

# AGENDA ITEM 10

## REPORT NO. VAL/6/20

### THE HIGHLAND & WESTERN ISLES VALUATION JOINT BOARD

#### Policy on Mental Health and Wellbeing in the Workplace

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#### Introduction

It is the aim of The Board as an employer to promote, as far as is reasonably practicable, a proactive approach to positive mental health and to minimise those risks to mental health which arise in the workplace. Additionally, the Board aims to provide a supportive working environment to those experiencing or recovering from mental ill-health.

The Board recognises that mental ill-health need not be a barrier to effective working. Providing employment or maintaining people in work is a positive way of supporting individuals who have, or are recovering from, mental ill-health. The Board will not discriminate against people with mental ill-health in terms of employment, or access to training and promotion.

A positive working environment and appropriate support at work has a significant impact on reducing stress-related sickness absence and improving long-term outcomes for employees experiencing mental health problems. A positive working environment is essentially about good management practices, characterised by respect and value for staff, meaningful consultation, staff involvement and participation in decision making.

The Board is committed to developing a work environment and culture where employees can be open about their mental health without fear of stigma.

This policy applies to all Board employees.

#### Policy statement

The aim of this policy is to raise awareness of mental ill-health in the workplace, clarify support systems in place for all Board employees suffering from mental ill-health, identify the stigma associated with mental ill-health and provide guidance to enable managers to manage mental ill-health in the workplace.

The Board will ensure the workforce is representative of all groups within society. The Board, as an equal opportunity employer, is fully committed to improving work and career opportunities for individuals with a history of mental health problems.

#### Mental Health and Wellbeing

Mental health problems include a wide range of conditions. Some of these affect our sense of wellbeing, such as anxiety and depression. Wellbeing is defined as a state of complete physical, social and mental health. It is a positive concept emphasising social and personal resource as well as physical capabilities.

Mental health is the emotional and spiritual resilience that allows individuals to enjoy life and survive pain, disappointment and sadness. It is a positive sense of wellbeing and an underlying belief in our own and others' dignity and worth. Mental health is an essential component of our overall health.

Mental health problems (see Appendix 1) are disturbances in the way in which people think, feel and behave. Untreated, a mental health problem will cause major changes in a person's thinking, emotional state and behaviour and will disrupt their ability to carry out daily activities including work.

Mental ill-health accounts for the loss of over 91 million working days in the UK each year – with stress-related absence costs reaching an estimated £4 billion annually. This equates to three employees in ten affected each year or one person in four who will experience a mental health problem in their lives.

Mental health problems have many causes; these include factors at work as well as those out with work. The workplace can have a positive effect on employees' mental health and wellbeing.

The stigma and prejudice that surround mental health problems constitute major barriers to recovery for people who are ill. Meanwhile the fear engendered by stigma and discrimination, also prevents people from seeking effective help early when problems are easier to treat and prospects for recovery better.

### **Organisational Responsibilities**

The Board regards the mental health and wellbeing of their employees as being crucial to the organisation as a whole. The effect of poor mental health can be seen in terms of physical and psychological ill-health and may result in the following:

- Poor performance due to poor concentration and memory problems
- Low motivation
- High anxiety
- Job dissatisfaction
- Lowered ability to handle workplace stress
- Changes in behaviour
- Negative, over-critical and paranoid thinking styles
- Poor attendance

The recognition and management of this issue is an integral part of the Board's responsibility to its employees, and the role of Assessor, Assistant Assessors, Managers, Supervisors and employees in addressing mental health issues is vital.

**The Assessor, Assistant Assessors and all line managers** are responsible for monitoring the workplace, identifying the hazards and risks and taking steps to eliminate/reduce these risks as far as is reasonably practicable. There is also a responsibility to assist and support employees with mental health problems.

In addition to ensuring that employees are given an understanding as to how the Board works, the policies and procedures in place and the role they are expected to play (via induction), all managers should ensure that the following standards are met:

1. **Job demands:** employees are set realistic targets that do not require them to work unreasonable hours.
2. **Job control:** where practical, staff are given influence over how they do their jobs, have scope for varying working conditions (including flexible working) and are given opportunities to develop and fully utilise their skills.
3. **Job role:** all staff have clearly defined objectives and responsibilities and are provided with good regular management support (including annual ERDPs), appropriate training and adequate resources to do their job.
4. **Communication:** there is effective two-way communication enabling all staff to be involved in decision making and planning, especially during periods of organisational change (e.g. during one to one meetings). Managers should ensure there are processes in place for regular 2-way feedback such as

the use of regular supervisory or workload meetings, team meetings and ERDP discussions either in person or by phone.

