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Australian Public Service Commission
Comcare

as one

Working Together: Promoting mental health and wellbeing at work



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Foreword

This guide, *Working Together: Promoting mental health and wellbeing at work*, is a key initiative of *As One—APS Disability Employment Strategy*. The guide aims to empower managers and employees to work together to build inclusive workplace cultures and effective systems for promoting mental health in the Australian Public Service (APS).

We will all be touched by mental ill health at some stage in our lives and some of us live with a mental health condition. Leaders and managers must build their levels of confidence around mental health issues to better include people with mental ill health in our teams, and to enable appropriate support of employees during illness and recovery.

The guidance in *Working Together* is of two types—technical (improved processes and procedures, including early intervention) and cultural (attitudinal and behavioural changes, such as understanding and connecting with each other). The former we can implement relatively quickly, but the latter may take time. The success of the guide relies on its adoption. This will require perseverance, courage, commitment and leadership.

Healthy workplaces deliver greater productivity, improve workforce participation and increase social inclusion. It's important to get this right because the consequences of ill health on individuals, their families, communities and the economy are profound.

We are excited that this guide can help us to do more for mental health and wellbeing at work. In its development, we have consulted with experts including employees with lived experience of mental ill health, the National Mental Health Commission, *beyondblue*, the Australian Human Rights Commission, the Diversity Council and our colleagues across the APS. We wish to thank the great number of people who contributed, particularly Dr Peter Cotton and Dr Mark Creamer for their expertise.

We are determined to promote a quality of working life that is good for everyone's mental health and to do what we can to support people with mental health conditions to fulfil their potential at work.



Stephen Sedgwick AO
**Australian Public
Service Commissioner**



Paul O'Connor
CEO Comcare



'Please don't put the label 'ill' on me for the rest of my life. My attitude is that I'm living and functioning with a health condition, just like many others. It is this attitude that helps me be a higher achiever and maintain my dignity and self-respect in the face of stigma.'

An APS employee

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The background is a solid red color. Two large, thin white circles are overlaid on the page. One circle is positioned in the lower-left quadrant, and the other is in the upper-right quadrant. They overlap each other in the center of the page.

This guide recognises the World Health Organization’s approach that good mental health is much more than the absence of a diagnosed condition:

‘Mental health is defined as a state of wellbeing in which every individual realizes 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.’¹

Part one

Introduction

1.1 A working life approach to mental health in the APS

Mental health is an important issue for the Australian Public Service (APS). The workplace has a significant influence on people's health and wellbeing. Creating the right work environment and managing potential sources of harm (such as high work demands, low levels of control and poor support) will benefit everyone at work. Improving mental health through work will help us to realise the health benefits of work. It underpins the drive towards greater productivity and social inclusion.

We will all be affected at some stage of our lives by mental ill health—either personally, or in our families or our workplaces. There will be people in our workplaces who are successfully managing anxiety or depression or less prevalent mental health conditions. We need to overcome stigma, prevent marginalisation and provide flexibility to overcome barriers to making a full contribution in work.

It can be challenging for managers to understand mental health conditions, how mental ill health can affect an employee, and how to respond. On top of this, managers need to be aware of the legislative framework relevant to managing mental health, including the *Work Health and Safety Act 2011*.

Health status can change over time and managers need to recognise and respond to warning signs of ill health so that employees are assisted to find the right help and support. When an employee is off work due to ill health, managers have a critical role in providing suitable work arrangements and support to enable a constructive return to work.

That is why information in this guide takes a holistic approach to the employment life-cycle and provides practical assistance and links to trusted resources. It will help managers understand how they can create

a healthy workplace and support those who may be experiencing mental ill health at work.

1.2 How to use this guide

The aim of this guide is to summarise good practice and provide practical information and advice regarding psychological health and wellbeing in the workplace. Mental health is a complex area—things are rarely black and white—so it is important to interpret the advice in this guide according to the needs of the specific situation.

The guide is organised around four principles, endorsed by the APS Diversity Council, which describe the commitment of the APS to best practice for mental health and wellbeing.

1 People management: Supervisors and managers understand how to recognise and manage potential mental health issues, especially as they relate to performance management.

Supportive, responsive and inspiring managers who understand their employees and teams make an enormous difference to the mental health of their employees. People management practices throughout the employment life-cycle (from recruitment through to separation) help to create engaged, high performing teams that support employees' mental health and wellbeing.

Effective leaders know the value of committing to their people and integrating health and safety and wellbeing into everyday business. Leaders need to give high priority to prevention, early intervention and embracing the health benefits of work. Senior leaders set the 'tone at the top' and tackle the challenges to a life in work for those with mental health conditions.

2 Prevention: Workplaces foster a culture that promotes the health benefits of work, psychological health and wellbeing and minimises the development of mental ill health.

Management actions can help to create workplaces that are good for mental health and wellbeing and prevent harm to mental health caused by job-related stress, poor work design and management practices. Workplace conditions, which include good quality jobs, are strongly related to engagement and emotional health and wellbeing, and reduce the negative consequences of disengagement, ill health and sickness absence.⁴

3 Early recognition and support: Processes are in place to recognise and manage risks to psychological health when they arise, tailored to the specific needs of the workplace, and managers proactively manage workplace behavioural issues.

Recognising when someone may be unwell and offering support and assistance can help employees to manage work demands. Early intervention may prevent the employee from becoming ill, taking long-term sick leave or from needing to submit a workers' compensation claim. Early intervention also benefits the team as it helps to maintain optimum team cohesion and functioning.

'Work is the most effective means to improve the wellbeing of individuals, their families and communities...'

Professor Sir Mansel Aylward²

4 Rehabilitation and return to work: When mental health issues are identified, pathways and processes are in place to ensure easy access to effective care and rehabilitation.

Too many employees leave the labour market unnecessarily due to ill health. This can affect the individual's wellbeing, their family, their friends and the community. The workplace culture and systems of work are critical to supporting employees with mental health conditions—helping them to stay at work, or return to work quickly, and participate in meaningful and productive duties.

This guide contains:

Information sheets: the guide provides stand-alone information sheets on key topics to help managers when it is needed. The topics for these information sheets were identified from a survey of agencies by the Australian Public Service Commission in early 2012.

Employee life-cycle: Appendix A to this guide depicts the typical employment life-cycle of an APS employee and provides links to information relevant to the management of employees with mental health conditions.

Glossary: Appendix B contains a glossary of terms to help managers understand important common aspects of mental health and disorders. 'Mental health condition' is used as a broad term to describe a range of mental ill health circumstances, from relatively mild symptoms to severe mental disorders, which may or may not affect how a person does their job. Mental illness is a disturbance of mood or thought that can affect behaviour and distress the person or those around them. Mental health conditions include common problems such as anxiety and depression, as well as less common disorders such as bipolar disorder and schizophrenia. Some people may experience severe and disabling symptoms as a

result of a long-term condition, and may identify as a person with disability.

Resources: a list of resources can be found in the ‘useful tools’ section in the information sheets. For those wishing to explore a particular area in more depth, many resources are available and most are free to download from the internet—see Appendix C.

1.3 The case for investing in mental health and wellbeing

The APS needs a healthy, engaged workforce to ensure it can meet the challenges faced by a modern public service. Increasing demands for improved services for citizens and for greater efficiency in agencies can put pressure on managers and employees alike to ensure that productivity and performance remain high.

People are also working to an older age, and the way work gets done is changing—people are working from home, in new industries and with new technologies. We see changing expectations of work, flexibility, reward and engagement. We need to find ways to promote psychological health and wellbeing in this context.

Participation in ‘good work’ will drive health and productivity improvements. Recent Australian evidence shows that we have to get this right.⁶ A poorly designed or poor quality job where people feel insecure, overloaded or do not have much control over how they manage their work, will not deliver

Mental disorders account for 13.3% of Australia’s total burden of disease and injury and are estimated to cost the Australian economy \$20 billion annually in lost productivity and labour participation.⁷

‘I think it’s important that leaders at all levels of organisations see this as fundamentally part of their job Not just about keeping your workplace safe, you know, stopping that spinning blade or that hole in the floor—looking at what the mental health environment that people are working in, in the workplace, looks like. And, I suppose, walking the walk.’

Kate Carnell AO, CEO *beyondblue*³

these benefits and can be more harmful to health than having no job at all.

Fostering a positive work environment that promotes mental health and wellbeing is fundamental to building organisational health and makes good business sense.⁸ The research is clear that workplaces that protect employee health and provide flexibility to take account of an employee's health status are among the most successful over time.⁹ Long term sickness absence or resulting unemployment on the other hand, can have a negative impact on health and wellbeing. Good work is an effective means to improve the wellbeing of workers, their families and communities.

Creating mentally healthy workplaces delivers improved productivity, improves workforce participation and increases social inclusion. It is the core people management environment that is crucial here. Fostering more supportive, positive and engaging team environments increases resilience, enhances positive early intervention outcomes, and reduces the impact on individuals' mental health.

The benefits go beyond simply reducing the costs associated with negative outcomes (e.g. absenteeism, mental health disorders, and psychological injury compensation claims). Organisational practices that improve employee psychological health and wellbeing (and reduce the incidence and duration of mental health symptoms) also result in improved

performance for people with or without a mental health condition.

Some of the evidence from recent research findings is summarised below:

- Organisations with strong organisational health (i.e., investment in quality people management) typically exhibit better service delivery performance.¹³
- Organisational health is associated with stronger financial performance, typically 2.2 times above average.¹⁴
- Approximately 30% of the variation in service delivery outcomes at a team level is attributable to organisational climate, specifically, the quality of supportive leadership and people management practices.¹⁵
- 70% of failed organisational change programs are attributable to poor organisational health.¹⁶
- Just under 7% of employees in any organisation will develop clinically significant depressive symptoms in any one year.¹⁷
- On average, every full-time employee with untreated depression costs an organisation \$9,665 per year.¹⁸
- Implementing effective early intervention programs results in a five-fold return on investment, due to increased employee productivity.¹⁹

Promoting health and preventing harm to mental health and wellbeing is important because:

- **It's the right thing to do**—leaders and managers have a social and corporate responsibility.
- **It's the law**—leaders and workplaces are legally required to prevent harm to health and safety¹⁰ and not to discriminate in employment on the basis of mental health.¹¹
- **It's the smart thing to do**—promoting mental health and preventing harm makes good business sense for a high performing APS.¹²

- Supportive leadership and sound people management can reduce frequency and costs of workers' compensation premium rates. This impact extends beyond psychological injury claims. National research indicates that workplace psychosocial factors can contribute up to 59% of the risk for the onset of musculoskeletal injuries in the workplace.²⁰
- Ensuring people with mental health conditions are able to keep their job will boost productivity and support social inclusion.²¹
- Removing obstacles to keeping employees at work, and minimising time off work, is associated with better long term mental health and wellbeing outcomes.²²
- Early intervention—specifically, early identification and facilitating access to quality mental health care—is associated with a **492% return on investment** (calculated by comparing early intervention and treatment costs with subsequent reduction in absenteeism and improvement in work performance).²³

One additional point to emphasise is that there is overwhelming evidence that work is generally good for mental health and wellbeing.²⁴ Employees spend a considerable amount of time at work, so the workplace can be used to help change the health of Australians. Using the workplace to drive important behavioural changes, we can head off problems and intervene early. To realise these health gains and to improve the work retention of people with injury, illness or disability, we need to promote the positive links between work and health. The APS needs to strengthen workplace retention policies to ensure employees with mental health conditions are able to keep their jobs and continue to be productive in their work.²⁵

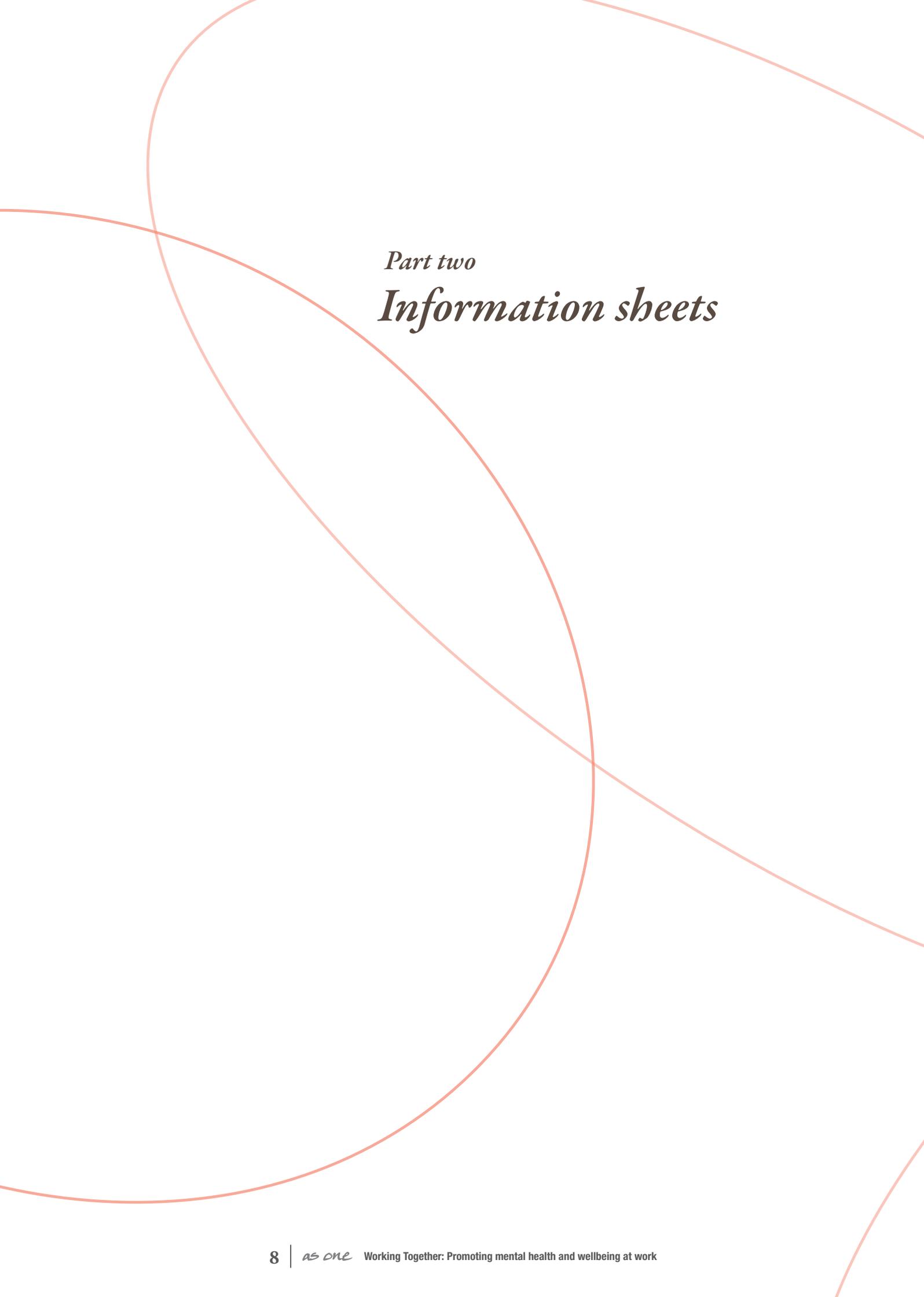
'Australians need flexible and supportive workplaces, where employment discrimination on the basis of mental health is eliminated and employers and employees are provided with support so that the potential of the individual and the business are maximised.'¹⁵

National Mental Health Commission

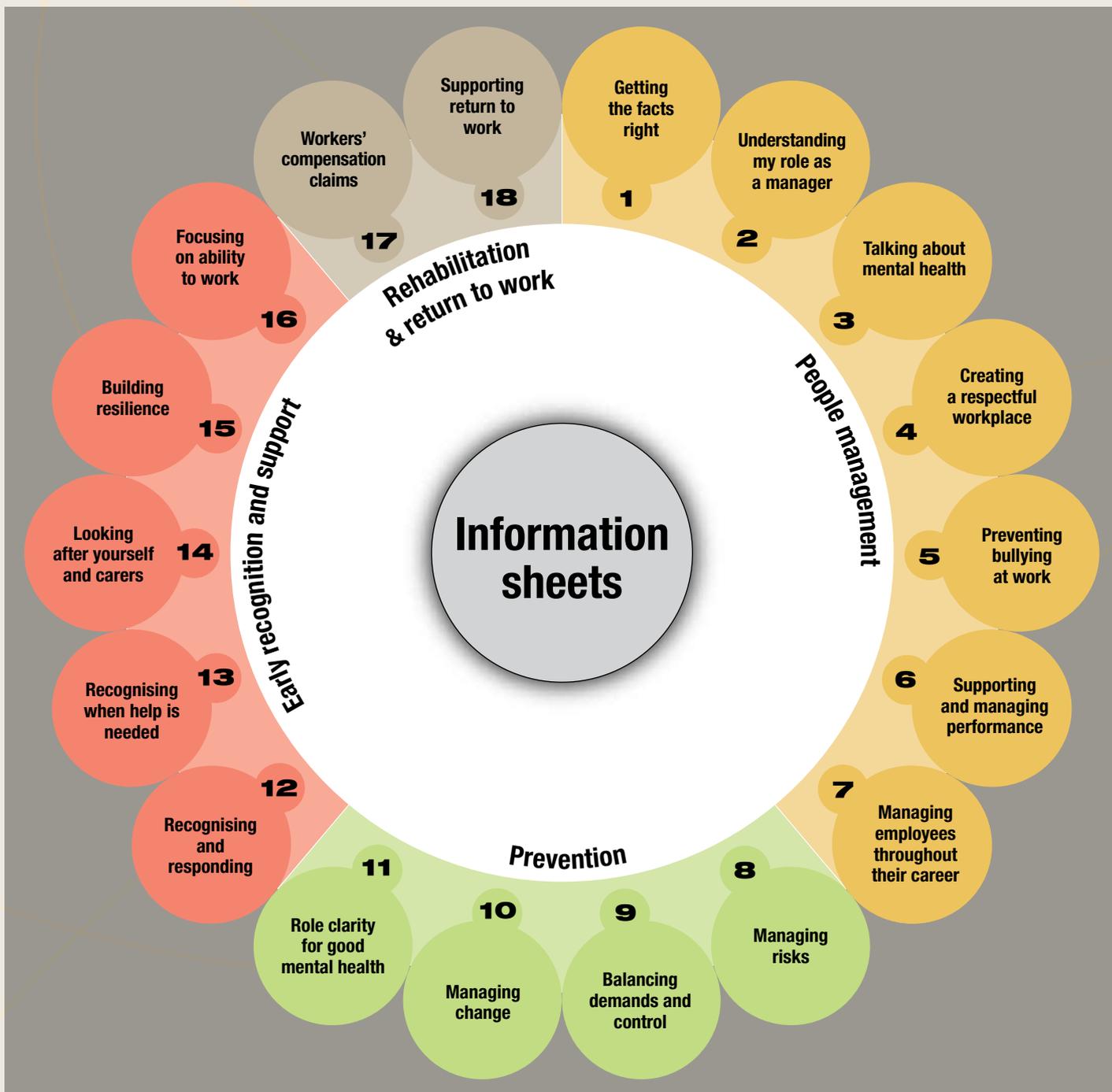
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Part two
Information sheets



people management

**Getting
the facts
right**

1

In recent years we have seen an increase in mental health literacy in the general community. Considerable efforts have been made by organisations such as *beyondblue* to educate and de-stigmatise the area of mental health. Despite these efforts, there is still some way to go and many myths and misunderstandings exist, particularly around the work capacity of people with mental health conditions. It is often this misunderstanding that drives prejudice, discrimination, and intolerance towards people with mental ill health.

