwell?
And also...

• Poor diet, sleep, exercise, booze
• Past trauma, future worries
• Life – hatches/matches/dispatches
• Work events – both good and bad
Poor health attributed to:

- 7% work
- 39% personal life
- 54% work and personal

35-40% of absences are mental health related yet 50% do not take time off
Your problem is NOT those who take time out.

It’s those who work unwell.
Unwell at work

• Difficulty concentrating (85%)
• Difficulty making decisions
• Increased conflicts team/customer
• Presenteeism
There’s no evidence of stress in our absence data or surveys.
Because we lie

• Stigma
• Taught to soldier on
• Doing nothing is easier
• No one wants to notice
• Physical illness is celebrated
Does this all matter?
Lives matter

• Construction – tough, macho, male

• Suicide is 6x more likely on site

• 1419 suicides (2011-2015)

• “We’re just a long way away”

• Industry starting to create campaigns
The perfect storm

• Huge awareness, however...

• Few role models
• No CIPD learning
• No SME support
• Trust and Wellbeing Service stretched
• GPs – sick note/pills
• Counsellor courses
How do we get it wrong in the workplace?
Getting it wrong

- Poor HR policies
- Banter culture
- No MH specialists
- Ostrich attitudes
- No training
- The weird absence ‘contract’

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Managers unable to speak about it

Presenteeism is rewarded

Sickness & ‘disciplinary’

Bad absence forms

No one in charge of agenda

Timesheets more than turnover
How do we make improvements?

How do we know when we’ve got it right?
Good staring questions

1. What’s our business case? 
2. Does our support work? 
3. What could we prove to HSE? 
4. How good is our data? 
5. What if I was ill?
The business case

unsupported person

vs

a supported employee
<table>
<thead>
<tr>
<th></th>
<th>• Employee becomes unwell</th>
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<tr>
<td>£-</td>
<td>• Manager does not notice or discuss</td>
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<tr>
<td>£--</td>
<td>• Employee takes time off, performance drops</td>
</tr>
<tr>
<td>£---</td>
<td>• GP signs off - three weeks sick, disengages</td>
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<tr>
<td>!!!</td>
<td>• Long term sick? Grievance? Tribunal? Exit?</td>
</tr>
</tbody>
</table>
• Employee becomes unwell

• Manager listens, engages

• Adjustments, counsellor, team & family rallies

• Employee performance improves in time

• Employee skills are retained – family advocate
### Common arguments

<table>
<thead>
<tr>
<th>They’ll say…</th>
<th>You’ll say…</th>
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<tbody>
<tr>
<td>We’ll encourage absence</td>
<td>Train HR and managers</td>
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<td>It’ll cost us…</td>
<td>Yes. £300 = six therapy sessions</td>
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<tr>
<td>What if senior people take time off?</td>
<td>Would you prefer them to work ill?</td>
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<tr>
<td>What do we tell clients?</td>
<td>Tell them you care. Cover as you might for holidays</td>
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<tr>
<td>It’s not our place to do this</td>
<td>Boost productivity, reduce costs, keep talent here...</td>
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</tbody>
</table>
What a strategy can look like
Civil Service strategy
The Bamboo beehive

- Leaders support agenda
- Culture of Wellbeing
- Well-trained managers
- Clear HR/OH/H&S
- Tested policies & process
- Individual resilience
- Continual comms

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Spheres of activity

Culture

Prevention

Intervention

Return

All these stages are necessary for full value.

Commitment, not cost, is vital.
## A good plan

<table>
<thead>
<tr>
<th></th>
<th>MD/CEO</th>
<th>HR/H&amp;S</th>
<th>Managers</th>
<th>People</th>
<th>Comms</th>
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<tr>
<td>Culture</td>
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<td>Prevent</td>
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<td>Help</td>
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<td>Return</td>
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The minimum standard

- Statement from the top
- An Employee Assistance Programme
  - Trained managers
  - Aware workforce
  - A simple HR policy
  - Specialist knowledge
- HSE risk-assessed, RIDDOR recorded
Some great things companies do

- GlaxoSmithkline – minute mindfulness
- Laing O’Rourke – policy tear up
- Bank of England – in house counsellors
- DFID – Director speaks on mental health
- Transport for London – stress reduction
- Larking Gowen – wellbeing week
- IPRS – video therapy access

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Campaigns you can use
How do we know when we’ve got it right?
What great leaders say

We will support you on mental health

We put health and fulfilment before timesheets at appraisal

Mental health affects us all

I manage my mental health. Here’s how...

I will not tolerate people making fun of colleagues who are struggling

Managers have a responsibility for team health

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What’s been happening?

You’re important, let’s talk now.

Let’s come up with a plan – see what we can do.

Tell me about working with the condition.

Do you know how you’d like support? Or shall I help?

Let’s get you better and take things from there.

What great managers say

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What resilient employees do

I know about self-care

Work gives me sense of purpose, volunteering

I take my holiday

I feel in control of tasks and get quality feedback

I can turn off phone and email

I work out of hours by arrangement

I know where to go for help

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What do I do now?

Undertake a review
Business case & strategy
Interview people with experience
Give clear help options
Train managers
Get good data
Launch by leaders
Events and activities

Culture – not a campaign
Low cost, high value
Thank you

Over to you
Contact me:

Reviews, manager training, talks

Tom@bamboomentalhealth.co.uk

www.bamboomentalhealth.co.uk
The business case

The following slides help to understand the statistical picture and are useful as further sources of information.

The statistics are freely available and can be used to create a business case.
The Stats (HSE)

Stress, anxiety or depression underpin account for 9.9 million days of sickness absence in 2014-15 on average, 2.3 days lost per person.

35% of all days missed from work due to ill health.

Highest prevalence of ill health from work-related stress included health and social care, teaching, public administration and defence (HSE, 2015).
The Stats (from Time to Change)

One in four people will experience mental ill-health in any one year

Only 47% of managers have the right support info

23% of people suffering receive no support at all

Construction workers six times more likely to complete suicide than die from a height-fall
The Stats (from CIPD)

Stress and mental ill-health as two of the three top causes of long-term absence for non-manual workers (CIPD 2015).

Two-fifths (41%) of organisations claimed an increase in reported mental health problems in the past 12 months.

Only 43% of people disclose their mental health problems to company/manager.
Impacts: (from CIPD 2016)

Most common impact = difficult to concentrate
(85% of respondents)
taking longer to perform tasks (64%)
difficulty in making decisions (54%)
struggle to juggle a number of tasks (48%)
less patient with customers or clients (48%)
...as a result of attending work
with poor mental health.

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£70bn & one-in-four

Mental health issues cost the UK around £70 billion every year, according to research by the Organisation for Economic Co-operation and Development (OECD 2014).

Report: Mental health and work: United Kingdom, found = 53% loss in employment and productivity.

One in four? The reality is that we ALL have mental health all of the time. Me, you, the team...