5. **Job support:** employees are offered regular supervision. Further guidance on dealing with interpersonal conflict, including an agreed grievance procedure and proper investigation of complaints, is available in the Grievance Procedure.

There is also a requirement for management to be aware of mental health issues/types and the support mechanisms available, as outlined in this document.

## **Legislation, Board Policies and Guidance**

This policy has been developed in line with the following legislation:

- Health and Safety at Work, etc. Act 1974
- The Management of Health and Safety at Work Regulations 1999 (as amended)
- Equalities Act 2010
- The Protection from Harassment Act 1997
- Mental Health (Care and Treatment) (Scotland) Act 2003

This policy should be read in conjunction with the following Board policies and guidance:

- Health, Safety and Wellbeing Policy
- Equal Opportunities Policy
- Stress Management Policy
- Bullying and Harassment in the Workplace Policy
- Attendance Management Policy and Guidance
- Grievance Procedure
- Recruitment and Selection Policy
- Special Leave Policy
- Flexible Working Policy
- Managing Substance Use

## **Risk Assessment**

Under the Management of Health and Safety at Work Regulations 1999, employers are required to undertake an assessment of the risk or potential hazards that may adversely affect the health or safety of employees. Significant hazards should wherever possible be eliminated and, where they cannot, suitable control measures put in place to minimise the risk.

It should be noted that some causes of stress such as job insecurity and occasional increases in work intensity can be difficult to control, but other known triggers can be addressed. Causes of stress that are non-work related but which may influence work should also be considered.

Stress risk assessments for both team and individuals are available on the Highland Council's Health and Safety Intranet site.

## **Support Systems**

### **Occupational Health Advice**

The Board's occupational health provider is able to advise managers on all matters regarding employee health and fitness. In addition, they are able to give advice regarding an employee's capability to work in relation to their health. Advice given by occupational health can also assist in employment decisions to enable employees to return to, or stay in, work (see Appendix 2).

Early intervention (even when the employee is still at work) is the one approach which research shows will have the most positive impact on recovery. (See Appendix 3).

## **Mental Health and Wellbeing Toolkit**

The toolkit, for employees and managers, aims to help with the understanding of mental health and wellbeing, provide sources of support and information and stresses the importance of mental health at work.

## **Mental Health Reps**

Mental Health Reps are Board staff who are trained to provide confidential support and signposting to any member of staff who needs it.

The Mental Health Reps for the department are:

Mandy Thomson – Office & Support Manager  
Jimmy McCarthy – Valuer

## **Counselling Service**

Line Managers can refer staff to confidential counselling services:

- Scottish Counselling Services (Freephone 0800 028 8533)
- Caithness Counselling Services Ltd (07872 109 082)

## **Trade Unions**

Trade Union Representatives also have a key role to play and will provide appropriate support and advice to their members.

## **Training**

Training on mental health and wellbeing is available from the Highland Council's Learning and Development Team.

Mentally Healthy Workplaces aims to:

- Identify the key factors that contribute to a mentally healthy workplace and the factors that help reduce stress.
- Describe some common mental health problems and explain how stress can be a factor.
- Increase understanding and awareness of the legislation/policies that relate to managing stress and ensuring mental health and wellbeing in the workplace.
- Improve confidence in managing stress and dealing with mental health and wellbeing in the workplace.

The course is available either as a workshop or via My Online Learning.

Mental Health Representatives. This will enable reps to:

- Promote mental health in the work place.
- Understand the role of a MHR.
- Fulfil MHR duties.
- Know how to sign post additional sources of support.

## **Stress Awareness**

Gain knowledge and understanding of the effects of stress, develop skills and techniques for managing your own stress, and recognise the positive effects of managing your own stress in the workplace.

For further information on available training please contact the Highland Council's Learning and Development Team.