What is a mental health condition?

Mental health conditions influence not only how someone feels (e.g., sad, frightened, worried, angry) but also how the person thinks, behaves and interacts with other people. There are several types, but the main groups are:

Mood disorders, like:

- depression (persistent sad mood, unmotivated, low energy, unable to find enjoyment)
- bipolar disorder (when depression symptoms alternate with extreme 'highs'—elated, buzzing with activity and ideas, over-confident to an extreme).

Anxiety disorders, like:

- social anxiety (being terrified by what other people might think)
- panic disorder (bursts of extreme anxiety with a range of physical symptoms)
- agoraphobia (avoidance of situations and places that evoke fear of a panic attack)
- obsessive-compulsive disorder (excessive checking, washing, or other rituals)
- post-traumatic stress disorder (psychological distress following a traumatising event)
- generalised anxiety (excessive worry about many aspects of life).

Psychotic disorders:

- schizophrenia (which includes strange experiences and beliefs, such as hallucinations and delusions, as well as social withdrawal and 'flat' emotions)
- some depression or bipolar disorders (when people also have hallucinations or delusions associated with their lows or highs).

Personality disorders are slightly different—they describe maladaptive patterns of thinking, feeling and behaving that characterise the person across situations. Personality is regarded as being on a continuum from 'normal' to 'abnormal or disordered'. Increasingly, diagnostic systems now recognise 'maladaptive traits' or personality-based difficulties that fall between normal and abnormal personality. The presence of these personality factors can complicate other mental health conditions such as anxiety and depression, and interfere with social and occupational functioning.

Substance abuse is a related issue that can have a devastating impact on the person's ability to function at work and to relate to their friends and family.

How common are mental health conditions?

Mental health conditions are very common. The latest mental health survey conducted by the Australian Bureau of Statistics revealed that around one person in five (20%) had experienced a mental health disorder in the last 12 months and over twice that number (45%, or nearly half the Australian population) had experienced one at some time in their lives.

We know that one in five adults, or 3.2 million people, in Australia will experience a mental health difficulty such as depression, anxiety or a substance misuse disorder in any year.¹

Along with these frequently occurring mental health conditions, 2 to 3 % of the adult population will experience a severe mental health condition such as schizophrenia or bipolar disorder.²

What are some of the myths about mental illness?

Myth: People with mental health conditions cannot work.

Many people with mental health conditions, across a wide range of workplaces, are highly successful employees. Organisations employing people with mental health conditions report good attendance and punctuality, as well as motivation, quality of work, and job tenure on par with or greater than other employees. Of course, people with mental health conditions can succeed or fail, just like any other employee. Things work best when there is a good match between the employee's needs and their working conditions. Mental health problems can affect anyone, especially if the person is put under extreme stress for prolonged periods.

Myth: Once people develop mental ill health, they will never recover.

Medical professionals now have very effective psychological and pharmacological treatments for mental health conditions, with most people showing large improvements and some recovering completely. Many different factors contribute to the development of these conditions, so it can be difficult to predict with accuracy the degree to which any individual will recover. When we talk about 'recovery' we are not just talking about a reduction of symptoms; we are also talking about being able to live a fulfilling and productive life—and, for most of us, that includes work.

Myth: People with mental health conditions are dangerous.

This is one of the most damaging stereotypes. People with a mental health condition are very rarely dangerous or violent. It is much more likely that people with mental health conditions will be subject to violence rather than being violent themselves.

Myth: There's nothing I can do to help someone with a mental health condition.

You can do a great deal—support from others is one of the biggest factors in recovery for most people. We can start by developing a supportive and inclusive workplace culture that builds on people's strengths and promotes good mental health. It is entirely inappropriate to use derogatory labels like 'crazy', and we should learn the facts about mental health and educate others around us. We must treat people with mental health conditions with respect and dignity, just as we would anybody else.

You can also help people who have a support role for a person with a mental health condition—flexible and understanding workplaces allow carers or support people to undertake their additional role as and when needed.

Myth: Mental ill health is a form of weakness.

Mental health conditions are a result of a complex mix of genetic vulnerability and temperament, early life experiences, and current circumstances. Major stressors (like losing a loved one, financial or health issues, legal issues, work overload) can be significant contributors in precipitating mental health conditions. Any one of these areas, if sufficiently severe, may explain the onset, or a combination of less severe factors in several of these areas may also be enough to explain the condition. Either way, it is not the person being 'weak'—telling them to toughen up and pull themselves together will not help. The same applies to addictions like alcoholism, gambling, or eating disorders. The individual is not morally weak or 'bad'—the explanation is a combination of biological, sociological, and psychological factors. The fact is that anyone can develop a mental health condition.

endnotes

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people management

**Understanding
my role as
a manager**

2

Supportive and responsive managers understand the needs of employees and help break down the stigma and discrimination surrounding mental health. This doesn't require specialist skills or knowledge—it can be achieved by using the full range of people management practices such as effective communication, work design, performance management and provision of reasonable adjustments.

Why it matters

With at least one in five Australians experiencing mental health conditions each year, many will experience mental ill health in the workplace. People with mental health conditions are working in all levels of employment and flourishing, and with the right management practices and work arrangements even those with severe conditions can be highly effective and fulfilled employees.

As a manager, you are in a position to note changes that may indicate problems, before there is a need for extended absence from work. You have a role in supporting employees returning to work following absences.

'[I]t is incumbent upon all of us, to work together to improve workplace health. Every one of us should have the opportunity to benefit from the positive impact good work has on physical and mental health, especially those with existing mental health conditions.'

Dame Carol Black, former National Director for Health and Work, Department for Health, UK

Under the *Work Health and Safety Act 2011* workplaces need to prevent harm to the health and safety of workers. This includes physical and mental health. Under the Act, an officer is a person who makes, or participates in making decisions that affect the whole, or a substantial part, of a business or undertaking. Officers have a duty to be proactive and continuously ensure that the business or undertaking complies with relevant duties and obligations. See <www.comcare.gov.au> for more information on your role under this legislation.

How it's done

Leadership actions

Leaders at all levels are critical for creating a culture of good mental health and wellbeing. Comcare's Centre of Excellence in Mental Health and Wellbeing at Work has defined leadership actions which are critical for success.

These are:

- Focusing on mental health at work by establishing principles that are integrated into work design, people management practices, business processes, leadership and staff development programs.
- Assessing the risks to mental health and wellbeing and taking action to continuously improve culture and systems at work, including promoting a culture free from bullying and harassment.
- Providing managers with capability and support to help employees adapt to challenge and change and holding them accountable for this work.
- Raising awareness in the workplace to eliminate discrimination, reduce stigma and help people to recognise early warning signs and know how to respond to mental ill health.
- Promoting a culture which supports ability to work and supports managers to make adjustments to accommodate ill health.
- Involving people at work in decisions on how their work is undertaken, including changes that affect them directly.
- Providing clear expectations, tools and support for performance improvement and holding people accountable for their behaviours in the workplace.
- Monitoring agency needs in relation to programs such as the Employee Assistance Program, mental health training and rehabilitation services to improve functioning and foster participation in work.
- Taking an active role in ensuring that people with longer term incapacity for work due to mental health conditions are offered pathways back to employment.
- Providing employees with access to information and support to optimise their involvement in health, recovery and return to work.

It's OK to talk about mental health

Sometimes people think that mental health is a private issue that should not be raised or discussed. *This is not true.* As a manager, your role is to respond to the early warning signs by asking the individual if they are OK and offering support.

Promote health and prevent harm

Just as the workplace can promote good mental health through meaningful work, work can harm mental health through poorly designed jobs and exposure to workplace hazards and risks. Your role is to:

- Design the work of your team in a way that does not cause undue stress or excessive workloads, and supports work-life balance
- Manage work demands and resources
- Match employee capability with the job requirements
- Assess and manage workplace risks
- Build supportive working relationships
- Promote work-life balance
- Understand and communicate your agency's policies on matters such as reasonable adjustment and performance management to your employees.

Recognise and respond to early signs of mental ill health

It is not your role to diagnose a mental health condition or to be a counsellor. But you can choose to act when you see something out of character or you are concerned about signs of mental ill health.

Mental health, like physical health, is a continuum. Sometimes people will display early signs of mental ill health or distress. Regardless of whether it is due to work or personal circumstances, your role is to recognise and respond to early signs of mental ill health. This includes:

- identifying when a decline in ability to cope, performance or unplanned absence might be due to a mental health condition
- having a conversation with the employee and offering assistance
- if appropriate, discussing with your human resources team whether a fitness for duty assessment is warranted.

Take time out to get to know your team.

Understand the skills, capability, and interests of your team, including health and motivations at work.

This will help you to build working relationships with your employees based on mutual trust and respect.

It will help you to match employees' skills and knowledge to the role and to make adjustments to support them at work.

Knowing your team will also make it easier to recognise early warning signs when employees are struggling; have difficult conversations to see if they are OK; and enable employees to remain at or return to work after mental ill health.

Support ability to work

Managers should support employees of all abilities and personal circumstances to participate in work. People may require different levels of support at different times.

- Seek to understand issues that may impact on your employees' ability to work and make reasonable adjustments to accommodate these
- Foster flexible and supportive work teams, and
- Support ill or injured employees to return to work.

Look after yourself

It is important that you look after your own mental health and wellbeing. It is much harder to be a good manager and look after others if you are struggling.

Useful Tools:

United Kingdom Health and Safety Executive (HSE)—competencies for managers dealing with stress in the workplace

Manage emotions and act with integrity:

Be honest and respectful with employees, behaving consistently and calmly, thoughtful in managing others.

Manage and communicate work demands:

Proactive work management, good problem solving skills, consulting effectively with the team.

Manage individuals within the team:

Accessible and available, fostering a sociable and relaxed approach, understanding skills and personal circumstances.

Manage difficult situations:

Dealing with conflict, using organisational resources and support effectively, taking responsibility for resolving issues.

For more information see the self-assessment tool for managers: <www.hse.gov.uk>.

Useful Tools

- Agency Employee Assistance Programs and Manager Assistance Programs.
- APS Values, Employment Principles and Code of Conduct <www.apsc.gov.au>.
- Understand your roles and responsibilities under the *Work Health and Safety Act 2011* <www.comcare.gov.au>.
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Other relevant information sheets:

- 3 Talking about mental health
- 4 Creating a respectful workplace
- 5 Preventing bullying at work
- 6 Supporting and managing performance
- 7 Managing employees throughout their career
- 8 Managing risks
- 9 Balancing demands and control
- 10 Managing change
- 11 Role clarity for good mental health
- 12 Recognising and responding
- 13 Recognising when help is needed
- 14 Looking after yourself and carers
- 15 Building resilience
- 16 Focusing on ability to work
- 17 Workers' compensation claims
- 18 Supporting return to work

endnotes

¹ Black, C 2009, Foreword, in Line Managers' resource, *A Practical Guide to managing and supporting people with mental health problems in the workplace*, Shift, London, p. 1. <www2.lsc.ac.uk>.

people management

**Talking about
mental health**

3

Good relationships are based on openness, trust and respect. Regular conversations between managers and their team members can identify ways to enable an employee to be healthy, safe and productive—while maintaining confidentiality about personal health circumstances. This applies to people living with mental health conditions and those who are in a carer's role.

Why it matters

Managers are in a unique position to recognise when an employee may be struggling and not functioning well at work. Having an early exploratory conversation is important because you may be able to provide some early workplace support which helps get things back on track. This can also encourage the employee to get help from their support networks, such as family, friends, peer support workers or mental health professionals.

Like any other health or personal issue, an employee makes a choice about talking with their manager about their mental health. Employees are not required to disclose any mental health information. Your conversation needs to be an expression of concern and observation of what you are noticing about their functioning at work—it should be based on observable behaviour in the workplace.

How it's done

Be open and approachable. The culture in your team will need to be trusting to support an employee to disclose personal information.

Recognise early signs of mental ill health including changes in workplace behaviours, declining work performance, increased absence or excessive hours at work, uncharacteristic behaviours, distress or low morale.

Have an exploratory conversation about your concern. Make your first response an exploratory and empathic conversation indicating what you are noticing at work, expressing genuine concern and offering support. You can ask 'Are you OK?' or some version of that question, but be prepared to follow up an answer such as 'No, actually I don't think I am.' Demonstrate empathy by expressing concern, and having the conversation in a private location (like a closed office or a quiet coffee shop), so you can give your full attention.

Employees are more likely to disclose they have a mental health condition if:

- they are confident that what they say will be treated with respect and in confidence
- they believe their manager and colleagues will support them and respond appropriately to their needs
- they are confident that harassment and discrimination will not be tolerated by the organisation.

A four step approach

Step 1:

Make contact

- Arrange a meeting time
- Allow sufficient time for a confidential discussion
- Prepare—work out what you want to say and what you want to achieve
- Choose a suitable location—private and confidential.

Step 2:

Explore the issues

- Ask open questions, listen carefully, be attentive
- State the behaviour you have observed, e.g., 'I have noticed that you appear distracted, is everything OK?'
- Define the issues and discuss.

Step 3:

Develop options and offer support

- Explore what the person wants to do, e.g. could workplace adjustments be made
- Consider options in relation to operational demands
- Work together to come up with solutions
- *Gently and constructively* engage with the person if they keep coming up with barriers.

Step 4:

Agree on action

- Decide on a course of action
- Define and agree on clear, specific steps
- Follow up at an agreed time, review, and provide feedback.

Sometimes it may take more than one approach before the employee engages in conversation. Thus, it is important that the manager does not simply give up after an initial unsuccessful attempt.

Stay in touch particularly if the employee is off work—maintain a connection with the workplace. If your relationship has become strained, you can do this through a nominated contact in your human resources area. If someone is returning after an absence due to ill health, have the conversation (a 'welcome back' discussion) about how you can support them to be engaged and productive at work including through any flexible work arrangements, or other reasonable adjustments.

Respect employee privacy. If an employee talks to you about their mental health, ask them what they would like you to do with the information, such as what to tell colleagues, and ask how the workplace can support them. Stigma surrounding mental illness may prevent people from feeling comfortable about how mental health issues will be handled at work. You cannot talk about an employee's mental health condition with other members of the team or anyone else, unless that employee has given you permission. If there is an impact on the team, ask the employee what they would like you to tell their colleagues. This may be just that they are currently unwell and what work arrangements have been put in place.

Follow up the conversation. You may want to set some action items, for example to check back with the employee again in a week's time.

What if I am worried about the employee's health? Personal information will need to be kept confidential unless the employee agrees for you to disclose it to another person. The **exception** to this is if you are genuinely worried about a work health and safety risk, such as harm to an individual, including the employee. In this case seek assistance from your human resources team, Employee or Manager Assistance Programs or emergency health providers.

Useful tools

- The Australian Human Rights Commission publication *Workers with Mental Illness: A Practical Guide for Managers* covers privacy and disclosure and effective communications strategies. See: <www.humanrights.gov.au>.
- Information Privacy Principles under the *Privacy Act 1988*: Information Sheet on the collection, storage and use of personal information. See: <www.privacy.gov.au>.

Information privacy laws

Information about an employee's mental health must be kept confidential and private. When a person tells you about their mental health condition in the work context, you cannot tell anyone else without their consent. You can generally only use the information for the purpose they told you—such as to make reasonable adjustments.

APS managers are bound by the *Privacy Act 1988 (Cth)*.

Other relevant information sheets:



Creating a respectful workplace



Preventing bullying at work

people management

4

**Creating
a respectful
workplace**

Managers play a key role in setting the culture of the workplace and the team through the behaviours they model, and those they expect of their employees. Positive workplaces are built by consistently respectful behaviour and clear expectations of employees.

Why it matters

In APS workplaces, core values and expected conduct at work are codified in the APS Values, Employment Principles and Code of Conduct.¹ The Values, Employment Principles and Code define the culture of the APS and codify the attitudes and behaviours that employees are expected to display in their work in order to achieve business outcomes and meet the expectations of government and the community. The Values, Employment Principles and Code influence performance and decisions in everyday work, and define ‘the way we do business’.

The benefits of respectful workplaces include:

- Improved employee morale and job satisfaction, improved teamwork, lower absenteeism and turnover, and increased productivity.
- Employees are better equipped to manage conflict collaboratively and cope with workplace challenge and change.²
- Employees are much less likely to perceive their workload as excessive or to submit workers’ compensation claims.³
- Teams and organisations that are seen as positive places to work will attract and retain highly skilled staff.⁴

Lack of respect and what is sometimes called ‘incivility’—low level negative behaviours (such as rudeness, discourtesy, not acknowledging other staff)—can create a dysfunctional team environment, relationship breakdown, decline in productivity, and the risk of psychological injury.

Employers and employees have shared obligations for creating respectful and courteous workplaces.

Employers want a productive workforce that manages its performance and achieves results.

Employees want to work in a place where:

- they know what is expected of them
- the workplace is safe and they are treated fairly
- their skills and contribution are recognised and valued
- training and development support career progression
- they can work harmoniously with others.

*Respect: Promoting a culture free from harassment and bullying
in the APS, Commonwealth of Australia, 2011 (4th ed.)*

How it's done

Set clear expectations of behaviour. Team discussions can highlight a set of agreed behaviours that embody the APS Values, Employment Principles and Code of Conduct. These discussions are very effective with a new team or when a new manager is appointed. The exercise can also be used for existing teams as a way to reinforce the importance of fostering respect. It could even be included as a regular team meeting agenda item. The goal is to develop a shared understanding of appropriate conduct at work and what these expectations mean in a practical setting.

Be a positive role model. If a manager is respectful, employees are more likely to follow. If a manager is abrasive and impolite, employees have an excuse for displaying the same behaviour. Be genuine in your actions and promote the kind of culture that inspires people to do their best.

Make it how you do business. Include behavioural expectations in performance plans and give regular feedback to employees relating to performance and the APS Values, Employment Principles and Code of Conduct. Give practical examples of positive as well as negative behaviours to build a shared understanding of what is expected. Acknowledge how people achieve, as well as what they achieve.⁵

Push back on disrespectful behaviours. In cases where a person you are managing is displaying discourteous, unconstructive or abrasive behaviour, have a conversation with the employee to name the specific behaviour and the impact the behaviour is having on you, the team, or the agency. If you let it go, you may be seen to condone such unacceptable behaviour and set a norm for future behaviour.

Create a positive work environment. As a manager you will influence the way the people in your team feel about your agency and the time they spend at work. Within the bounds of the workplace, people need to feel comfortable to be able to express who they are, bring and take away meaning from the work they perform, and build commitment through inclusion in decisions. Encourage your employees to enjoy themselves at work, and to feel part of a community that respects and supports them.

Maintain open communication. Be open and transparent with employees. Share work fairly and set clear and realistic deadlines. Provide constructive and regular feedback to all employees and promote a balance between work and home life.

Manage workloads and priorities. Prioritise tasks, set clear and realistic deadlines, and ensure employees have all the information they need to do their work. Manage the allocation of urgent work and help staff to re-prioritise workloads where necessary.