## **Monitoring**

This effectiveness of this policy will be monitored in terms of:

- Attendance at Mentally Healthy Workplace training.
- Incidence of referrals to occupational health for work-related mental health issues.
- Completion of Stress risk assessments in areas where this is identified as being an issue.

## **Review**

This policy will be reviewed regularly in line with changes to legislation and best practice.

## **Appendices**

The following appendices are included in this policy and guidance:

1. Causes and types of depression and common mental health conditions.
2. Reasonable adjustments.
3. Early intervention.
4. Recognising behavioural changes at work.
5. Further support and sources of information.

## **Causes and Types of Depression and Mental Health Conditions**

Brief descriptions of the most common mental health conditions are given below. It is worth noting that many mental health problems do not have specific conditions and affect people in different ways.

Mental health problems range from the worries and grief we all experience as part of everyday life, to the bleakest depression or being out of touch with everyday reality. On average one in four of us will experience a mental health problem in the course of a year. Whether you, your colleague, a friend or someone within your family suffers from mental ill-health, knowledge on the subject can help understand a particular type of ill-health or just allow you to be better informed.

Everyone's experience of depression is different.

### **Causes of Depression**

Depression is often the result of many underlying factors and can be triggered by an unhappy event such as the death of a loved one. In cases where feelings of depression exist with no apparent source, the depression may get worse due to the person experiencing the depression being unable to understand it. Factors include personality, environmental or biochemical factors or chemical imbalance in the brain. Such imbalances often lead to a lack of interest in life and a general withdrawal from social activity.

Several specific types of depression have been identified as follows:

#### **Reactive depression**

Triggered by a traumatic, difficult or stressful event, people affected will feel low, anxious, irritable and angry.

#### **Endogenous depression**

Endogenous depression occurs without a particular bad or stressful event or situation having triggered it. Those affected by this common form of depression will experience physical symptoms such as weight change, tiredness, sleeping problems and low mood, as well as poor concentration, low self-esteem and general withdrawal from participation in social activities. Endogenous depression generally responds well to medication.

#### **Manic depression/Bi-polar disorder**

People with manic depression/bi-polar disorder experience mood swings, with 'highs' of excessive energy and elation, to 'lows' of utter despair and lethargy. Delusions or 'hallucinations' can also occur. Most people with this condition have their first episode in their late teens or early twenties.

#### **Postnatal depression**

Many new mothers will experience 'baby blues': mood swings, crying spells and feelings of loneliness three or four days after giving birth. Postnatal depression will however last for much longer and will include symptoms such as panic attacks, sleeping difficulties, having overwhelming fears about dying and feelings of inadequacy and being unable to cope. Postnatal depression affects between 10% and 20% of new mothers. It develops slowly, making it difficult to diagnose.

#### **Anxiety**

Anxiety is a feeling of unease. Everybody gets anxious when faced with a stressful situation, for example an exam or interview, or during a worrying time such as illness. It's also normal to feel anxious when you face something difficult or dangerous. Mild anxiety can often be positive and useful, particularly if you are better at working under pressure.

About one in 10 people in the UK are affected by 'troublesome' anxiety. This is considered an anxiety disorder when it's long-lasting, severe and is interfering with everyday activities. Excessive anxiety is often associated with other mental health problems such as depression.

Constant and unrealistic worry about any aspect of daily life can lead to restlessness; sleeping problems; increased heartbeat; stomach upset; muscle tension; trembling. Severe anxiety can be linked to panic attacks, phobias or obsessive compulsive disorder.

## **Schizophrenia**

A common misconception is that people with schizophrenia have a split personality. This is untrue. In addition, schizophrenia does not mean a person will automatically be violent, ill, or in hospital, and it can be treated successfully. Approximately one quarter of people with an initial diagnosis of schizophrenia make a complete recovery. Major advances in recent years, in psychological therapies and medication, mean that more people with schizophrenia are able to live fulfilling lives.

People with schizophrenia often have unusual experiences where they feel out of control, as well as lack of energy and low motivation. The symptoms and severity vary widely from person to person. Generally speaking, during an episode of schizophrenia the way someone experiences and interprets the outside world becomes disrupted. They may lose touch with reality, see or hear things that are not there, develop false beliefs i.e. that other people can read their thoughts, and act in unusual ways in response to these experiences.

An episode of schizophrenia can last for several weeks and can be frightening or disturbing for the person themselves and their friends or family. After this acute phase, people can go into a long-term period of 'negative' symptoms including lack of motivation, a feeling of flatness and social withdrawal, sometimes with less intense symptoms left over from the acute phase.

Schizophrenia affects approximately 1% of the population. It is often triggered by a stressful event for those who are vulnerable to the disorder and is generally inherited. It is not a constant or static condition and is caused by a chemical imbalance in the brain.

## **Stress**

Stress is an individual's natural reaction to excessive pressure – it is not a disease.

However, it can lead to mental and physical ill-health, for example depression, if it is excessive and goes on for some time.

The psychological symptoms of stress include:

- Fatigue
- Poor concentration
- Sleeplessness
- Irritability
- Depression
- Anxiety
- Changes in appetite

Sources of personal stress include:

- Physical/psychological ill-health
- Lack of support at home
- Financial worries

- Relationship breakdown
- Personality type (Type A - perfectionist, driven, competitive)

Preventing stress means achieving a balance between demands and the capacity to respond to them. Learning to recognise what we find stressful in the work environment and what helps us work well. Taking action, however small, can improve our life at work and stop us feeling trapped or the victim of people's demands.

### **Seasonal Affective Disorder**

Known as SAD, this type of depression generally coincides with the approach of winter. Symptoms will include wanting to sleep excessively and cravings for carbohydrates or sweet foods. Special light boxes (especially when used for an hour first thing in the day) can be used to treat this kind of depression. Approximately 4-6% of the population suffer from SAD.



### Reasonable Adjustments

If mental ill-health affects an individual's ability to carry out day to day activities then they are likely to be covered by the Equality Act 2010 and the Board is required to make reasonable adjustments in the workplace/work activities to support them.

The first step in making reasonable adjustments for someone with a mental health problem is to have an open and frank discussion. Adjustments need to be agreed between the employer and the employee or applicant. Every reasonable adjustment is unique to the individual's specific needs and abilities, and the requirements of the employer.

Some mental health problems can be episodic: a person can experience long periods when they are perfectly well, but may then experience a further episode of difficulty. The times when they are unwell will not always be the same, but there may be symptoms or issues that are common to each episode. So rather than agreeing one or more specific adjustments that will apply all the time, it may be more helpful to agree adjustments that can be implemented when they are needed, and revoked when they are not.

In order for reasonable adjustments to be constructive, they must focus on what the person can do – not on what they can't. It is also important that you do not make promises that you are unable to keep: be realistic.

Be clear about what you need to know. Staff should not feel they have to disclose every aspect of their mental health problem: your discussions should focus on the problems they are experiencing in the workplace, and what actions can be taken to address them.

This information sheet suggests some reasonable adjustments. Not all of them will be suitable, and it is not an exhaustive list: there may well be others that staff would like to be considered.

**Remember: if you are not sure what will help someone – ask them!**

### Practical solutions

#### Adjust the recruitment process

- Provide more time for tests, assignments or interviews;
- Allow applicants to come in early to orient themselves;
- Provide a quiet area for applicants to wait in, rather than a busy reception.

#### Amend the induction

Advise the new employee about the standard induction and ask if there are any areas that might cause them difficulties. If so, could you adjust the process, without reducing its effectiveness? For example, offering a mentor, arrange additional support for the first few months, agree a longer induction process, and/or provide induction information in writing as well as verbally.

## **Allow variations in working hours**

There are many reasons why someone might need to adjust their hours. They might need to access a service that is only available during working hours, or they might find it difficult to function in the morning, perhaps as a result of prescribed medication, but be able to work well later in the day. Just moving someone's start and finish time ahead by an hour might make all the difference to their ability to do their job well.

- Allow several short breaks instead of one main lunch break. Some people might have difficulty in concentrating for long periods: breaking up their working day differently could help.
- Permit more breaks at certain times. If someone is doing particularly stressful work, could the frequency/duration of their breaks be increased to allow them time to recover?
- Allow the person to change their workplace. For some people, noisy environments might adversely affect their mental health at times: could they work somewhere else?
- Ensure access to natural light and fresh air. Many people benefit from sitting near to a window, particularly if they are able to open it to allow fresh air to circulate.
- Move their workstation. Would it be helpful to be based in another position – e.g., so their back didn't face the door?
- Provide a quiet space for breaks. A quiet place away from the main workspace is helpful for many people.