Useful tools

- *Respect: Promoting a culture free from harassment and bullying in the APS*. Commonwealth of Australia, 2011 (4th ed.). See <www.apsc.gov.au>
- *Respect Summary Guide*, Australian Public Service Commission. See <www.apsc.gov.au>
- APS Values, Employment Principles and Code of Conduct. See <www.apsc.gov.au>
- *Towards a Respectful Workplace*, University of New Brunswick. See <www.unbf.ca>
- *Don't Be a Silent Witness—Preventing bullying* resources, Comcare. See <www.comcare.gov.au>
- Employee Assistance Program and Manager Assistance Program

Other relevant information sheets:



Preventing bullying at work

endnotes

- 1 *Public Service Act 1999*
- 2 Mental Health Commission of Canada 2012, *Psychological Health and Safety: An action guide for employers*, Mental Health Commission of Canada, Calgary and Ottawa, p. 17, <www.mentalhealthcommission.ca>.
- 3 Comcare 2008, *Working Well: An organisational approach to preventing psychological injury*, 2nd edn, Comcare, Canberra, p. 11, <www.comcare.gov.au>.
- 4 Australian Public Service Commission 2011, *Respect: promoting a culture free from harassment and bullying in the APS*, 4th edn, APSC, Canberra, <www.apsc.gov.au>.
- 5 *ibid.*

Example of how to have the conversation—naming behaviour:

Step 1: Pre-plan and script the conversation. Think about what you are going to say and what the most appropriate time and place is for the conversation to happen.

Step 2: Use 'I' messages.

Step 3: Explain the impact of the behaviour on yourself and/or other team members.

Example: 'I have noticed...and I feel that...'

Your agency's Employee Assistance Program or Manager Assistance Program is also available to assist managers with scripting a conversation.

people management

5

**Preventing
bullying
at work**

Workplace bullying is more than simply an interpersonal conflict—it can be a systemic problem that arises in the context of a poor workplace culture.¹ It is best dealt with by taking steps to prevent workplace bullying long before it undermines individuals' wellbeing or workplace relationships, or becomes a risk to health and safety²—and the most effective way to do this is by fostering a culture in which bullying behaviour is unlikely to thrive. All members of a workplace, including managers, play a role in preventing and managing bullying at work.

Why it matters

Workplace bullying has significant effects on those directly experiencing or witnessing the bullying, as well as their families, the work team and the organisation.

Employers have a clear legal obligation under work health and safety legislation to eliminate risks associated with workplace bullying as far as is reasonably practicable. This can be achieved through quality people management practices and specific workplace bullying strategies.

How it's done

Workplace bullying can be the result of a range of individual and organisational factors, including a work culture or environment that permits inappropriate behaviour to occur, managers with poor people management skills, a lack of supportive leadership, and workplace stressors and risks.³

Promote a positive workplace culture. Identify and model the behaviours that you need in your team. This will help you to create a work culture based on respect, where bullying is not tolerated. If there is bullying in your team or organisation, seek to understand its causes and impact in the context of the broader workplace culture.

Identify and call bullying behaviours early. If bullying does occur, it is important to recognise this behaviour and act on it early. This will help to maintain a culture where bullying is not tolerated.

Your agency should have a policy to help you to address any bullying that occurs. When an incident of bullying does occur you may be required to notify Comcare of the incident. Details of when you need to notify Comcare are on the Comcare website at: <www.comcare.gov.au>.

Some people might be unaware that their behaviour might amount to bullying. It may be useful to have a conversation with the

- Be proactive in communicating standards of expected behaviour.
- Create a workplace where everyone is treated with dignity and respect.
- Design appropriate, realistic systems of work.
- Develop productive, respectful working relationships.
- Follow the organisation's policy and processes if standards of expected behaviour are not met.

employee about their behaviour and its impact on colleagues. This will probably be a sensitive and difficult conversation and you might need to talk with your human resource team for advice on how to prepare. In some cases you might want a member of your human resources team to be there during the conversation.

Manage workplace stressors and risks. Role conflict and uncertainty can sometimes lead to bullying behaviours due to the stress it places on employees. It is important to ensure that employees understand their roles and have the appropriate skills to do their job. This will help to minimise work circumstances that could lead to bullying, and can also help to minimise the risk of employees perceiving difference of opinion or management action as bullying.

Provide regular and respectful performance feedback.

Managers have a broad range of responsibilities including monitoring workflow and providing feedback to employees on their work and performance. When feedback is provided properly, with the intention of assisting the employee to improve their performance or behaviour, it is not bullying.⁴

To prevent performance management being perceived as bullying, it is important to focus on high quality, respectful, and regular performance feedback.

Sound workplace policies can serve as a preventative tool to tackle bullying. The policy should be a clear statement of the standards of behaviour that are expected and the processes to follow if these are not met.

Minimise the impact of bullying on the team. Bullying can affect employees who witness it, as well as those who experience it directly. Each employee will react differently to bullying behaviours. Reactions may include distress, anxiety, panic attacks, sleep disturbances, impaired concentration at work, low self-esteem, or reduced work performance.

Employees who witness bullying behaviours may feel angry, unhappy or stressed about the work culture, or feel guilty because they know that the behaviour is wrong but feel unable or afraid to stop it.

It is important to recognise and respond to early warning signs of employees who have been affected by bullying and support them to seek help.

“I was sent to work as an adviser to a very senior manager who no-one else was willing to work for. My former boss knew this person was difficult to work for, and that the agency was considering whether his behavior breached the Code of Conduct. I ended up being diagnosed with a mental health condition as a result of the way I was treated, and have spent the past twelve months in and out of hospital.”

David, an APS employee

Useful tools

- *Workplace bullying campaign*
—*don't be a silent witness*.
See: <www.comcare.gov.au>.
- Comcare, *Preventing and managing bullying at work*.
See: <www.comcare.gov.au>.
- *Respect: Promoting a culture free from harassment and bullying in the APS*. Commonwealth of Australia, 2011 (4th ed.)

Other relevant information sheets:

-  Creating a respectful workplace
-  Supporting and managing performance
-  Role clarity for good mental health
-  Recognising and responding

endnotes

- 1 Dr Carlo Caponecchia, Workplace Bullying, House of Representatives, Standing Committee on Education and Employment, Committee Hansard, Canberra, 23 August 2012, p.3.
- 2 Safe Work Australia 2011, *Draft Code of Practice: Managing the Risk of Workplace Bullying*, SWA, Canberra, p.7.
- 3 Comcare 2010, *Preventing and managing bullying at work—a guide for employers*, Comcare, Canberra, p. 5, <www.comcare.gov.au>.
- 4 *ibid.*, p.7.

'Bullying is repeated behaviour that could reasonably be considered to be humiliating, intimidating, threatening or demeaning.

Bullying can be direct or indirect, and inflicted by one person or groups.

A single incident generally does not constitute bullying.

Bullying behaviour is not always intentional and some people may not realise that their behaviour is perceived as bullying behaviour that is harmful to others.'

Comcare, Workplace Bullying, Don't be a silent witness <www.comcare.gov.au> & *Respect: Promoting a culture free from harassment and bullying in the APS*, Commonwealth of Australia, 2011 (4th ed.) <www.apsc.gov.au>

people management

6

**Supporting
and managing
performance**

Managing underperformance where it is linked to mental ill health is among the most complex and difficult situations a manager can face. Clear expectations of roles, responsibilities, provision of support, as well as regular informal feedback on performance, help to create good relationships and a healthy performance management culture.

Following standard good practice (with an additional consideration of any need for reasonable adjustment) is all that is expected.

Why it matters

Positive working relationships are built on communication and trust. Regular conversations with employees about their role, capabilities and how work gets done will enhance engagement and productivity.

However, poor performance management practices such as a lack of regular feedback or using formal processes before understanding the issues impacting on performance can result in a breakdown in relationships, mental harm and potential workers' compensation claims.

Sometimes performance is not at the usual standard when a person is unwell or is managing significant personal issues (for example illness in the family, bereavement, domestic violence or other personal crises). As a manager, the first thing that you need to do is to understand the reason for poor performance and how you can support the employee, including supporting them to perform well at work.

Performance management is a process for employees to receive sufficient feedback to maintain or improve their performance and align work to broader organisational goals. It is not just dealing with poor performance but is about encouraging and enabling

success, providing employees with a sense of organisational purpose and role clarity, and matching skills to the work required.

How it's done

Employees with mental health conditions can be performance managed. However, in some cases it may be vital to incorporate clinical and psychosocial information when doing so. This information about the employee's condition, and its impact on their functioning, will guide the parameters of performance management. This material can often be obtained from treating practitioners, or may need to be accessed via a fitness for duty assessment with a mental health specialist (e.g. a psychiatrist or clinical psychologist). It is recommended that you seek advice from your human resources team.

Remember you must obtain written permission from the employee before contacting any treating practitioner and then maintain confidentiality at all times.

Ensure that the employee has **clear expectations** around their role, responsibilities and accountability. There are a number of resources available to managers: business plans depicting how the role fits in with the context of the organisation, corporate capability development frameworks and work level standards, job

descriptions, as well as the APS Integrated Leadership System.

Discuss ways that you can improve every team member's experience at work, even when they are performing well.

Give regular feedback and have conversations about how you can work together to achieve goals. Informal feedback includes guidance, coaching, support and encouragement. Discuss clarity of the role, performance standards, support required, and learning and development needs. This will help minimise discrepancies between the manager's and employee's perception of performance.

Recognise changes in behaviour due to ill health including a decline in performance or an increase in absenteeism or sick leave use. People with chronic conditions who are good performers sometimes need time away from work to deal with their medical condition. Some people will try to stay at work during a difficult time, but their performance can slip. In these situations, it is your job to support the employee to make good decisions about their ongoing contribution to the team's work, with a view to maintaining their contribution over the longer term.¹

There is an obligation to **make reasonable adjustments** to eliminate and reduce barriers

which may exist for the employee to perform the requirements of the job.

Performance appraisals—make sure that there are no surprises in the formal appraisal. Regular feedback supported by evidence will help to ensure this. Use SMART goals whenever possible.

Dealing with conflict and reasonable management action.

Reasonable administrative action is defined in the *Safety, Rehabilitation and Compensation Act 1988* (SRC Act) to include a performance appraisal, counselling, suspension or disciplinary action.

The critical issue is the way in which an administrative action is actually undertaken in the workplace. The action must be lawful and fair. It must be objectively assessed in the context of the circumstances, the knowledge of those involved at the time, and the emotional state and psychological health of the employee.

The importance of creating and retaining proper records in relation to administrative actions concerning a person's employment, especially when issues of underperformance, interpersonal conflict and poor conduct are alleged, must be emphasised. Failure to do so may lead to unfairness and difficulty establishing the facts.

SMART Goals are goals that are:

- **Specific**
- **Measurable**
- **Achievable**
- **Relevant**, and can be implemented within a
- **Timeframe.**

Remember—have clear expectations, regular feedback, and no surprises in the formal performance conversation.

Useful tools

- Your agency's Employee and Manager Assistance Programs
- Working Well.
See: <www.comcare.gov.au>
- APS ILS Framework.
See: <www.apsc.gov.au>.
- APSC Strengthening the Performance Framework Project.
See: <www.apsc.gov.au>.

Other relevant information sheets:

- 3 Talking about mental health
- 7 Managing employees throughout their career
- 11 Role clarity for good mental health
- 16 Focusing on ability to work

endnotes

- 1 WorkCover Western Australia 2000, *Occupational Stress: Factors that Contribute to its Occurrence and Effective Management*, report prepared by E Kendall, P Murphy, V O'Neill & S Bursnall, WorkCover WA, Shenton Park, p. 61; and Comcare 2008, *Working Well: An organisational approach to preventing psychological injury*, 2nd edn, Comcare, Canberra, p. 20, <www.comcare.gov.au>.

people management

7

**Managing
employees
throughout
their career**

‘Some of the major barriers to participation in employment for people with a mental health condition include stigma, fear and ignorance amongst employers and co-workers, and inflexible and inappropriate working arrangements.’¹

Why it matters

Meaningful employment is generally good for a person’s health and wellbeing²; having something meaningful to do can be a great enabler of recovery; however, poor health, including mental ill health, is often a barrier to obtaining employment and participating in good quality work.³ Overcoming discrimination is essential in helping people with mental health conditions to get work and to keep it. The APS is committed to diversity and ensuring equal opportunities in employment and career opportunities for those with mental health conditions.

How it’s done

Recruitment

Under Commonwealth anti-discrimination law, people with ‘disability’ includes people with mental health conditions. This provides legal safeguards to protect people against discrimination through the recruitment process. While those safeguards are important, good practice often calls us to go beyond bare legal obligations to plan for positive and encouraging recruitment processes for people with mental health conditions.

The ability to make reasonable adjustments enables you to confidently recruit people with a diverse range of health conditions, including people with adjustment requests related to mental health.

Many employees will not reveal a prior mental health condition before they are selected for a role because they fear indirect or unconscious bias—which is prevalent in broader society.

A person might disclose a mental health condition if they require a change or modification to standard employment conditions. They can ask for reasonable adjustments at any time, including before interview, for a change to the selection process. When considering what is reasonable take the following into account:

- **Identify inherent requirements**—job descriptions and selection criteria need to focus on the inherent requirements (what needs to be achieved) of the role, not the way the role is performed.
- **Fairness for each applicant**—use objective criteria and value diverse experiences and backgrounds. Nothing in the APS merit principle prevents managers from making adjustments to selection processes to accommodate the needs of people with disability. Merit-based selection is not about complying with a process but about establishing an environment where all candidates can present their claims fully, without the process itself becoming a barrier. The merit legislation allows for adjustments to accommodate the needs of people with disability, including mental health conditions.
- **Ask the applicant what adjustments would be most suitable** and consult with them through the process.
- **Ask questions related to the ability and suitability to do the job**—you can only ask questions about disability or mental health conditions if it is related to the inherent requirements of the job, or to identify reasonable adjustments that can be made in the workplace to support the applicant to perform the role.
- **Test for work related capability**—be flexible with assessment options and consider making the interview an informal chat, putting a greater emphasis on referee reports, providing questions to the applicant in advance and asking for answers in writing. If you become aware that a method of assessment is disadvantageous to an applicant, discuss this with the applicant and agree on a new method.

‘When I was offered a job in my current agency, I disclosed that I had bipolar disorder. I was asked to go for a pre-employment medical assessment, then my offer of employment was confirmed. On my doctor’s advice, I work from home one day each week, and I start work late and finish late. Some of my medication makes me groggy in the morning, and this arrangement allows me to work when I am at my best.’

Clare, an APS employee

Providing opportunities for good quality work and career advancement

As a manager, your role is to protect health and safety, and provide employees with opportunities to participate in meaningful work and career advancement.

- **Get the work balance right** for employees by matching the demands of the role to the capability of each employee.
- **Consider the skills, capability and learning and development needs** that would enable the employee to perform the role.
- **Manage work risks to mental health.**
- **Support and encourage performance** through regular conversations and feedback.
- **Provide opportunities for challenging tasks** where employees can learn skills and contribute to meaningful work.
- **Support and enable career advancement** through higher duties, moves at level and promotions based on merit.

Assessing employee health

There may be occasions when, as a manager, you believe that it would be appropriate for an assessment to be made of an employee's fitness to perform their duties. If this is the case, you are advised to seek the assistance of your human resources team.

There are obvious sensitivities attached to requiring an employee to attend a medical assessment, and the employee should be kept fully informed of the reasons for this course of action and the process that will be followed.

The *Public Service Act 1999* and *Public Service Regulations 1999* set out certain requirements relating to assessing the health of an employee, whether as a condition of engagement or to assess the fitness for duty of a current employee. These requirements are summarised here.

Directing existing employees to attend a medical examination

In accordance with the *Public Service Regulations 1999*, an agency head may direct an employee to undergo a medical examination if they believe that the state of health of the employee:

- may be affecting the employee's work performance
- has caused, or may cause, the employee to have an extended absence from work
- may be a danger to the employee
- has caused, or may cause, the employee to be a danger to other employees or members of the public
- may be affecting the employee's standard of conduct.

As part of their 'duty of care' responsibilities, an agency head may direct an employee to undergo a medical examination where they are to be assigned new duties and the agency head has reason to believe their state of health may affect their ability to perform those duties.

Pre-employment health checks

It is up to the agency head (or delegate) to decide what evidence they require to be satisfied that an employee is fit for duty. Evidence could include a declaration of health status, report from a treating practitioner, a medical examination or other specialist health professional assessment.

Health clearance as a condition of engagement

One purpose of a health clearance is to satisfy the agency head that the employee has the capacity to perform their duties. Other purposes may be to find out any information relevant to meeting the employer's duty of care under workplace health and safety legislation and to identify any reasonable adjustments that are needed for a person with disability. For further information see 'Conditions of Engagement' at: <www.apsc.gov.au>.

Keep all personal health information private and confidential.

Separating from the APS

Withdrawal of notice of resignation

See the Australian Public Service Commission's webpage on resignation: <www.apsc.gov.au> for details on resignation from the APS.

In accordance with common law, an APS employee has no unilateral right to withdraw a valid notice of resignation.

A notice of resignation may only be withdrawn with the agreement of the agency head. There is no requirement that an agency head agree to a valid notice being withdrawn—the agency head is free to decide not to agree if he or she so chooses. It is important to note agreement can only be given to a valid notice being withdrawn **before** it takes effect, i.e. during the notice period.

There are circumstances where it would generally be appropriate for an agency head to consider agreeing to the withdrawal of a resignation. For example:

Situations may arise where an employee is in a highly emotional state and they submit their resignation in the 'heat of the moment'.

Where an employee gives notice of resignation in these circumstances, and then quickly withdraws it, it would usually be appropriate for an agency head to 'allow' the notice of resignation to be withdrawn or to treat it as invalid and not accept it, and to proceed on the basis that the employment relationship has not come to an end.

Where an agency head does not allow the resignation to be withdrawn, or where an employee does not seek to withdraw it before the resignation takes effect, the employee may still be able to argue, upon recovery from the emotional state, that the resignation should be able to be retracted upon recovery from the emotional condition.

However, legal precedents indicate that the exception is narrowly confined in these circumstances so that it will apply only if the notice is retracted as soon as the employee recovers from the emotional condition.

There is support for the view that the longer the time that elapses between the giving of notice and the subsequent withdrawal, the more unlikely that the resignation would be considered to be invalid.

This same reasoning would apply where a notice of resignation is provided by an employee following unreasonable pressure from the employer, that is, where elements of duress may be present.

Incapacity

There are situations where an employee lacks the capacity to resign from their employment, e.g. where an employee is suffering from a severe mental illness or psychological condition so that they could not be considered to have the required mental capacity to resign from their employment.

In these cases, the agency head should treat the notice as invalid and proceed on the basis that the employment contract has not been terminated. In some rare cases where the mental incapacity of an employee is so severe, the notice of resignation may be taken to be of no effect at all. In those circumstances, it would not be open to an agency head to 'accept' the notice nor for the employee to retract it, as for all intents and purposes it would be taken to have never been given at all.

It is particularly important that the cases involving highly emotional employees and employees suffering from mental incapacity are dealt with sensitively, and agencies may consider a range of options including the offer of counselling, undertaking additional enquiries into the employee's situation, referral to the agency's Employee Assistance Program etc, before assuming the resignation is effective/valid. It is strongly suggested that agencies consider seeking legal advice should a situation arise involving the issue of an invalid notice or incapacity.

Termination of employment

See the Australian Public Service Commission guide 'Terminating APS Employment: The legislative framework' for information on termination when there is an inability to perform duties because of physical or mental incapacity.

Where an agency is considering offering voluntary retrenchment to an employee who is not fit for and not at work, the agency should be satisfied that:

- the employee is excess to requirements
- the appropriateness of termination on the grounds of physical or mental incapacity has been assessed and any request for invalidity retirement has been considered and determined by the relevant superannuation authority
- the Commonwealth is not exposed to unnecessary or increased liability arising under workers' compensation legislation or at common law in relation to an illness or injury as a result of the agency offering, and the employee accepting, voluntary retrenchment.

Consider the requirements for invalidity retirement under the employee's superannuation scheme—these are also set out in the Australian Public Service Commission's guide on terminating employment.

Useful tools

- Australian Public Service Commission, Ability at Work: Tapping the talent of people with disability: <www.apsc.gov.au>.
- Australian Network on Disability Manager's Guide: Disability in the Workplace: <www.and.org.au>.
- For more information on assessing employee health see Conditions of Engagement: <www.apsc.gov.au>.
- Australian Public Service Commission, Terminating APS Employment—The Legislative Framework: <www.apsc.gov.au>.
- Work Health and Safety Act 2011, Roles and Responsibilities: <www.comcare.gov.au>.

Other relevant information sheets:



Supporting return to work

endnotes

- 1 House of Representatives Standing Committee on Education and Employment 2012, *Work Wanted: Mental health and workforce participation*, HRSCEE, Canberra, p. 85, <www.aph.gov.au>.
- 2 Royal Australasian College of Physicians, Australasian Faculty of Occupational and Environmental Medicine (2011). *Realising the Health Benefits of Work: A Position Statement*, RACP, Sydney, available at: <www.racp.edu.au>.
- 3 Leach, L, Butterworth, P, Rodgers, B, Broom, D & Olesen, S 2010, 'The limitations of employment as a tool for social inclusion', *BMC Public Health*, vol. 10, p. 621.

prevention

8

**Managing
risks**

Managing work-based risks to mental health is a responsibility under federal law. Managers need to ensure work design and management practices do not harm employees' mental health and wellbeing.

Why it matters

Risks to mental health can arise out of the nature of work. This includes customer related stress, remote work, shift work and exposure to traumatic events.

Risks can also arise out of the context of work including poor team climate and poor quality people management practices such as lack of role clarity, poorly managed change, a breakdown in relationships and high work pressure and demands.

When risks to mental health are not addressed they can cause mental ill health, have an impact on employees and their families, and lead to workers' compensation claims. It can also adversely affect team relations and productivity, absenteeism, employee turnover, accidents, and customer and client complaints.¹

Managers have an important role in addressing work risks to mental health in the way they design and manage work, provide supportive leadership and foster an inclusive culture. Good work design can eliminate or minimise the major psychosocial hazards and risks associated with work. This will help to keep employees healthy and safe at work and create flourishing and engaged teams.

'Healthy and safe by design' is one of the key action areas as part of Safe Work Australia's national Work Health and Safety Strategy 2012–2022.² The Government needs to lead by example in fostering healthy, safe and productive working lives through the design and management of work.

Work Health and Safety Act 2011

- APS agencies have an obligation to ensure the health and safety of workers.
- Health is defined as physical and psychological health.
- Officers must exercise due diligence to ensure that their agency complies with its duties under the Act.
- While at work, workers must take reasonable care for their own health and safety.

See Safe Work Australia for more information on roles and responsibilities: <www.safeworkaustralia.gov.au>.

How it's done

Steps to manage risks to mental health and prevent psychological injury

Step 1 What is important?

Leadership awareness culture and commitment; management systems for monitoring organisational health; understanding your team and their work; and engaging employees in maintaining safe and healthy workplaces.

Step 2 Identify sources of potential harm

This may arise from the nature or content of the work (such as stress, aggression, remote work, shift work, exposure to traumatic events) or the context of the work (such as poor work, team climate, lack of clarity, poorly managed change and worker relationships).

Step 3 Assess the risk

Analyse organisational and team information to understand the nature, extent and causes of potential harm. This process needs to take into

account risks and hazards that may be present across all aspects of work, for example management practices, schedules and workstation design.

Step 4 Consult with employees to develop and implement a plan to:

- Address the workplace factors that are risks of psychological injury
- Make reasonable adjustments to support safe work performance.

Step 5 Monitor and review

State clear program objectives, set targets and performance indicators, monitor and review the program's implementation, review the effectiveness of the program and use the review findings to inform refinements and improvements.

Source: Comcare publication, *Working Well: An organisational approach to preventing psychological injury*, page 17. <www.comcare.gov.au>.

Take a systematic approach

Work with your employees and human resources team to identify and manage the individual, team and organisational risks to mental health.

Employee-focused approaches such as counselling, relaxation techniques and stress management training can help employees to develop greater resilience. However, approaches also need to address the team and organisational risks to mental health. A comprehensive approach to addressing risks will be more effective than approaches that only focus on an individual's ability to manage stress.³

Identify potential sources of harm

Risks to mental health are not recognised as easily as risks to physical injury. Work with your human resources team and use the results of employee surveys, absence data, grievances, focus groups, interviews and discussions with your employees to help you to identify risks.

Consultation with employees is critical to understand sources of work related stress and how they are impacting on the team. Most successful and cost-effective solutions are developed from within an organisation or team together with employees. This can be done through focus groups or other forms of consultation.⁴

Consultation with employees is required when identifying hazards, assessing risks and deciding on measures to control those risks.⁵

Better practice—an organisational approach What is important?

Demands

The demands of people's jobs (relating to workload, work patterns, working environment).

Support

The support provided by the organisation, line management and colleagues.

Role

Extent to which people understand their role in the organisation and do not have conflicting roles.

Control

How much control (or how much say) people have in the way they do their work.

Relationships

Relationships at work.

Change

How organisational change is managed and communicated.

The United Kingdom Civil Service Health and Safety Executive (HSE) has identified six potential sources of harm related to the design and management of work that, if not managed well, can lead to mental ill health (refer to the diagram 'What is important' on this information sheet).⁶ This model has been adopted by both Comcare and the Australian Public Service Commission and is used for reporting purposes in the Commission's State of the Service Report.

You also need to consider risks that arise from the characteristics and nature of the work. For example, is the work customer-related, does it involve shift work, does it involve physical isolation, does it lack variety or is it time paced?

Allow for individual differences

Different employees may respond differently to the same working environment and management style. It is important to acknowledge and respond to differences in employees rather than conclude that a problem is the individual's.⁷

It is important to **know your team**, how they are coping with the work and what measures will help them to be safe and productive at work. Individual susceptibility will influence how people respond to work experiences and pressures. The personal resources that people have to manage work pressures are not static and vary over time depending on an individual's life pressures, including circumstances outside of work.⁸

Develop solutions

Ensure solutions are developed in consultation with the employee and are specific to your organisation and the context of your team. Be guided by research, case studies and other information on the most effective approaches to prevent harm to mental health.

Useful Tools

- People @ Work psychosocial risk assessment process <www.peopleatwork.com.au>.
- HSE Management Standards on Stress: <www.hse.gov.uk>.
- HSE Risk Management <www.hse.gov.uk>.
- Safe Work Australia Codes of Practice:
 - Managing the Work Environment and Facilities
 - How to Manage Work Health and Safety Risk
- Comcare publication, Working Well: An organisational approach to preventing psychological injury: <www.comcare.gov.au>.
- Leadership, health and safety culture: What part do managers play? <www.comcare.gov.au>.
- Mental Health Commission of Canada—Psychological Health and Safety—An action guide for employers
- Comcare publication, Prevention and Management of Customer Aggression—A Guide for Persons Conducting a Business or Undertaking <www.comcare.gov.au>.
- Encourage Support Act, <www.humanrights.gov.au>.
- Safe Work Australia Code of Practice:
 - Work Health and Safety Consultation, Co-operation and Co-ordination.
 - How to Manage Work Health and Safety Risks.

Other relevant information sheets:

-  9 Balancing work demands and control
-  10 Managing change
-  11 Role clarity for good mental health

endnotes

- 1 Cotton, P & Hart, PM 2003, 'Occupational Wellbeing and Performance: a Review of Organisational Health Research', *Australian Psychologist*, vol. 38, no. 1, pp. 118–127; and Cotton, P 2004, 'Developing an Optimal Organisational Climate: Towards Australia's Safest Workplaces II Conference Paper', Canberra; cited in Comcare 2008, *Working Well: An organisational approach to preventing psychological injury*, Comcare, Canberra, p. 10.
- 2 Safe Work Australia, 2012, Australian Work Health and Safety Strategy 2012–2022
- 3 Giga, S, Noblet, A, Faragher, B, & Cooper, C 2003, 'The UK Perspective: A Review of Research on Organisational Stress Management Interventions', *Australian Psychologist*, vol. 38, no. 2, pp.158–164; cited in Comcare op. cit., p. 16.
- 4 Comcare op. cit., p. 20.
- 5 Safe Work Australia 2011, *Code of Practice: Work Health and Safety Consultation, Co-operation and Co-ordination*, SWA, Canberra, p. 5.
- 6 Health and Safety Executive, *Management standards for work related stress*, viewed 9 April 2013, <www.hse.gov.uk>.
- 7 Kendal, I E, Murphy, P, O'Neill, V, & Bursnall, S 2000, *Occupational Stress: Factors that contribute to its occurrence and effective management: A report to the workers' compensation and rehabilitation commission of Western Australia*, Centre for Human Services, Griffith University, pp. 57–60; cited in Comcare op. cit., p. 15.
- 8 Comcare op. cit., p. 14.

9

**Balancing
work demands
and control**

prevention

Managers have an important and challenging role to help balance the demands of employees' work with appropriate levels of control, support and resources to create healthy and productive teams.

Why it matters

The **demands** of an employee's role, as well as how much **control** or say they have about the way they do their work, affects their mental health and performance.¹ If an employee has work or task demands outside of their abilities or coping strategies, and has little say or control in how they do their work, it can lead to mental ill health.

The APS State of the Service Employee Survey shows that we can do better in this area.² Workers' compensation data for APS workplaces shows a significant number of psychological injury claims are attributed to work pressure,

second only to those attributed to workplace harassment and bullying.³ On the other hand, if an employee does not have enough challenging work, or their work is boring or repetitive, they may become disengaged and their mental health might be at risk.

The APS is facing increasing pressure to deliver programs and services in tight timeframes.⁴ The drive for improved performance, competitiveness and greater efficiency means that terms like 'operational demands', 'workforce capability' and 'efficiency dividends' are now part of our everyday language. At the same time, there is a need to ensure that the workforce is engaged, safe and healthy.

'Employees in workgroups with high morale and supportive leaders are much less likely to perceive their workload as excessive, or to submit workers' compensation claims.'⁵

How it's done

Specify task and job requirements, allocate individual roles for employees and support them to achieve goals and successful outcomes.⁶

Match the demands of the role to the capability of each team member, in consultation with them. Having work goals and demands in balance with employee capabilities is a prerequisite for successful work teams.⁷

Support individual learning and development and provide opportunities for people to **use their skills and knowledge** in their work.

Use **Individual Action Plans** and **performance conversations** to have regular conversations with employees about their role, demands, control and balance.

When designing work and employee roles, consider whether:

- employees have adequate and achievable demands
- people's skills and abilities are matched to the job
- employee's concerns about their work environment are adequately addressed.⁸

Consider the possibility of **redesigning roles to reduce risks**.

For example, increase the variety of tasks or provide individuals with clearly defined scope on how much work should be completed.

Employees should have an appropriate degree of control over the nature and pace of their work.⁹ Increasing employee control is a factor in creating resilience in times of high demand. You increase control and autonomy by giving employees scope to plan their work, make decisions about how their work should be completed and how the challenges should be overcome. Doing this will tap into the creativity and the diversity in your team.

Recognise and respond to warning signs of employees who are not coping with the requirements of the role, for example unplanned absences, decreased engagement or performance, and a rapid increase in hours worked. Decreased engagement is often a sign of low work demands where employees feel bored or do not have enough meaningful and challenging work.

If an employee is not coping with the demands of their role, you do not necessarily need to reduce the demands. Often, the demands of the role are important as they give meaning, sense of purpose, improved competency and can lead to high productivity. Instead, when an employee is experiencing high demand, **look at how the work can be redesigned to support the employee**. This includes:

- increasing the level of control and autonomy over how the work is performed
- providing the employee with additional resources to perform the role including performance feedback and high quality working relationships with others.¹⁰

It is important to **keep checking in** to see how employees are going and offer support and resources to help them to succeed in their role.

The Mental Health Capacity Building Training Package developed by the Department of Education, Employment and Workplace Relations (DEEWR)

In July 2012, as part of the National Mental Health Reform package, DEEWR released an online Mental Health Capacity Building training package. The package is designed to assist Employment Services Providers and Department of Human Services (now Services Australia) front line staff to better identify and assist people with mental illness to gain employment and better connect them with the appropriate services. It consists of six e-learning modules:

- **Mental health awareness**
strategies for developing mental health literacy skills to identify job seekers with mental illness.
- **Communication and engagement**
strategies to engage job seekers with mental illness.
- **Identification and management of barriers**
skills to address barriers to employment and build employment related skills for job seekers with mental illness.
- **Engagement and marketing strategies for potential employers**
skills to engage with employers and market job seekers with mental illness.
- **Strategies to maintain job seekers' employment**
highlight and address issues about maintaining employment for job seekers with mental illness, including employer issues.
- **Building partnerships**
strategies to connect and collaborate with services and programs relevant to the job seeker.

For further information about the training package please contact: <providercapability@deewr.gov.au>.

Useful tools

- HSE Management Standards for Work Related Stress— Demand and Control and Support <www.hse.gov.uk>.
- Comcare, Working Well: An organisational approach to preventing psychological injury <www.comcare.gov.au>.
- The Chartered Institute of Personnel and Development, Job Design <www.cipd.co.uk>.

‘Job design is the process of deciding on the contents of a job in terms of its duties and responsibilities, on the methods to be used in carrying out the job, in terms of techniques, systems and procedures, and on the relationships that should exist between the job holder and their superior, subordinates and colleagues.’

Chartered Institute of Personnel and Development¹¹

Other relevant information sheets:

-  Creating a respectful workplace
-  Supporting and managing performance
-  Role clarity for good mental health
-  Recognising and responding
-  Building resilience
-  Focusing on ability to work

endnotes

- 1 Health and Safety Executive (HSE), *Management Standards for work related stress*, Viewed 9 April 2013, <www.hse.gov.uk>.
- 2 Australian Public Service Commission 2011, *State of the Service Report, 2010–11*, APSC, Canberra, ch. 2. <www.apsc.gov.au>.
- 3 Safety, Rehabilitation and Compensation Commission 2011, *Compendium of OHS and Workers' Compensation Statistics*, SRCC, Canberra. p. 24, <www.srcc.gov.au>.
- 4 Advisory Group on Reform of Australian Government Administration 2010, *Ahead of the Game: Blueprint for the Reform of Australian Government Administration*, Department of the Prime Minister and Cabinet, Canberra, p. viii, <www.dpmc.gov.au>.
- 5 Comcare 2008, *Working Well—An organisational approach to preventing psychological injury*, Comcare, Canberra, p. 11, <www.comcare.gov.au>.
- 6 HSE, *Roles in Tackling Stress—Line Manager*, viewed 10 April 2013, <www.hse.gov.uk>.
- 7 Sinisammal, J, Belt, P, Harkonen, J, Mottonen, M & Vayrynen, S 2012, 'Managing Wellbeing at work during 2010s—Expert Viewpoints', *Open Journal of Safety Science and Technology*, vol. 2, pp. 25–31.
- 8 HSE, *Management Standards*, op. cit.
- 9 HSE, *Management Standards*, op. cit.
- 10 Bakker, A, Van Veldhoven, M & Xanthopoulou, D 2010, 'Beyond the Demand-Control Model: Thriving on high job demand and resources', *Journal of Personnel Psychology*, vol. 9, no. 1, pp. 3–16.
- 11 Chartered Institute of Personnel and Development (CIPD), *Job Design*, viewed 18 April 2013, <www.cipd.co.uk>.

10

**Managing
change**

prevention

Change may require employees to take on new roles, relationships, behaviours, and new approaches to work, which can be stressful.¹ On the other hand, when change is managed well it can promote mental health, facilitate innovation and increase productivity. Managers play an integral role in helping work teams adapt and respond positively to change.

Why it matters

Change is a key feature of modern workplaces. In a high performing public service, agencies are continually seeking better ways to do business.² High performing agencies need to be flexible, adaptable and able to respond quickly to changes in Australian Government direction or in their operating environment so as to continue to deliver effective outcomes.³

Change may be distressing for some employees, especially if they are not informed about what the change means for them, if it is managed poorly⁴, or results in employees perceiving their job as insecure.⁵

When APS agencies were asked to assess the maturity of their organisation against its capability to manage change, only 37 per cent of agencies said that change was managed well. This finding is reflected in employees' experience of change as being poorly managed.⁶

Workers' compensation claims for psychological injury are often the result of poorly managed change.

Continuous change, including uncertainty over the future and rapid shifts in the direction of work, is one of the central challenges for maintaining mental health and wellbeing at work.⁷

How it's done

Engagement with purpose

Often the toughest task for managers is helping their employees to adapt and respond positively to change. This includes constructively working with people's resistance to change, which is a normal part of the change process.

Managers have an important job in communicating organisational purpose and connecting an individual's work with this purpose. This includes communicating and providing employees with timely information to enable them to understand the reason for the proposed change.⁸

Research shows that 70 per cent of failed organisational change processes are attributed to poor organisational health, such as lack of adequate investment in leadership and the quality of team environments.⁹

Prevention

A risk management approach to change is needed. Managers need to assess and manage risks to the physical and mental health of their employees and team. There are a range of tools in the 'Useful Tools' Section to help you do this. Engaging employees in the process is crucial.

Changes in work practices should be made in consultation with employees. The United Kingdom Health and Safety Executive (HSE) Management Standards on Change recommend that employees are made aware of the probable impact on any changes to their jobs, are given training to support any changes to their jobs, and are aware of timetables for changes.¹⁰ Most successful and cost-effective solutions are developed from within an organisation, in partnership with employees. Remember, you should also consult with any employee who has taken leave to manage a health condition.

Recognise when employees are struggling to adapt to change and intervene early

Tune in frequently to understand how your team is tracking. Use human resources data (e.g. absenteeism) and support, and recognise early warning signs of distress to identify employees at risk. This will help you to intervene early and support employees who are not coping with change.¹¹

Manage the rate of change

To achieve change without harming employees, manage the pace at which new practices are introduced. This includes letting employees have constructive and respectful conversations

about change, ensuring adequate employee consultation on the changes and providing opportunities for employees to influence proposals.

Provide support

Ensure employees have access to relevant supports during change. When an employee has a mental health condition, it is particularly important to communicate the change and provide necessary support. Employees on leave also need to be consulted during times of change.¹²

If employees' resilience is low, they will be less likely to cope with change. Ensure employees are aware of support and assistance available, such as Employee Assistance Programs.

Risks to mental health

Change can be difficult, but poorly managed change can increase the risk of an employee becoming depressed, anxious or unwell. An employee may be eligible to claim compensation under the *Safety, Rehabilitation and Compensation Act 1988* (SRC Act) if employment caused, contributed to, or aggravated their illness. Poorly managed change may constitute a contributing factor.

Meeting adaptive challenges:¹³

- 1. Step back to get perspective**
- 2. Spot the emerging problems**
- 3. Pace changes and adaptive work**
- 4. Engage with employees**
- 5. Provide support**

Useful tools

- Looking after your employees during times of change <www.comcare.gov.au>.
- HSE Management Standards for Stress <www.hse.gov.uk>.
- Working Well: An organisational approach to preventing psychological injury <www.comcare.gov.au>.
- John Kotter—The Heart of Change and Leading Change <www.kotterinternational.com>.
- Harvard Business Review—The work of leadership <hbr.org>.
- The principles of effective risk management <www.comcare.gov.au>.
- Workers' compensation: How Comcare determines claims made under the SRC Act— Edition 2 <www.comcare.gov.au>.