## **Other actions**

- Agree an "advance plan". You might be unsure about how to handle changes in an employee's mental health. It could help to discuss this when the person is well, and agree how you will deal with any recurrence of mental health problems.
- Agree changes to communication methods. For some people, there may be times when it is hard to communicate face-to-face. At these times, you could agree that they can communicate by email, or work from home.
- Allow changes to tasks when needed. When a person is unwell or has just returned from a period of absence, it may be helpful for them to focus on a particular type of task. Could they swap some tasks with a colleague, or work to a different job description for a time? This can help to rebuild confidence.
- Provide more support when needed. Many employers already require regular meetings between line managers and staff. If you don't, you could consider introducing them as an adjustment, and if you do, it might be helpful to increase the frequency of these meetings at certain times. Sometimes all that's needed is time to talk things through.
- Implement a "buddying" system. Some employees might find it helpful to have a "buddy", coach or mentor for a time, to provide advice, guidance or support.
- Agree an "early warning" system. Some people might want to ask a specific colleague to alert them if their behaviour starts to change in a way that suggests their mental health is deteriorating. This can identify triggers for pre-agreed adjustments to be put in place.
- Allow the use of headphones. This can help people who have difficulty concentrating or who sometimes hear voices.

## **Communication**

- Communicate Board policies to staff. It is important to make clear that reasonable adjustments are not about unfair advantages or favouritism, but are a way of removing barriers preventing people with disabilities from making a full contribution in the workplace – or sometimes from contributing at all.
- Let staff know it's okay to talk about mental health. There is still a lot of stigma around mental health problems, which may make staff reluctant to tell someone they need an adjustment. Set out clearly what will happen when someone discloses a mental health problem.

### **Tell those who need to know about the adjustments**

When you make a reasonable adjustment for someone, do inform any staff who need to know about it. This does not mean that you need to tell other staff about the person's disability: you just need to ensure they know about the arrangement, so that they do not prevent reasonable adjustments from working.

## **Early Intervention**

Research shows that being in work has a positive impact on recovery for individuals with mental health problems. An approach of early management intervention will benefit those employees who develop a mental health problem, in terms of discussing possibilities such as:

- Temporary change to working hours
- Time off to attend counselling

This can help the individual and avoid the problem increasing to the stage of the employee going on sick leave. Similarly, for those who have been off work with a mental health problem, early intervention is encouraged to prevent any further decrease in confidence and ensure that, at all times, the employee still feels part of the organisation.

This involves keeping communication channels open and, when appropriate, formulating a structured return to work by phasing hours of work and tasks back in slowly to build confidence and a sense of achievement. Managers should always act on the advice of occupational health in these matters. They should also liaise with the Highland Council's Human Resources Team for assistance with this, and in particular with the Employee Development Team in terms of soft-skill courses which may benefit the employee in their return, e.g. Assertiveness Skills. (Please consult the Board's Managing Attendance policy and guidance for more information on managing long-term sickness and facilitating a return to work).

## Recognising Behavioural Changes at Work

### Information for Employees

A positive approach to mental health at work can help prevent problems. Being aware of how we and our colleagues behave whilst at work can assist in identifying changes in behaviour.

Look out for physical and mental symptoms such as:

- Indecisiveness
- Poor concentration
- Feeling very low or numb
- Constant tiredness
- Frequent headaches
- Feelings of hopelessness
- Anxiety
- Extreme Guilt
- Loss of energy and motivation
- Agitation
- Loss of confidence
- Loss of humour
- Irritability
- Poor sleep
- Tension
- Tearfulness

Be aware of changes in behaviour at work, such as:

- Poor time keeping
- Withdrawal from social contact
- Indecisiveness
- Increased use of alcohol, tobacco or caffeine
- Poor performance
- Unusual absence
- Poor judgement

If you experience five or more of these symptoms for more than two weeks, if you are having suicidal thoughts or if any of these symptoms interfere with work or family activities, consult your GP in the first instance.