Other relevant information sheets:



Managing risks



Workers' compensation claims

endnotes

- 1 Heifetz, R & Laurie, D 2001, 'The Work of Leadership', *Harvard Business Review*, December, <hbr.org>.
- 2 Advisory Group on Reform of Australian Government Administration 2010, *Ahead of the Game: Blueprint for the Reform of Australian Government Administration*, Department of the Prime Minister and Cabinet, Canberra, p. ix, <www.dpmc.gov.au>.
- 3 Australian Public Service Commission, *Agency Health: Monitoring Agency Health and Improving Performance*, viewed 9 April 2013, <www.apsc.gov.au>.
- 4 Heifetz & Laurie, op. cit.
- 5 Leach, L, Butterworth, P, Strazdins, L, Rodgers, B, Broom, D & Olesen, S 2010, 'The limitations of employment as a tool for social inclusion', *BMC Public Health*, vol. 10 p. 621.
- 6 Australian Public Service Commission 2011, *State of the Service Report, 2010–11*, APSC, Canberra, ch. 10. <www.apsc.gov.au>.
- 7 Sinisammal, J, Belt, P, Harkonen, J, Mottonen, M & Vayrynen, S 2012, 'Managing Wellbeing at work during 2010s—Expert Viewpoints', *Open Journal of Safety Science and Technology*, vol. 2, pp. 25–31.
- 8 Comcare 2010, *Keeping Health and Safety First in Mind: Looking after your employees during times of change*, Comcare, Canberra, p. 2, <www.comcare.gov.au>.
- 9 Keller, S & Price, C 2011, *Beyond Performance*, Wiley, New Jersey, p. 22.
- 10 Health and Safety Executive (HSE), *Management Standards for work related stress*, viewed 9 April 2013, <www.hse.gov.uk>.
- 11 *ibid.*
- 12 HSE, op. cit.
- 13 Heifetz & Laurie, op. cit.

prevention

11

**Role clarity
for good
mental health**

Clear understanding of roles, responsibilities and accountabilities, and regular conversations is part of meaningful work and contributes to mental health outcomes in the workplace.

Why it matters

Employees who are not clear about their role can experience disengagement and a decline in performance, and can become frustrated. Role ambiguity is a significant risk factor to mental ill health and may lead to psychological injury. On the other hand, having role clarity leads to engagement, job satisfaction, commitment and productivity, all of which are good for mental health.

Role clarity is also important from a whole of APS perspective. The APS Blueprint for Reform outlines the benchmark for a high performing public service, including strong leadership and strategic direction.¹ Clarifying the roles of APS employees and addressing gaps in capability contribute to a high performing public service.

‘Employees need to know what is expected of them in order to feel effective and productive in the workplace.’

Great-West Life Centre for Mental Health in the Workplace²

How it's done

Clearly outline the role and inherent requirements of the position in the recruitment process. This will help you to match the skills of the individual to the job. Avoid situations where an employee takes on dual roles which may lead to conflicts of interest and potential role conflict.

Be clear with the employee about **what they are responsible for** and what the desired outcomes are. This achieves greater overall role clarity rather than simply providing a list of tasks to complete. Having strong role clarity will significantly help employees in **managing the demands** of their role.

Provide clarity about the **links between organisational objectives** and the employee's role. Discuss the organisational structure, strategic plans and any relevant business or team plans. Use team meetings to discuss how each role contributes to the goals of the team.

Regularly review roles and modify where necessary in consultation with the employee. Consider the **health and safety risks** of particular roles on employees, especially any health and safety risks that could arise from a change in role or for an employee with a mental health condition.

Ensure employees have the appropriate **skills and training** to perform their position effectively. Consider how the employee's unique set of skills and training shape the role.

Use the APS Integrated Leadership System (ILS)³ to map the capabilities required for the position to the specific role of the employee. When an employee is transitioning to a higher position, use the ILS to explain how the role changes in response to increasing complexity. Refer to your agency's Work Level Standards for the 'whole of job' requirements and expectations of employees at each classification level.

Provide **regular feedback** to employees about their performance in the role and address any role concerns early.

Clearly communicate with employees about organisational objectives and roles **during times of change**.

Useful tools

- Australian Public Service Integrated Leadership System <www.apsc.gov.au>
- Work Level Standards <www.apsc.gov.au>
- Working Well: An organisational approach to preventing psychological injury <www.comcare.gov.au>
- Comcare tool on 'How to have a role conversation' <www.comcare.gov.au>
- Comcare, Supporting Employees During Times of Change <www.comcare.gov.au>
- HSE Management Standards—Role <www.hse.gov.uk>

Other relevant information sheets:



Supporting and managing performance



Balancing demands and control



Managing change

endnotes

- 1 Advisory Group on Reform of Australian Government Administration 2010, *Ahead of the Game: Blueprint for the Reform of Australian Government Administration*, Department of the Prime Minister and Cabinet, Canberra, p. viii, <www.dpmc.gov.au>.
- 2 Great-West Life Centre for Mental Health in the Workplace (Canada), *Workplace Strategies for Mental Health*, viewed 15 April 2013, <www.workplacestrategiesformentalhealth.com>.
- 3 Australian Public Service Commission, *Integrated Leadership System*, viewed 15 April 2013, <www.apsc.gov.au>.

12

**Recognising
and
responding**

early recognition and support

Often the most challenging thing for managers is knowing what to do when they recognise that someone is struggling or is increasingly becoming distressed. Managers who acknowledge the prevalence of mental health conditions in the workforce can significantly reduce sickness absence and incapacity for work through early intervention and support.¹

Why it matters

If you have a diverse and trusting work culture, an employee who is experiencing signs of mental ill health may be able to take the initiative and talk about this with you. However, some employees may feel unable to do this because they may not realise that they are unwell or they are worried about stigma and discrimination they may face.²

You are not expected to diagnose a mental health condition but, as a manager, the earlier you notice that an employee is experiencing

potential signs of mental ill health, the sooner you can take steps to help them.³

Early recognition of signs of mental ill health and having a conversation to offer genuine concern and support can often prevent an employee from becoming ill, taking long term sick leave or needing to submit a workers' compensation claim.⁴

Talking to someone at work can be more effective than costly interventions.

'Workplaces need to encourage more conversations, make more time to 'check in' with colleagues to see if they are OK, and if not, dig a little deeper to see what is affecting them.'

2012 R U OK? Australian Workplace Relationships Survey

How it's done

Early warning signs that an employee may be experiencing mental ill health

- Emotional responses and erratic behaviour—uncharacteristic behaviour which may be overly sensitive, irritable, angry, teary or tense
- Obsession with parts of the job, and neglect of others
- Working longer or fewer hours than usual
- Disengagement and low morale
- Withdrawal behaviour such as reduced participation in work activities
- Increased unplanned absence
- Increase in use of negative language and workplace conflict
- Physical symptoms such as appearing tired, headaches
- Changes in physical appearance such as less attention to personal grooming
- Reduced levels of performance.

Recognise early signs. Get to know your team and you will be more likely to notice when things are not going well. Changes in an employee's usual behaviour are the most observable early signs, for example, a decline in performance, tiredness, increased sick leave, increased time at work, or a usually punctual employee coming in late. Use normal work processes and people management practices to identify early signs of ill health.

Managers find themselves in the role of **'first-responders'**. As a manager you can take the initiative to have frank conversations that the person's peers may not have. Employees make careful judgements about how the information they give you will be received, so if you are an open and authentic person at work, you are more likely to be approached.

Regular conversations with individuals or work planning sessions provide a good opportunity to talk about any issues the employee might be experiencing. Don't leave these conversations to a formal performance management discussion—exploratory conversations about mental health conditions or disability should not be happening in the context of performance management.

'For me, if behavioural changes are drawn to my attention, I do then listen and get fast care and treatment as I know the faster I treat it the faster I'll recover. Some members of my workplace seemed hesitant about doing this for me though and initially indicated it wasn't anyone's job to keep an eye on me. This seems wrong. A first aid officer wouldn't ignore someone fainting. I'm happy to report my agency's management agreed something should be done and did arrange for an SES officer to be trained as a mental health first aid officer.'

An APS Senior Executive Service employee

Some simple 'Dos and Don'ts' when supporting a person with a mental health condition:

- DO:** reassure the person that you are genuinely concerned about them and that they can talk to you when they need to.
- DO:** be understanding and patient, but also encouraging and confident.
- DO:** help the person to talk about the specific issues and problems they are experiencing, rather than more generalised 'complaining'.
- DO:** assist the person in developing an action plan; later, follow up and check how they are going.
- DO:** encourage them to access appropriate support and, if appropriate, professional treatment.
- DO:** provide specific, honest, timely, and development oriented feedback.
- DON'T:** tell the person we all get stressed and to 'snap out of it'.
- DON'T:** tell the person not to think about it and it will all get better, or that there is nothing to worry about and 'it's not that bad', or that they shouldn't show weakness in the workplace.
- DON'T:** ignore the problem when you talk to the person or avoid talking with them about important issues.
- DON'T:** make assumptions.

'When I advised my manager that I was feeling depressed and anxious, he responded by moving me to a corner of the room away from my team so that I could have some 'peace and quiet'. Instead, it made me feel isolated and stigmatised. I was completely out of the loop with what was going on in my team, and I feel that my performance suffered. It would have been better if he had spoken to me about how he could best provide the support I needed.'

Barbara, an APS employee

Put a support plan in place

Developing a plan to support the employee is a key factor in early intervention, maintaining an employee at work and achieving a successful return to work.

The support plan below is a template that can be adapted by agencies as required to enhance early intervention and keep the employee with mental ill health at work. It is crucial that this is seen as a collaborative process, working with the employee to ensure the best outcomes for them. It is unlikely to be effective if it is used as a heavy handed performance management tool.

The support plan is best completed in consultation between the employee and their manager, treating practitioner and agency case manager. Other key people involved in the employee's health may be invited to contribute.

For return to work plans when there is a workers' compensation claim, please see the Comcare website Return to Work plan at <www.comcare.gov.au>.

Mental health workplace support plan

Name of employee:

1	Treating doctor name	Contact number
	Other treating practitioner	Contact number
2	Fit for duty <input type="checkbox"/> Yes <input type="checkbox"/> No	
3	Currently undertaking treatment <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, any impact of the treatment in the workplace?	
4	Reasonable adjustment / functional restrictions / duty modification—list practical specific restrictions and timeframes for review	
5	Risk factors for relapse	
6	Potential signs for deterioration/relapse in the workplace	
	When any of the above signs become apparent, the manager and employee agree on the following actions:	
	Employee responsibilities	
	Manager responsibilities	
7	Signed Employee Date	Signed Manager Date

Unplanned absence

Unplanned absence is one of the most common early warning signs of mental ill health. Employees with mental health conditions may have increased rates of unplanned absence. Seek to understand the reasons for the unplanned absence, such as ability to attend, motivation to attend and barriers to attend work. This will help you to work with the employee to support and improve attendance.

Contact the employee if there is an unplanned absence from work. Explore with them their reasons for non-attendance. Offer support. Stay in contact with the employee in cases of prolonged absence to maintain the connection with the workplace (you can use these opportunities to let them know what is going on in the workplace, especially if there are restructures or team changes, etc.).

Useful tools

- Comcare, *Recognition, response, recovery* <www.comcare.gov.au>
- Shift, United Kingdom Department of Health, Line Managers' Resource: A practical guide to managing and supporting people with mental health problems in the workplace. <www.gov.uk/government/organisations/department-of-health>
- *beyondblue*, helping others with Depression <www.beyondblue.org.au>
- *beyondblue*, helping others with Anxiety Disorders <www.beyondblue.org.au>

Other relevant information sheets:



Talking about mental health

endnotes

- 1 Comcare 2011, *Submission to House Standing Committee on Education and Employment inquiry into mental health and workforce participation*, Comcare, Canberra, p. 4. <www.comcare.gov.au>.
- 2 Shift, UK Department of Health, *Line Managers' resource, A Practical Guide to managing and supporting people with mental health problems in the workplace*, Shift, London, p. 14.
- 3 *ibid.*
- 4 Comcare 2010, *Early Intervention to support psychological health and wellbeing*, Comcare, Canberra, p. 1, <www.comcare.gov.au>.

early recognition and support

**Recognising
when help is
needed**

13

People do not have to be 100% well to be at work. However, in some circumstances you may notice that an employee is not well enough to be at work and that they require professional help.

Why it matters

One in five people will experience 'mild to moderate' mental health conditions, such as anxiety and depression.² A smaller percentage will experience episodes of more severe mental health conditions; for example, psychosis or thoughts of suicide.

In the workplace, an employee with a more serious mental health condition might behave in ways that impact on colleagues, for example talking about plans for suicide or being disruptive or aggressive. Part of their ill health may be a lack of insight that their behaviour is impacting on others. As a manager you need to be aware of your responsibilities to all employees.

If an employee is not mentally well enough to be at work, staying at work may be detrimental to their own health and recovery, as well as possibly impacting negatively on fellow employees. If this is the case, your role as a manager is to be proactive in recognising that professional/clinical help is the best option, and to facilitate this before the employee and others are affected further.

65,300 was the number of reported suicide attempts in Australia in 2007¹.

How it's done

Pre-agreed plans

If someone has disclosed having a mental health condition, work with them to establish a management plan on how to support them when they are unwell. The plan should include information on signs that indicate the person is becoming unwell, who can be contacted when the employee is unwell (for example a relative, GP or close friend) and other practical arrangements.

Pre-agreed statements are especially relevant for employees who are prone to episodes where they lose touch with reality as they may not be able to rationally take in what you are saying.

Recognise signs

As a manager it is important to look out for warning signs in employees who experience mental health conditions. Know your employees so you are able to recognise early warning signs unique to each individual. Sometimes there will be a need for immediate action so it is important to know who you can contact.

Consult your human resources team for advice and practical strategies. Advise the employee to visit their GP. You might be able to help them make an appointment. Direct the employee to services such as SANE, *beyondblue* MensLine and Lifeline or to the local mental health crisis team.

If you believe that the worker poses a health and safety concern in the workplace, you have a duty of care to take action to prevent any risk.⁴

- LOOK** For warning signs (situations, feelings, behaviours).
- ASK** Reach out and talk to the employee. Find out what they are experiencing.
- ACTION** Assess the risk and refer to appropriate support services.



Lifeline—ph. 13 11 14³

Concerns about suicide or self harm

Most individuals considering suicide or self harm give warning signs or signals of their intentions. The best way you can help prevent suicide is to recognise these warning signs and respond to them.

If you think an employee is considering suicide, it is important to tell him/her that you care and that you want to help. Encourage them to talk—the opportunity to talk about how they feel and why they want to die often provides great relief. Asking or talking about suicide **does not** cause someone to become suicidal.

If you are really worried, don't leave them alone. Ask a friend or a relative to come and pick them up. It is important to ensure the employee is safe while still respecting their privacy. However, you should never agree to keep a plan for suicide a secret. It is one of the few areas that even mental health professionals will not agree to keep confidential.

In some situations the employee may refuse help and, while you can't force them to get help, you need to ensure the appropriate people are aware of the situation, such as your human resources team or the employee's medical practitioner. Don't shoulder this responsibility yourself.

If help is needed urgently, dial 000 or, if known, contact the treating GP or mental health practitioner(s).

You may wish to try the Psychiatric Team at your nearest hospital or emergency department.

If you urgently need to speak to someone out of hours call Lifeline 13 11 14. These services are available 24 hours a day, 7 days a week.

SANE Australia provides a Helpline service on 1800 18 SANE (7263), Monday to Friday 9:00am–5:00pm EST.

Free information packs can be requested 24 hours. The Helpline provides information and a referral only. Crisis contact details are available from the Helpline. It's free and confidential.



Lifeline: 13 11 14



SANE Australia: 1800 18 SANE (7263)

Concerns about agitation or disordered thinking

Some forms of mental illness may present as extreme heightened activity and/or loss of touch with reality, hallucinations and delusions. In these rare instances, try and take the person to a quiet place and speak to them calmly. Implement their individual pre-agreed statement of action. Call a friend or relative who can take them home and notify their GP or mental health professional if appropriate.

What if someone is aggressive?

A very small number of people with mental health conditions may become aggressive. If an employee becomes aggressive, it is important to stay calm, talk in a slow but firm manner and ask the employee to stop their aggressive behaviour. It may help to suggest the employee sit down to help them feel more at ease. If they do not stop, leave the employee in a safe environment where they are not at risk to

themselves or others, until they have calmed down. Take any threats or warnings seriously and contact the GP or mental health professional if known.⁵

Directing employees to attend medical examination

In accordance with regulation 3.2 of the Public Service Regulations 1999⁶, an agency head may direct an employee to undergo a medical examination if they believe that the state of health of the employee:

- may be affecting the employee's work performance; or

- has caused, or may cause, the employee to have an extended absence from work; or
- may be a danger to the employee; or
- has caused, or may cause, the employee to be a danger to other employees or members of the public; or
- may be affecting the employee's standard of conduct.

Keep all personal health information private and confidential.

The Australian Taxation Office (ATO) has established a Strategic Intervention Unit for managing compensable psychological injuries. This involves early contact with the employee, early referral to a psychiatrist and the treating doctor for advice about what the ATO needs to do to have the treating doctor certify capacity to commence rehabilitation, and low caseloads so that the Case Manager can work closely on rehabilitation.

Useful tools

- Lifeline 13 11 14 and online chat support <www.lifeline.org.au>
- SANE <www.sane.org>
- beyondblue <www.beyondblue.org.au>
- MensLine <www.mensline.org.au>

Other relevant information sheets:



Understanding my role as a manager



Talking about mental health



Recognising and responding



Looking after yourself and carers

endnotes

- 1 Australian Bureau of Statistics 2012, *National Survey of Mental Health and Wellbeing 2007*, ABS, Canberra, (unpublished data), cited in National Mental Health Commission 2012, *A contributing life: the 2012 National Report Card on Mental Health and Suicide Prevention*, Sydney, NMHC, p. 67.
- 2 Australian Bureau of Statistics 2007, *National Survey of Mental Health and Wellbeing: summary of findings*, cat. no. 4326.0, ABS, Canberra.
- 3 Lifeline, <www.lifeline.org.au>.
- 4 Australian Human Rights Commission 2010, *Workers with Mental Illness: a Practical Guide for Managers*, AHRC, Sydney, p. 21, <www.humanrights.gov.au>.
- 5 *ibid.*
- 6 *Public Service Regulations 1999*.

early recognition and support

**Looking
after yourself
and carers**

14

Supporting employees through a period of mental ill health may be difficult on a personal and professional level. It is important to look after your own mental health and wellbeing too. Some employees are responsible for caring for people with mental ill health. Managers need to recognise that these carers require supportive workplaces and flexibility in order to successfully manage both their caring and work roles.

Why it matters

Managing an employee with mental ill health may not always be easy. At times you may feel overwhelmed and experience feelings of resentment, frustration, anger, guilt, worry or fear. These reactions are normal.¹

Remember, you are not able to support others if you do not look after yourself. You need to give yourself time—and permission—to look after your own wellbeing so that you do not ‘burn out’.²

How it's done

Self-awareness

Take stock of how managing a difficult work situation is affecting you. You could feel tired and worried. In some cases, you could experience other more significant effects like disturbed sleep, headaches, tightness in your muscles, excessive worrying or thinking about work and your employees, or a decline in your performance

Build your personal resources and individual resilience. Counselling, relaxation techniques and stress management training can help you to develop greater resilience to work related stress. Regular breaks from work are important for re-energising.³

Recognise when you need help and seek support. This can include talking with your manager, your human resources team, Employee or Manager Assistance Programs, family and friends.

Engage in professional development opportunities to build and maintain interpersonal and people management skills. Your organisation may offer training and/or coaching, or together with your manager you may identify other opportunities to develop skills in this area.

Try not to take on issues

It is a normal response to be worried about an employee who is experiencing mental ill health. However your role is to recognise signs that they are not OK, to have a conversation and facilitate their access to support. Your role is not to diagnose their mental ill health or be a counsellor.

If you find yourself counselling your employee or providing too much emotional support, talk to your human resources team and manager and they will help you to support your employee.

Stay healthy

Look after yourself by staying active and healthy. You can improve the way you feel and think by exercising regularly, eating well, getting regular sleep and managing stress.

'It wasn't until I had been dealing with Anna's case for almost three months—reviewing her tasks and speaking with her medical professionals to develop an ideal return to work program—that I realised that the situation had taken a toll on me. I was genuinely concerned about Anna, worried about whether I was managing this in the best possible way, and also concerned about the impact on the rest of the team. I spoke to the human resources team and they suggested the Employee Assistance Program. It was such a relief to be able to talk openly with someone who understood what I was experiencing, and could suggest some coping strategies.'

Evan, an APS manager

Carers at work

We know that there are many people who face the challenges of mental ill health every day. It is important to remember there are also carers of these people who face many of the same challenges.

Being a carer for someone living with a mental health issue has been found to be a long term commitment—more than six years for over half of respondents in one study.⁴ The caring role is mostly undertaken by older women and is one that affects their overall health and wellbeing.⁵

Carers provide a vital role in the lives of those they care for, e.g. ongoing support which may be in a social, emotional, physical and/or financial capacity. However, sometimes this may be to the detriment of their own employment, relationships, social life, physical and/or mental health.⁶

The support from managers and the workplace can make a crucial difference to how much stress a carer may experience from the demands of work and caring.⁷

Have a conversation with the employee. Understand their caring role and acknowledge the impact of being a carer on their everyday life. It is also important to understand when their caring duties may fluctuate. As a manager you should create an environment where carers feel comfortable to talk to you about their needs.

Understand that people in caring roles often describe a rollercoaster of emotions—being overwhelmed with the role, exhaustion, feelings of frustration, resentment and isolation.⁸ Having an understanding of this will help you notice early warning signs that the employee might need some support.

Provide flexible working

arrangements. Many working carers find it difficult to balance work and care responsibilities. Flexible working can include part time work, flexible start and finish times, compressed working hours, job sharing and working from home.

Support employees' **use of carer's leave.**

Remind employees to look after themselves—caring can be demanding. Suggest employees plan and take breaks, use the Employee Assistance Program and carer support networks if relevant.

Regularly **check-in** with the employee to see how they are going.

Research shows that more than one third of carers experience severe depression and that being a carer for someone else could be one of the leading causes of their depression.

The *beyondblue* guide for carers: Supporting and caring for a person with depression, anxiety and/or related disorder.

A study into the impacts of caring for a person with a mental health issue found that:

- **57% of carers had their work and financial circumstance worsen**
- **58% reduced the hours they worked or studied**
- **33% had changed to a less demanding job.**

National Mental Health Commission, 2012, A Contributing Life: the 2012 National Report Card on Mental Health and Suicide Prevention: <www.mentalhealthcommission.gov.au>

Useful tools

- *beyondblue* 'Staying healthy' fact sheet,
<www.beyondblue.org.au>
- Employee Assistance Program and Manager Assistance Program
- National Mental Health Commission—*A Contributing Life: the 2012 National Report Card on Mental Health and Suicide Prevention* <www.mentalhealthcommission.gov.au>
- Carers Australia website
<www.carersaustralia.com.au>
- Working Carers Gateway —for factsheets, stories and links to relevant websites:
<www.carergateway.gov.au>
- *beyondblue Guide for carers: Supporting and caring for a person with depression, anxiety and/or related disorder*,
<www.beyondblue.org.au>

Other relevant information sheets:



Building resilience

endnotes

- 1 beyondblue 2008, *Livingwith and caring for a person with depression: factsheet 2*, beyondblue, Hawthorn West, p. 1, <<https://www.dhhs.vic.gov.au>>.
- 2 Ingrid Ozols and Bernard McNair, *MentalHealth—Creating a mentally healthy and supportive workplace*, Mental Health at Work
- 3 Comcare, *What can I do? Line manager/supervisor*, viewed 17 April 2013, <www.comcare.gov.au>.
- 4 National Mental Health Commission 2012, *A Contributing Life: the 2012 National Report Card on Mental Health and Suicide Prevention*, NMHC, Sydney, p. 69, <www.mentalhealthcommission.gov.au>.
- 5 Mental Health Council of Australia 2010, *MentalHealth Carers Report*, MHCA, Canberra, p. 15.
- 6 beyondblue (2009), *hebeyondblue guide for carers: Supporting and caring for a person with depression, anxiety and/or related disorder*, beyondblue, Melbourne, p. 3, <www.beyondblue.org.au>.
- 7 Commonwealth Carer Resource Centre, *Supportfor Carers in their Caring Role* viewed 16 April 2013, <www.nscchealth.nsw.gov.au>.
- 8 Beyondblue, *beyondblue guide*, op. cit., p. 24.

early recognition and support

**Building
resilience**

15

Individual and organisational resilience is crucial to how employees respond to challenge and change at work.

Why it matters

Building a resilient work team is an important part of creating a healthy and productive work environment. Resilient teams are based on mutual trust, social norms, participation and social networks. Resilient teams are also more likely to be productive and high performing.

Resilience provides a protective factor for individuals, teams and the organisation to deal effectively with times of change, high pressure and stress.¹

Even a work group with high morale is unlikely to cope with high work demands indefinitely without adequate recovery time—fatigue and burnout can become problems.²

How it's done

Importantly, resilience can be learned and developed by anyone because it involves learning how to behave, think and act differently. Building resilient teams is about effective leadership, team cohesion, mutual support, and open, honest communication.

It is important for managers to remember that the resilience levels of an employee may fluctuate depending on what else is happening in their life. Individuals often have limited influence over the events that cause mental ill health, however, increasing their levels of resilience may influence the way they respond to these events.

Provide leadership. There is no template to what constitutes leadership. Good managers develop a range of leadership styles to suit different situations, consistent with the APS Values and the Integrated Leadership System. You earn the respect of your team not because of your position in the organisation, but because you lead by example.

Encourage team cohesion. A resilient team is one in which people have a shared sense of purpose and connectedness. Interaction and reinforcement of team efforts are important. Team cohesion can also be built through team social activities and regular informal team catch ups.

A resilient individual tends to be flexible, be adaptive, cope (even in difficult times), learn from experience and be optimistic.

The resilient individual is also more likely to recognise what support they may require to 'bounce back'. In the workplace context, this may include increased support from colleagues or workplace adjustments.

A resilient team is one that is based on mutual trust, social norms, participation and social networks as well as resources to adapt positively to change.

At the most basic level, good job design will go a long way to promoting a healthy workplace. A focus on building resilience is commendable, but may be doomed to failure if employees are constantly drawing on their resilience alone to cope with bad jobs and poor systems of work, and poor interpersonal relationships with managers and peers.

Provide role clarity to employees and reinforce the links between their work and the objectives of the organisation. Individuals and teams that understand how their work contributes to the overall organisational objectives can see meaning and value to their work.

Be supportive. Supportive and positive relationships are key to resilience. Build a team culture characterised by mutual support through modelling trust and inclusivity. Spend time with your team members. Discuss simple ways as a team that employees can support each other such as 'checking in' with each other on a regular basis and becoming aware of the early signs that may indicate a colleague is struggling with their work.

Building Personal Resilience

The following four elements are important in building personal resilience:

- **Social support:**
Build good relationships with family and friends;
- **Physical health:**
Look after yourself;
- **Behaviour:**
Spend your time wisely; and
- **Thoughts:**
Manage your self-talk.

Recognise progress. A sense of achievement at work is important. We all like to feel we are making progress so recognise the gains as well as the setbacks. Job satisfaction comes from the experience of progress and accomplishment.

Communicate effectively. Keep employees informed, engaged and involved. Effective communication helps build positive relationships which contribute to workplace resilience.

Promote personal skills required for resilience such as problem solving skills and autonomy. Delegate responsibility to your employees and let them do their job using their own imagination and creativity. Instead of always coming up with solutions you can help prompt others to think critically and reflectively to develop alternative approaches to workplace problems. This helps people to develop and learn and be ready to adapt to new situations that they face.

Balance work with other life activities. Encourage a balanced approach to work. Ensure work is undertaken in a safe, healthy and productive manner over time. A balance of effort and recovery (including time for rest, exercise and adequate nutrition) has been recognised as important to the maintenance of resilience.³

Useful tools

- Working Well: An organisational approach to preventing psychological injury, available on the Comcare website <www.comcare.gov.au>
- Lifeline <www.lifeline.org.au> Overcoming Stress and Staying Resilient Toolkit and Building Community Resilience education session

endnotes

- 1 Marot, M & Dunn, P 2010, 'Building organisational capacity and promoting resilience—The importance of leadership'. *Noetic Notes*, vol. 2, no. 1, September, p. 3.
- 2 Comcare 2008, *Working Well: An organisational approach to preventing psychological injury*, 2nd edn, Comcare, Canberra, p. 12, <www.comcare.gov.au>.
- 3 *ibid.*

early recognition and support

**Focusing
on ability
to work**

16

Recognising the value of diversity in the workplace and focusing on supporting an employee's ability to work is a priority in modern workplaces. The APS needs to become more effective at attracting employees with disability and establishing work environments that better support the needs and aspirations of existing employees with disability.

Why it matters

Supporting employees with mental health conditions at work benefits us all through:

- responsive and innovative service and policy development that benefits the diverse Australian community.
- improved workplace morale as employees become aware that your agency values all employees with a diverse range of abilities and is willing to respond flexibly to their needs.
- the creation of inclusive workplaces where injury, mental ill health or disability do not present obstacles to a fulfilling life in work.

The workforce faces many challenges including an ageing population and an increase in chronic disease and mental health conditions. Too many people, including talented managers, leave

the labour market unnecessarily due to mental health conditions. Research from the United Kingdom shows that people who leave work for health reasons are less likely to get another job compared to people who were previously unemployed.²

Australia has had a sustained period of tightening labour supply. In a labour market with increasing competition for qualified employees, we cannot afford to ignore the capacity of people with mental health conditions. Workplaces need better ways of supporting employees with mental ill health through early intervention, and making reasonable adjustments to the work that will assist workers to stay in work if their health circumstances change. Actions that support someone's ability to work allow employees with health issues to stay at work or return to work after illness, and help people with disability to enter the workplace.³

Supporting people who are currently in the workforce and experiencing mental ill health to retain their employment is as important as enhancing access to jobs and training for those looking to enter into employment.¹

Improving health through work will help realise many of the Government's social policy aims. The Government priorities of developing a socially inclusive Australia and increasing workforce participation require the APS to lead the agenda in improving health and productivity at work.

How it's done

Employees with mental health conditions can be supported to be productive at work by considering the inherent requirements of the job, individual skills, capability and personal circumstances and making reasonable adjustments to support people to perform the role.

Create conditions that generate better productivity

Research has identified the following five themes that are important to motivating employees:⁴

- **Purpose:** managers can reinforce purpose and a strong sense of how an individual's work contributes to the team.
- **Progress:** acknowledge and recognise steps to progress, and celebrate achievements. Help with ways to tackle setbacks and get back on track.
- **Encourage wellbeing:** provide opportunities for participating in wellbeing activities as a work team. Physical wellbeing is linked to mental wellbeing and such

activities strengthen the sense of a work community.

- **Mastery:** provide fulfilling work and give a sense of achievement through better matching of skills with the work to be done.
- **Invest time wisely and get to know your staff:** get to know those in your team and recognise them as a person.

Empower people to work

Assist your employees to make choices and take actions that have been informed by the knowledge that meaningful employment promotes health and wellbeing and that working can help them in their management and recovery from mental ill health. Identify what information and support is needed and how this can ensure that employees get the right information or assistance at the right times to stay in work.

Any enquiries about the process for lodging a claim, or the way a claim is managed, can be made by calling Comcare on 1300 366 979

Make time for conversations

Issues surrounding work and mental health conditions can be supported by simply making time for regular discussions and feedback with employees.

Understand the employee including their mental health, ability to work and performance in their role. Find out what you can about what it is like to have mental ill health and listen to your employees' experiences.

Recognise that things change over time

The employment relationship is not static—just like an agency's focus will change over time, the employee's career and development needs will also change. Employees may require different levels of support and work adjustments at different times in their working life. As such, managers need to consider employees and their needs on an ongoing basis.

Design challenging and meaningful work

Define the inherent requirements of the job. Considering what the job is actually required to do will help to identify the parts of the role that can be adjusted to support the employee. Factors to consider when defining the inherent requirements are:

- The work required to be performed
- The importance and urgency of each task
- The circumstances in which a job is to be performed including the way that work is designed
- The mandatory qualifications or standards required for the job.

It is useful to think about the work outcomes that need to be achieved (which is an inherent requirement) rather than how the work is undertaken. How the work is undertaken can be reasonably adjusted (see below). Employees with mental ill health are most likely to recover and maintain productivity through minor and temporary adjustments to their work that allow them to remain productive while they engage in treatment.⁵

Be flexible and eliminate barriers to work

Reasonable adjustments are any form of assistance or adjustments that are necessary, possible and reasonable to make, that reduce or eliminate barriers to work.

This may include adjustments to the type of work, working arrangements, work methods, equipment and/or the working environment.

Provide flexible workplace options and accommodate differences in the health of employees to increase productivity at work. You can do this by involving the employee when making planning and job related decisions.⁶

Most adjustments are mutually beneficial and can be straightforward to put in place. Despite this, many employees with mental health conditions do not feel able to approach their managers to discuss difficulties and to request alternative arrangements. This may be partly due to the prevalence of stigma in the broader community and an employee's fear of rejection of requests for alternative arrangements.⁷

The employee, treating doctors and human resources team can provide valuable information on the most appropriate forms of reasonable adjustment.

Some adjustments may be assessed as too difficult to make

due to financial costs or impact on the team—this is known as unjustifiable hardship. However, funding may be available through the Employment Assistance Fund <jobaccess.gov.au>.

The *Disability Discrimination Act 1992* requires employers to make reasonable adjustments so a person with a disability is able to perform the inherent requirements of the job, unless this would cause unjustifiable hardship to the employer.

Set the right tone by modelling behaviours

Employees take their cues from their managers and their immediate environment. They interpret the behaviour of their managers as defining acceptable conduct. By modelling appropriate behaviour, you can ensure that people in your workplace understand the value of diversity.

It may also be important to engage co-workers in supporting their colleagues, while respecting employee privacy.⁸

Examples of reasonable adjustments

- **Adjustments to work methods**—training, mentoring, temporarily shifting tasks that require intense concentration to other team members, changes to the way the work is organised, additional support through a mentor or buddy, working with the employee to develop a written agreement on performance priorities and timeframes.
- **Adjustments to work arrangements**—adjustments to work hours or duties such as part time work, starting and finishing later, working from home and access for the person to work remotely, allowing time for employees to attend appointments, avoiding unnecessary shift changes or postponing assignment of a new project or task.
- **Access to personal/sick leave**—allow time off work for rehabilitation, recognise that some appointments cannot always be made out of hours or at lunch.

Useful tools

- Australian Public Service Commission (2009). Ability at work: Tapping the talent of people with disability. <www.apsc.gov.au>
- Australian Public Service Commission (2012). Recruitment guideline: An operational guide for managers.
- The **Commonwealth's Employment Assistance Fund (EAF)** helps employers of people with disability by providing financial assistance to purchase a range of work related modifications and services and includes support for employees with mental health conditions—such as mental health education to colleagues. For more information see <jobaccess.gov.au>.
- Comcare Factsheet—Support Ability to Work <www.comcare.gov.au>
- Jobs in Jeopardy program <www.crsaaustralia.gov.au>.
- Comcare, Middle Manager—Leadership, health and safety culture: what part do managers play? <www.comcare.gov.au>

Other relevant information sheets:

-  Talking about mental health
-  Creating a respectful workplace
-  Preventing bullying at work
-  Supporting and managing performance
-  Balancing demands and control
-  Role clarity for good mental health

endnotes

- 1 House of Representatives Standing Committee on Education and Employment 2012, *Work Wanted: Mental health and workforce participation*, HRSCEE, Canberra, p. 7, <www.aph.gov.au>.
- 2 University of Essex, Institute for Social and Economic Research 2011, *Leaving work for health reasons as damaging as unemployment*, media release, Unum, United Kingdom, 21 November, <<https://www.iser.essex.ac.uk>>.
- 3 Comcare, *Support worker participation*, viewed 17 April 2013, <www.comcare.gov.au>.
- 4 Pink, D 2011, *Drive: The surprising truth about what motivates us*, Riverhead, New York, <www.danpink.com>.
- 5 Australian Human Rights Commission 2010, *Workers with Mental Illness: a Practical Guide for Managers*, AHRC, Sydney, <www.humanrights.gov.au>.
- 6 Comcare 2010, *Early Intervention to support psychological health and wellbeing*, Comcare, Canberra, p. 3, <www.comcare.gov.au>.
- 7 Baldrige, D & Veiga, J 2001, 'Toward a greater understanding of the willingness to request an accommodation: Can requesters' beliefs disable the Americans with Disabilities Act?', *The Academy of Management Review*, vol. 26, no. 1, pp. 85–99.
- 8 Mental Health Commission of Canada 2012, *Psychological Health and Safety: An action guide for employers*, Mental Health Commission of Canada, Calgary and Ottawa, p. 32, <www.mentalhealthcommission.ca>.

*rehabilitation
and return to work*

**Workers'
compensation
claims**

17

An employee can claim compensation for a mental illness if they consider their employment caused or contributed to or aggravated the illness. Your role as a manager is to understand and help employees through the workers' compensation process and to support their recovery and early return to work, irrespective of whether their claim for compensation is accepted.

Why it matters

Compensation claims for psychological injury, known as mental stress claims, are increasing. Both the number and proportion of claims, as well as the cost, have increased over recent years.¹

Claims related to mental stress are most commonly attributed to work pressure and/or workplace bullying.²

If an employee is unwell, the workers' compensation claim process can appear daunting and cause unnecessary distress. There are significant differences in the time taken for injured employees to lodge claims involving mental stress with their

employer, compared to all other disease claims (median of 51 days for psychological injury claims compared to 29 days for disease claims).³

Employees with a psychological injury claim do not return to work as quickly as those with claims for physical injuries. Time away from work can be detrimental to longer term recovery outcomes so management support and assistance is critical to overcoming barriers to a safe return to work. Managers need to understand their responsibilities for supporting employees with a compensation claim to return to work.

APS employees are covered by the Comcare rehabilitation and workers' compensation scheme under the *Safety Rehabilitation and Compensation Act 1988*.

Comcare is the 'determining authority'—the organisation responsible for making a decision on the workers' compensation claim.

The employer—the APS agency—is the 'rehabilitation authority' with the responsibility and authority to assist an injured employee to return to work. Employers also have a duty under the SRC Act to provide injured employees with suitable employment.

See <www.comcare.gov.au>.