The majority of mental health problems go away completely in two months. However they have to be diagnosed and the correct treatment administered to do so. The earlier the symptoms are recognised and treated, the earlier the recovery.

## Further support and information

**Disclaimer:** The Board is not responsible for the content of external internet sites.

Please visit your GP in the first instance if you are concerned about your health.

## Useful addresses, contacts and websites:

**Action on depression** [www.actionondepression.org](http://www.actionondepression.org)

**Alzheimer Scotland** Inverness Group – 01463 711707 Freephone help-line: 0808 808 3000 24 hours per day.

**Breathing Space** Scotland Telephone: 0800 838 587 6pm-2am daily for free and confidential phone-line advice. [www.breathingspacescotland.co.uk](http://www.breathingspacescotland.co.uk) provides comprehensive information on emotional problems and depression.

**Befrienders Highland:** a voluntary organisation and charity that provides a free 1 to 1 befriending service for people across the Highlands who have experience of mental ill-health and feel lonely and isolated, either socially and/or geographically.

For further information and to obtain a copy of their newsletter called “Wee Blether” please visit [www.befriendershighland.org.uk](http://www.befriendershighland.org.uk)

**British Association for Counselling and Psychotherapy (BACP)** [www.babcp.com](http://www.babcp.com) for information on behavioural therapy and cognitive therapies and for local practitioners

**CRUSE** – Bereavement Service [www.crusebereavementcare.org.uk](http://www.crusebereavementcare.org.uk)  
Support service Telephone: 0844 477 9400 9.30am-5pm Tuesday - Friday

**Gatepost** – listening and support service from the RSABI for the farming and land-based community: 0300 111 4166 Mon-Fri 9am-5pm [www.rsabi.org.uk/gatepost](http://www.rsabi.org.uk/gatepost)

**Highland Recovery Network (HRN)** – online resources to support recovery from mental health problems in Highland - [www.highlandrecovery.org.uk/](http://www.highlandrecovery.org.uk/)

**Living Life** – free, confidential telephone service based on Cognitive Behavioural Therapy run by NHS 24, aimed at those over 16 who are feeling low, depressed or anxious. Tel 0800 3289655 [www.nhs24.com/UsefulResources/LivingLife](http://www.nhs24.com/UsefulResources/LivingLife)

**Living life to the full** – Online, supported cognitive behavioural therapy course [www.livinglifetothefull.com](http://www.livinglifetothefull.com)

**Mental Health Foundation** Telephone: 0141 572 0125 [www.mentalhealth.org.uk](http://www.mentalhealth.org.uk)  
Website provides an A-Z guide on mental health problems and treatment.

**MIND** Website provides comprehensive information on treatment for mental health problems including Cognitive Behavioural Therapy (CBT). Further information including details of your nearest local Mind Association, contact [www.mind.org.uk](http://www.mind.org.uk) or call 0845 766 0163.

**Saneline** Telephone: 0845 767 8000 1pm-11pm daily  
[www.sane.org.uk](http://www.sane.org.uk) offers information on local support groups.

**See me Scotland** – Provides information on tackling the stigma of mental ill-health.  
[www.seemescotland.org](http://www.seemescotland.org)

**The Institute for Complimentary Medicine (ICM)** Provides information on complimentary medicine  
[www.i-c-m.org.uk](http://www.i-c-m.org.uk)

**The Samaritans** Telephone: 24 hours a day/ 365 days a year 0845 790 9090  
[www.samaritans.org](http://www.samaritans.org) Emotional support email address is [jo@samaritans.org](mailto:jo@samaritans.org)

### **Suggestions for further reading**

There are many publications on the topics of Mental Health and Wellbeing which can be sourced from your doctor or local library.

The **Well Read** scheme facilitates a bookshelf on mental health issues in all Highland libraries.  
<http://www.highland.gov.uk/leisureandtourism/libraries/librarynews/wellread.htm>

### **Remploy**

Remploy (<https://www.remploy.co.uk/employers>) offer a free support service which is available to individuals with a mental health condition, who are absent from work or finding work difficult and is aimed at helping them to remain in, or return to, their role.

To be eligible for this service, individuals must meet the following criteria:

- Be in permanent or temporary employment (attending work or signed off sick)
- Have a mental health condition that has resulted in workplace absence, or is causing difficulties to remain at work.