An employee may be eligible to claim compensation under the Safety Rehabilitation and Compensation Act 1988 if they were **injured in the course of their employment as well as for an illness (disease) if employment caused, contributed to or aggravated the illness.** This includes claims for psychological injury.

Psychological Injury in the Comcare Scheme⁴

Over the four-year period to 30 June 2010:

10% of accepted Australian Government premium payer claims were attributed to mental stress; and

35% of total claims costs related to these claims.

How it's done

Understand and help employees with the process

An employee can claim compensation for an illness if they consider their employment caused or contributed to or aggravated the illness. However, for the claim to be accepted, Comcare must be satisfied that their employment caused or contributed to the illness to a *significant* degree. Some employment contributions are excluded where they were as a result of 'reasonable administrative action' taken in a reasonable manner by an employer. Reasonable administrative action is not a catchall phrase which covers every management action in the workplace. It is defined in section 5A(2) of the *Safety, Rehabilitation and Compensation Act 1988* (SRC Act) to include a performance appraisal, counselling, suspension or disciplinary action. It must be directed and related to the terms and conditions of the employee's employment, rather than merely to particular tasks involved in their employment or other purely operational matters.

The SRC Act is a 'no fault' scheme.⁵ It does not attribute blame, so your focus as a manager should be on assisting the employee's recovery and return to work.

If an employee is lodging a claim they should:

- access the form on the Comcare website <www.comcare.gov.au>
- attach a medical certificate to the claim form (this is a legal requirement)
- preferably lodge the claim through you or the case manager, to enable you to complete the employer part of the claim form (however there is no legal requirement for the employee to do so), or
- lodge the claim directly with Comcare.

On claim lodgement, Comcare will explain its decision making processes, and encourage the employee to contact their workplace's rehabilitation case manager about early intervention assistance and support in providing suitable employment. Once a liability decision has been made, Comcare will advise the employee in writing, explaining the reasons for the decision and information on what to do if they are not satisfied with the decision. Any enquiries about the process for lodging a claim, or the way a claim is managed, can be made by calling Comcare on 1300 366 979.

Early intervention

You need to be aware of any early warning signs of an employee who might be injured, and respond to them. Encourage your employees to tell you about any injuries or early warning signs.

It is important to advise your agency's case manager when you become aware that a person has become unwell or is injured at work.

Sustainable return to work or remaining at work while recovering from mental ill health is facilitated by good job design and management.

Source: Safe Work Australia National Work Health and Safety Strategy 2012–2022

Support the ability to work through recovery and return to work

The recovery of an ill or injured employee can be greatly improved by helping them back to safe work, undertaken in an environment that is supportive of mental health and wellbeing.

If the employee has been, or is likely to be, away from work for more than ten days, the case manager may arrange a rehabilitation assessment to undertake a return to work program. Based on the assessment, you will be involved in working with the employee, the case manager, treating doctor, and Approved Rehabilitation Provider⁶ (if any) to help the employee back to work in line with the provisions of the plan.

‘One of the best things my agency has done for me was to allocate me a Return to Work Coordinator. When I am off work due to my mental illness, Cathy contacts me on a regular basis and liaises regularly with my manager and senior executives. This takes the pressure off me—she meets with my doctor and makes sure that everything is in place for my return to work. She also monitors me by checking that I stick to my return to work schedule—sometimes I feel that I have to make up for the time I have taken off and tend to overdo it.’

Anna, an APS employee

Take steps to prevent further injuries by understanding the cause of injuries or illness and putting safeguards in place. This can be done through a risk assessment process. Your agency’s health and safety advisers can help you.

Useful tools

- Comcare website for information on notifications, rehabilitation and injury management <www.comcare.gov.au>
- Workers’ Compensation: How Comcare determines claims made under the SRC Act—Edition 2
- <www.comcare.gov.au>
- Work Health & Safety Harmonisation website contains information on roles and responsibilities <www.comcare.gov.au>
- ‘Am I eligible to make a claim’ on Comcare’s website <www.comcare.gov.au>.

Other relevant information sheets:



Focusing on ability to work



Supporting return to work

endnotes

- 1 Comcare 2011, *Submission to House Standing Committee on Education and Employment inquiry into mental health and workforce participation*, Comcare, Canberra, p. 7, <www.comcare.gov.au>.
- 2 Safety, Rehabilitation and Compensation Commission 2011, *Compendium of OHS and Workers' Compensation Statistics*, SRCC, Canberra, p. 24. <www.srcc.gov.au>.
- 3 Comcare, op. cit., p. 11.
- 4 SRCC, op. cit., p. 20.
- 5 Comcare 2006, *Preventing and Managing Psychological Injuries in the Workplace: Managers' Guide*, Comcare, Canberra, p. 8, <www.comcare.gov.au>.
- 6 A rehabilitation provider approved under Part III of the SRC Act to provide rehabilitation services and programs to the Commonwealth jurisdiction. They work in close cooperation with the injured employee, the treating doctors and the workplace to achieve a safe and early return to work following a work related injury.

*rehabilitation
and return to work*

**Supporting
return to
work**

18

Returning to work is an important part of the recovery process. It is your role to support employees who are off work or returning to work. This is about having good people management skills including effective communication, work design, planning, flexibility in making changes and a focus on outcomes to support ability to work—you don't need to be an expert in mental health.

The nature of the job, the individual's experience in the workplace, the response of employers, and information and views from professionals such as general practitioners, family and friends all influence the success of the recovery.¹

Why it matters

There is compelling evidence that work is generally good for health and wellbeing. Long term work absence, disability and unemployment can have a negative impact on health and wellbeing. There is strong evidence that work is the most effective means to improve the wellbeing of individuals, their families and communities.²

'For an employee experiencing or recovering from depression or anxiety, participation in the workplace may be a valuable part of the recovery process and can have a significant impact on the person's emotional, social and physical wellbeing. Even if the employee is on limited hours or duties, it is important to recognise the contribution

the person is making and ensure he or she feels part of the team. There are benefits for the business in keeping employees connected to the workplace. These include the retention of experienced and skilled staff, avoiding costs associated with re-training or hiring new employees and, above all, building a workplace culture that demonstrates to all employees that they are cared for and valued.³

Managers have a key role in providing a supportive workplace and ensuring open communication in the return to work process. Managers also perform the crucial tasks of providing suitable employment for the employee's return to work and preventing the workplace exacerbating mental health conditions.⁴

Australian Government employers have specific return to work obligations under the *Safety, Rehabilitation and Compensation Act 1988* (SRC Act) including:

- a) taking all reasonably practicable steps to provide an injured employee with suitable employment or to assist the employee to find such employment; and**
- b) performing rehabilitation functions delegated to its officers or employees by the rehabilitation authority**

Section 3, *Safety Rehabilitation and Compensation Act 1988*

‘Employees who have a successful return to work have supportive management. Management makes it known to the employee that they care what is happening to them. It’s human nature that we want acknowledgment, that we’re a part of a team, and that our efforts at work are appreciated. Something simple such as a phone call from someone inquiring on how they are and if there is anything that the workplace can do...’

Dr Brenda Tait, Advisory Group for Comcare’s Centre of Excellence in Mental Health and Wellbeing at Work.
<www.comcare.gov.au>

How it’s done

Build positive relationships.

The culture of the workplace and the attitudes and behaviours of managers and colleagues are critical. It is important to remove stigma about mental health and its impact on work, as actual or perceived stigma from colleagues may hinder the return to work.

Stay in touch with the employee while they are off work. This will help the employee feel connected to the workplace and feel a valued team member. Your agency should have a policy for contacting absent employees or their carer if they are too unwell.

Offer support and have a conversation with your employee about what support they need from the workplace to return to work successfully. This might include support from colleagues and managers, adjustments to the work and flexible work options. Focus on what the employee can do, not what they cannot do, and recognise the employee’s existing skills, experience and capabilities.

Assess any rehabilitation and return to work needs and develop a return to work plan. Prepare the plan in collaboration with the employee and their treating medical practitioner (making sure you have written permission to contact the practitioner). Comcare has specific advice and assistance on

return to work planning and injury management on their website <www.comcare.gov.au>.

Address the causes of harm if there are particular work design and management factors that contributed to the employee's mental ill health or parts of the work that could aggravate their mental health condition. This might include adjustments to the work arrangements, such as hours of work, or adjustments to the type of work or the way the work is performed.

Set realistic goals and outcomes with clear expectations that are results based and set out the steps for achieving a successful return to work.⁵ Review the return to work plan on a regular basis and be prepared to modify the plan as needed.

Monitor the return to work and check in with the employee frequently. This will help you to identify if any other adjustments need to be made to help the employee to stay at work.

Remember to keep all **information private and confidential** and only tell others with the employee's permission. However, it is also important to keep other team members informed of the return to work process and any changes. Talk with the employee who is returning to work to ask them what they would like their colleagues to be told.

Barriers to returning to work

There are many factors which make it difficult for an employee to return to work such as:

- Stigma associated with depression/anxiety—and lack of knowledge and understanding about its impact on work performance
- Suspicion about the severity of the employee's depression/ anxiety (e.g. other team members suggesting that the employee is using depression/ anxiety as an excuse to 'get out' of work)
- Perceived or actual lack of return to work planning or support from employer
- Fear that colleagues may find out about the diagnosis
- Reduced self-confidence associated with the episode of depression/anxiety
- Uncertainty about the type of assistance managers or supervisors will provide
- Fear of discrimination and the impact on future career prospects
- Concerns that work related contributors or causes of stress, anxiety and depression have not been reported or addressed.

Source: Beyondblue. Supporting the return to work of employees with depression or anxiety. See: <www.beyondblue.org.au>

Useful tools

- For information on managing return to work when there is a worker's compensation claim, employers have responsibilities under the *Safety, Rehabilitation and Compensation Act 1988* (SRC Act), please see the following Comcare documents at <www.comcare.gov.au>
 - Returning to work—Information for employers
 - Return to work—Easy reference guide
 - Return to work—Steps, publication 21
- *beyondblue*—Supporting the return to work of employees with depression or anxiety factsheet <www.beyondblue.org.au>
- Return to work support and information for employees with mental health problems (and their employers): <www.headsup.org.au>

Other relevant information sheets:

-  Talking about mental health
-  Managing risks
-  Balancing work demands and control
-  Focusing on ability to work

endnotes

- 1 Bandura, A 1997, *Self-Efficacy: The Exercise of Control*, New York, W.H. Freeman & Company; and Fear, W 2007, 'Return to work revisited', *The Psychologist*, vol. 22, no. 6, pp. 502–503.
- 2 Marmot, M 2005, 'Social determinants of health inequalities', *Lancet*, vol. 365, pp. 1099–104; and Marmot, M & Wilkinson, R (eds) 2003, *Social determinants of health: The solid facts*, 2nd edn, World Health Organisation, Copenhagen, pp. 18–21.
- 3 beyondblue. *Supporting the return to work of employees with depression or anxiety: advice for managers*, viewed 17 April 2013, <www.beyondblue.org.au>.
- 4 Comcare 2008, *Return to Work: key steps for supervisors and line managers*, Comcare, Canberra, <www.comcare.gov.au>.
- 5 Comcare 2012, *Returning to Work—Information for Employers*, Comcare, Canberra, p. 4, <www.comcare.gov.au>.

appendices

Appendix A: The APS employment framework

The following diagram provides a broad overview of the legislative and policy framework relevant to employees with mental health conditions, including those who are people with disability. It provides links to more detailed information available in this guide and on the Australian Public Service Commission and other relevant websites.

A focus on health and wellbeing

The APS employee lifecycle

1. Recruitment

Open opportunity for eligible members of community to apply

Inclusive of people with disability

Merit-based selection process based on inherent requirements of the job

see Disability Employment at www.apsc.gov.au

Applicant may choose to declare disability and to seek reasonable adjustments to recruitment process
see information sheet #7

Special measures for people with intellectual disability or those unable to compete in open field
see www.apsc.gov.au

2. Conditions of engagement

Conditions of engagement may include:

- health assessment—written declaration or medical
- probation—assessment of performance and behaviour on the job
- Australian citizenship, security clearance, qualifications etc

See Conditions of engagement at www.apsc.gov.au

3. Induction to the workplace

Include advice to new employees on health and safety requirements and availability of programs such as Employee Assistance Programs

4. Continuing terms and conditions

Enterprise agreements will include salary and conditions such as sick /personal leave and flexible working arrangements.

PS Act and Regulations allow direction to attend medical for e.g. sick leave, performance or behaviour

see information sheet #13.

People with disability can access reasonable adjustments to workplace
see information sheet #16.

5. Rehabilitation programs

Access to case managers, return to work programs etc
see information sheet #17

6. Managing performance

Adherence to APS Values and Code of Conduct
see information sheet #4

Value of respect

see information sheet #4

Inherent requirements of the job

Salary progression based on satisfactory performance
see APS Bargaining Framework Supporting Guidance at www.apsc.gov.au

Assignment of duties

see information sheet #16

Managing performance of employee with mental health condition
see information sheet #6

7. Career development

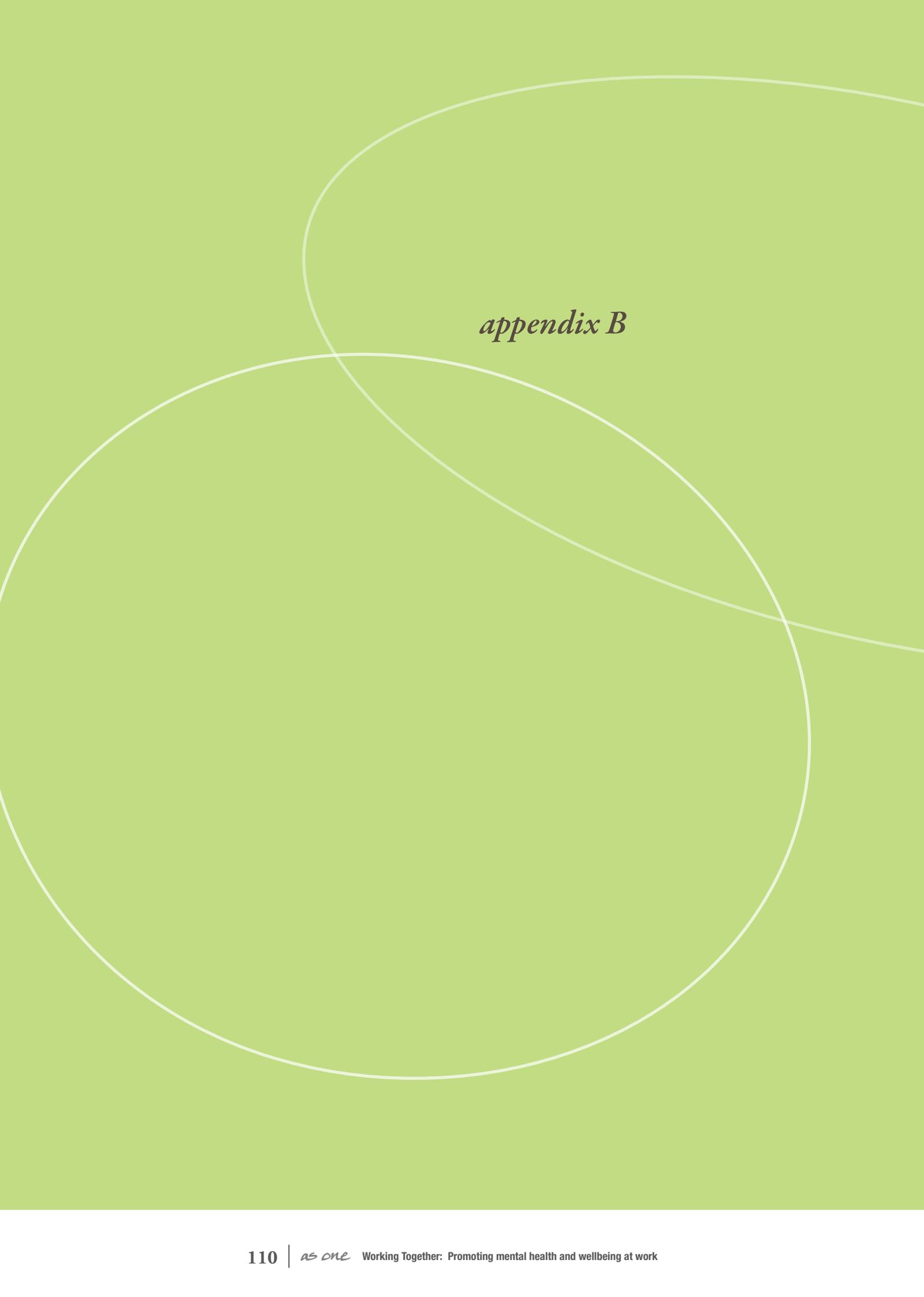
Provision of ongoing learning and development opportunities including higher duties, movements and promotions.

8. Separation

Resignation
see information sheet #7

Specific grounds for termination include inability to perform inherent requirements of the job

CSS/PSS may determine medical retirement
see Terminating APS employment at www.apsc.gov.au

The page features a solid green background with two large, thin white circles that overlap each other. One circle is positioned in the upper right quadrant, and the other is in the lower left quadrant, with their intersection in the center.

appendix B

Appendix B: Glossary

Sometimes people worry too much about using the ‘right’ language. Being genuine, non discriminatory and caring is far more important than using the correct terms. Even so, it is often a help to know the key terms and what they mean, especially in the context of setting the tone for the way mental health is discussed in the workplace. Sometimes the language is confusing and people use the wrong words. Knowing the best ways to talk about mental health is one step in reducing discrimination and stigma.

Acute/Chronic

The term ‘acute’ is used in medicine and psychology to describe a condition with rapid onset and short duration (or both). It is distinguished from ‘chronic’, which describes a long term condition that a patient has to learn to live with; it may fluctuate in severity but there is usually no cure.

Anxiety

We’ve all experienced anxiety—nervousness before doing a talk in public or going to the dentist. Now imagine that amplified a hundred times and we begin to get a feel for what an anxiety disorder is like. There are usually physical symptoms (like heart racing, sweating, muscle tension), thoughts or ‘cognitive’ symptoms (like worry, imagining the worst, unable to think clearly), and ‘behavioural’ symptoms (like avoiding frightening situations, fidgeting, changes to appetite or sleep patterns). Anxiety can come in short, powerful bursts (like panic attacks) or can be there at lower levels much of the time. Anxiety is often associated with depression.

Behaviour

Behaviour is the observable actions of a person. Friends and colleagues are most likely to notice changes in behaviour if someone has psychological

problems. When discussing mental health matters with a staff member, it is usually best to stick to describing observable behaviour rather than assuming what might be happening underneath.

Bipolar disorder

A serious mood disorder characterised by extreme swings between depression (feeling very low—see depression below) and mania (feeling very ‘high’ and energetic), often interspersed with periods of normal mood.

Clinical psychologist

Psychology is a vast field, covering all aspects of human behaviour from sports to education, from marketing to how we interact with machines. Clinical psychologists have specialist postgraduate training in mental health including diagnosis, assessment, and treatment. They provide psychological (non-drug) therapies.

Cognitive behavioural therapy (CBT)

A combination of cognitive and behavioural therapies, this approach helps people change negative thought patterns, beliefs, and behaviours so they can manage symptoms and enjoy more productive, less stressful lives. It can be provided by a range of appropriately trained health professionals, in particular clinical psychologists, and has a strong body of research evidence to support its effectiveness.

Counselling

Counselling is a general term that covers a variety of non-specific supportive interventions for people with psychological adjustment problems. It aims to identify the problems a person is facing in their life and to help them discover effective ways of dealing with them. Counselling may be provided by a range of professionals including GPs, social workers, psychiatric nurses, occupational therapists, and psychologists.

Delusions

Delusions are bizarre thoughts that have no basis in reality.

Depression

Depression is a mood disorder characterized by loss of interest in previously enjoyable activities, lack of motivation, and intense sadness that persist beyond a few weeks. It is associated with many physical symptoms such as disturbed sleep and appetite. Depressed people often feel exhausted, guilty and can find normal life extremely difficult. Depression is often associated with anxiety.

Diagnosis

A term used to describe a particular illness (in this case a mental illness) on the basis of an agreed collection of symptoms. Although diagnosis is categorical (the person either does or does not have the required symptoms), mental health is not like that—it is best seen on a continuum from normal, everyday unhappiness or worry through to crippling depression or anxiety. So just because a person does not have a diagnosed mental illness does not mean he/she does not have mental health issues—good mental health is important for all of us.

Disability

The Australian Public Service Commission recognises two definitions:

- The Australian Bureau of Statistics' Disability, Ageing and Carers Survey definition, according to which '... a person has a disability if they report that they have a limitation, restriction or impairment, which has lasted, or is likely to last, for at least 6 months and restricts everyday activities.'
- The *Disability Discrimination Act 1992*, section 4, which states that 'disability', in relation to a person, means:

- a. total or partial loss of the person's bodily or mental functions; or
- b. total or partial loss of a part of the body; or
- c. the presence in the body of organisms causing disease or illness; or
- d. the presence in the body of organisms capable of causing disease or illness; or
- e. the malfunction, malformation or disfigurement of a part of the person's body; or
- f. a disorder or malfunction that results in the person learning differently from a person without the disorder or malfunction; or
- g. a disorder, illness or disease that affects a person's thought processes, perception of reality, emotions or judgment or that results in disturbed behaviour; and includes a disability that:
- h. presently exists; or
- i. previously existed but no longer exists; or
- j. may exist in the future (including because of a genetic predisposition to that disability); or
- k. is imputed to a person.

To avoid doubt, a disability that is otherwise covered by this definition includes behaviour that is a symptom or manifestation of the disability.'

Disorder

Disorder is a general term used to describe a disease or abnormal condition. In the mental health field, it refers to a psychological or behavioural pattern associated with distress or disability.

Hallucination

Hallucinations are experiences of sensations that have no source. Some examples of hallucinations include hearing non-existent voices, seeing non-existent things, and experiencing burning or pain sensations with no physical cause.

Mental health

A state of emotional wellbeing in which an individual is able to use his or her thinking and feeling abilities, relate well to other people, and meet the ordinary demands of everyday life.

Mental health problem

Diminished cognitive, emotional or social abilities but not to the extent that the criteria for a mental illness are met.

Mental illness / ill health

A state where the person's mental health is disrupted so that their thinking, emotions or behaviour are affected to an extent that it causes clinically significant distress (more than simply everyday ups and downs) and interferes with their ability to relate to others (family, friends, and colleagues) and their ability to carry out their normal role (at work, as a parent, a student, etc). A diagnosis of mental illness is generally made according to the classification systems of the Diagnostic and Statistical Manual of Mental Disorders (DSM) or the International Classification of Diseases (ICD).

Paranoia

Paranoia is characterised by feelings of persecution—that others are out to mistreat, harass, or torment the person—in the absence of any objective evidence. It is often a form of delusion and may be accompanied by an exaggerated sense of self-importance. The disorder is present in many mental health conditions but is rare as an isolated mental illness.

Personality

Personality refers to enduring patterns of thoughts, feelings and behaviours that characterise an individual. They describe 'what someone is like' and are thought to change little over time. Some people may have

unhelpful or maladaptive personality traits that create problems for themselves and those around them.

Personality disorder

A personality disorder is an extreme collection of maladaptive personality traits that can significantly affect the way a person feels and interacts with the world around them. Personality disorders impede response to treatment and increase the risk of long term disability. In the workplace, diagnosable personality disorders are relatively rare although maladaptive and unhelpful personality traits may be much more common.

Phobias

Phobias are irrational fears that lead the sufferer to completely avoid specific things or situations that trigger intense anxiety. Simple phobias include fear of spiders, heights, or flying. More complex phobias include agoraphobia (a fear of being in any situation that might trigger a panic attack and from which escape might be difficult) and social phobia (a fear of being extremely embarrassed in front of other people).

Psychiatric disability

Refers to the impact of a mental illness on a person's functioning in different aspects of life such as the ability to live independently, maintain friendships, maintain employment and participate meaningfully in the community.

Psychiatrist

A psychiatrist has trained as a medical practitioner and then specialised in mental health. Their work is very similar to clinical psychologists in providing diagnosis, assessment and treatment for people with mental health conditions, but they are also likely to use medication as a major component of treatment.

Psychologist

Psychology is the study of human behaviour, so psychologists work in a wide variety of areas as diverse as marketing, education, human/machine interface designs, criminal justice systems, and industry. Some psychologists specialise in psychological health and wellbeing (e.g., counselling psychologists), brain and behaviour (e.g., neuropsychologists), or mental health (e.g., clinical psychologists).

Psychopathic (or sociopathic)

This refers to a personality style (a personality disorder), rather than a discrete illness. It characterises someone who is unable to feel empathy for others, has no conscience, a compulsive liar; these people may be very cruel and dangerous, although some are also very successful.

Psychotic (or psychosis)

Psychotic describes a group of illnesses characterised by significantly distorted reality, such as delusions or hallucinations. The most common psychotic disorders are schizophrenia and severe forms of bipolar disorder.

Reasonable adjustment

The *Disability Discrimination Act 1992* requires employers to change the workplace environment or work arrangements so that a person with disability is not disadvantaged in the workplace, to the extent that these changes do not involve unjustifiable hardship for the employer. This requirement may also exist in applicable State and Territory anti-discrimination legislation.

Recovery

The term recovery carries many meanings in mental health, although a useful definition is ‘a process of change through which individuals improve their health and wellness, live a self-directed life, and strive

to reach their full potential.’ (For a more complete description, see <blog.samhsa.gov>.) Importantly, recovery includes not only a reduction in symptoms but also an improvement in the ability of the individual to lead a normal life including health, work, home life, social relationships and leisure. It does not necessarily mean cure—recovery may mean living a fulfilling life as part of the broad community, while still living with a diagnosis of mental illness.

Relapse

Relapse is a deterioration of mental health after a period of wellness. Relapses may be triggered by personal circumstances, stress (including workplace stress) or medication changes. It is characterised by an increase in symptoms and disruption to normal functioning.

Schizophrenia

Schizophrenia is a mental illness characterized by ‘positive’ and ‘negative’ symptoms. Positive symptoms include delusions, hallucinations, and disordered thinking. Negative symptoms include social withdrawal, apathy, diminished motivation, and blunted emotional expression. Schizophrenia is NOT a split personality.

Stigma

A belief that a group of people that share a particular attribute (like mental illness) should be excluded or treated less favourably than most people. Stigma toward people with mental illness is often caused by misplaced beliefs that such people are dangerous or incompetent.

Substance abuse

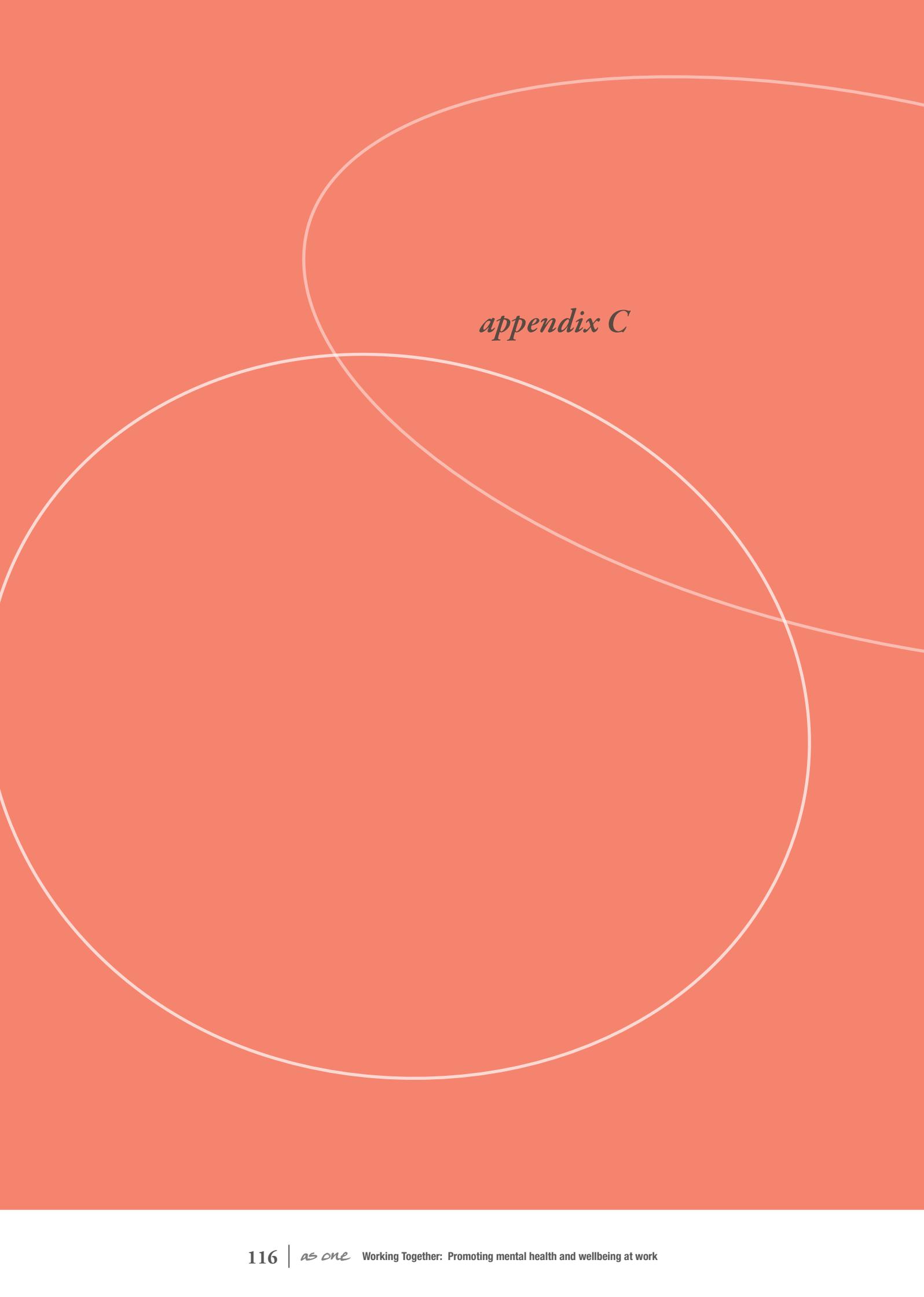
A ‘substance use disorder’ is diagnosed when a person’s drug use (most commonly alcohol) is causing high levels of distress to the person and/or those around him/her, and is preventing the person from

functioning effectively in personal, social or work situations. It is closely related to other addictions such as compulsive gambling.

Symptoms

The specific problems and signs that a person reports (e.g. disturbed sleep, worry, nightmares, avoidance of situations, etc.) are known as symptoms. Each diagnosable mental illness has a pattern of symptoms that have been agreed by experts around the world (so that we can be sure we are all talking about the same thing when we use a term such as depression). Each person is unique, however, and people with the same diagnosis may still experience some difference in symptoms. Words commonly used to describe symptoms of mental illness that may impact on work include:

- Elevated mood: appearing happier or more excited than normal
- Depressed mood: appearing sad and down in the dumps
- Flattened mood: showing little or no emotional response to events around them
- Impaired cognition: difficulties related to thinking, memory, decision making, concentration, etc.
- Behavioural avoidance: staying away from activities, situations or people that cause distress or anxiety
- Suicidal ideation: thoughts about death or that life is not worth living (note—many people have suicidal thoughts without acting on them, but they are a big risk factor)
- Self harm: behaviour that causes deliberate self injury (e.g., cutting oneself)



appendix C

Appendix C: Useful resources for mental health in the workplace

Publications

The following list comprises documents from around the world that focus on mental health in the workplace. Most are written for managers and employees, in very down to earth and accessible language. All (except the United Kingdom PAS 1010 Guidelines) are free to download from the internet.

- **Australian Human Rights Commission** (2010). *Workers with Mental Illness: A Practical Guide for Managers*. <www.humanrights.gov.au>
- **Beyondblue E-Learning** <www.beyondblue.org.au>
- **Canadian Mental Health Association** (2004). *Managing mental health in the workplace*. <www.mentalhealthworks.ca>
- **Comcare** (2008). *Working Well: An organisational approach to preventing psychological injury*. <www.comcare.gov.au>
- **Comcare Work Health:** <www.comcare.gov.au>
- **Line Managers' resource, A Practical Guide to managing and supporting people with mental health problems in the workplace. Shift, United Kingdom.** <www2.lse.ac.uk>
- **My Compass, Black Dog Institute.** <www.myCompass.org.au>
- **Social Firms Australia** (2010). *Disclosure of a Mental Illness in the Workplace: A guide for employers*. <socialfirms.org.au>
- **United Kingdom Health & Safety Executive** (2007). *Managing the causes of work-related stress*. <www.hse.gov.uk>
- **United Kingdom PAS 1010** (2011). *Guidance on the management of psychosocial risks in the workplace*. <shop.bsigroup.com>
- **University of Melbourne, Centre for Youth Mental Health** (2011). *Helping employees successfully return to work following depression, anxiety or a related mental health problem: Guidelines for organisations*. <mdhs.unimelb.edu.au/our-organisation/institutes-centres-departments/cymh>
- **VicHealth** (2012). *Reducing stress in the workplace: An evidence review*. <www.vichealth.vic.gov.au>
- **Workplace Mental Health Promotion: A How-to Guide** <wmhp.cmhaontario.ca>
- **World Health Organisation** (2010). *Healthy workplaces: A model for action*. <www.who.int>

Services

There are many specialist mental health bodies and services available throughout Australia. Key organisations and services across Australia that provide specialist advice and support for employees with a disability and their employers include:

ANU Beacon

With the recent growth in web treatments, Beacon acts as a portal to online applications for mental and physical disorders. A panel of health experts categorise, review and rate websites. These ratings are provided, along with the site link and access information. The site allows people to select web based health improvement programs that have been found to work.

<beacon.anu.edu.au>

Australian Federation of Disability Organisations (AFDO)

AFDO is the peak national body for organisations for people with disability. It aims to promote the rights of people with disability in Australia and promote the participation of people with disability in all parts of social, economic, political and cultural life.

<www.afdo.org.au>

Australian Network on Disability (AND)

AND is a not-for-profit organisation funded by its members who include large multinational corporations, small to medium enterprises, government departments and not-for-profit organisations. Its role is to help its members and clients so that they become more confident and prepared to welcome people with disability into their organisations. It does this by providing advice and services on disability to employers, government representatives and industry bodies.

<www.and.org.au>

beyondblue: the national depression initiative

beyondblue is a national, not-for-profit organisation working to address issues associated with depression, anxiety and related substance misuse disorders in Australia. Their website offers a range of resources and factsheets for employers and managers, families and the community. They also provide a workplace training program for managers and employees.

Tel: 1300 22 4636

<www.beyondblue.org.au>

Delivering National Mental Health Reform package

In the 2011–12 Budget, the Australian Government announced a \$2.2 billion *Delivering National Mental Health Reform* package to drive fundamental reform in Australia's mental health system over the next five years. This reform package was informed by extensive engagement with experts, service providers and consumers and carers.

<www.health.gov.au>

Disability Employment Australia (DEA)

DEA is the peak industry body for Disability Employment Services (DES) providers. It has a critical role in monitoring the DES program's implementation to ensure it achieves outcomes consistent with the *Disability Services Act 1986* and the Disability Service Standards. It also represents the interests of its members to government at the national level, promotes the sector through events and undertakes an educational role in best practice and innovative ways to find people with disability real jobs.

<disabilityemployment.org.au>

Disability Employment Services (DES)

DES providers have a specialist role in assisting people with disability, injury, or health condition, including people with mental illness, to secure and maintain sustainable employment. DES is uncapped, meaning that every eligible job seeker can have immediate access to services to help them get and maintain a job. DES providers support and manage the impact of a participant's condition in the workplace, providing ongoing support in the workplace for as long as it is required. This may include providing assistance such as information, training and support for employers, employees and the job seeker.

<www.deewr.gov.au>

E-couch—Australian National University

E-couch is an evidence based, self-help interactive web program. It includes modules for depression, generalised anxiety and worry, social anxiety, relationship breakdown, and loss and grief. It is based on cognitive, behavioural and interpersonal therapies.

<ecouch.anu.edu.au>

Headspace—National Youth Mental Health Foundation

Headspace is Australia's National Youth Mental Health Foundation. It focuses on the mental health, social wellbeing and economic participation of young Australians aged between 12 and 25. The website provides information and resources, including factsheets, about mental illness.

Tel: 03 8346 8213

<www.headspace.org.au>

Job Access

JobAccess is an information and advice service that offers practical workplace solutions for people with disability and their employers. JobAccess includes a comprehensive, easy to use website and a free telephone information and advice service where people can access confidential, expert advice on all disability employment matters.

JobAccess includes services, programs and products ranging from psychologists, accommodation, mentoring programs and workplace mental health programs. JobAccess promotes positive images and successful examples of the employment of people with mental health conditions and disability. It also provides comprehensive information, resources and awareness training to support employers to work effectively with people with mental health conditions.

Tel: 1800 464 800

<www.jobaccess.gov.au>

LifeLine Counselling

This provides a national 24-hour telephone counselling service to anyone who requires support, information, and referral to relevant services.

Tel: 13 11 14

<www.lifeline.org.au>

Mensline Australia

A national 24-hour telephone support, information and referral service for men with family and relationship concerns.

Tel: 1300 78 99 78

<www.mensline.org.au>

mindhealthconnect

The mindhealthconnect website is an initiative launched in July 2012 as part of the **Australian Government's National E-Mental Health Strategy**. It is dedicated to providing access to trusted, relevant mental health care services including stress, anxiety and depression.

<www1.health.gov.au/internet/main/publishing.nsf/Content/mental-pubs-e-emstrat>

MoodGYM—Australian National University

MoodGYM is a web-based, interactive self-help program for depression consisting of a number of different modules to be completed in order. The modules explore issues such as why you feel the way you do, changing the way you think, changing 'warped' thoughts, knowing what makes you upset, and assertiveness and interpersonal skills training.

<moodgym.anu.edu.au>

SANE Australia

SANE Australia is a national charity working for a better life for people affected by mental illness through campaigning, education and research. The organisation provides an online and telephone help line, online factsheets and print and multi-media resources including specific information for employers, managers, co-workers and employees with mental illness. Workplace education and training is also provided.

Tel: 03 9682 5933

Helpline: 1800 187263

<www.sane.org>

The Australian Psychological Society

The Australian Psychological Society is a professional association that represents psychologists in Australia. It provides information and resources covering a broad range of issues including depression and workplace issues. The website also provides a service to finding psychologists in your area.

Tel: 03 8662 3300

<www.psychology.org.au>

The Black Dog Institute

The Black Dog Institute is a not-for-profit, educational, research, clinical and community-oriented facility offering specialist expertise in depression and bipolar disorder. The website provides a number of tools and resources including online presentation and information about lunchtime seminars and workplace mental health and wellbeing training.

<www.blackdoginstitute.org.au>

