



# Mental health and wellbeing: A LINE MANAGER'S GUIDE



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# **Mental health and wellbeing:**

**A line manager's guide**

**October 2012**

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Suicide or Survive

Detect

Heads up

TCD

Amnesty

The Equality Authority

Mental Health Reform

Mental Health Ireland

My Mind

GLEN

Work4U

Eve

Dil Wickremashinghe

NSUE

PCI College

Shine

Headstrong

Bodywhys

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## Introduction

### **The purpose of the guide**

This guide provides information and direction for line managers in promoting mental wellbeing for all and understanding and supporting employees experiencing mental health problems while in the workplace. It highlights strategies to manage issues related to mental health in the workplace. It is a source of practical help and acknowledges the role of line managers as key players in addressing mental health problems in members of their teams, dealing with mental health problems in the workplace and underlines the importance of intervention at an early stage.

A positive and proactive approach to the promotion of mental wellbeing and prevention and management of mental health problems will reap benefits in terms of reduced absenteeism and greater productivity. Many people with mental health problems require minimal support, while others need more substantial support and this may vary over time for the individual. Line managers and colleagues are key to promoting a culture that is positive towards mental health and supporting individuals with mental health problems in the workplace. Working in a supportive team that cares about the wellbeing of its members can make a huge difference to the working environment for everyone.

Line managers may have concerns about how to respond appropriately to employees experiencing mental health problems. Often there is concern from employers regarding what is and is not okay to talk to their employee about regarding their mental health, how best to support them to wellbeing and during any leave period, and how to help them re-integrate back into the workplace following any such leave. It is hoped that this guide will touch upon a number of these key issues and assist employers, and in particular line managers, who play a crucial role in this process, to make this as positive an experience as possible for all.

While this is a best practice toolkit, it is built on the premise that employers are aware of their responsibilities under the Employment Equality Acts 1998 to 2011, the Disability Act 2005 and the Safety, Health and Welfare at Work Act 2005.

Under the **Employment Equality Acts 1998 to 2011**, discrimination on any of the nine grounds, including disability, is not allowed. Discrimination has a particular meaning under the legislation and focuses on whether a person has been treated less favourably in the workplace than another person in a similar situation on any of the nine grounds. There is a legal obligation to provide “reasonable accommodation” for individuals with disabilities, which includes mental health, without imposing a “disproportionate burden” on the employer. Reasonable accommodation applies to access to employment, participation or advancement in employment and undertaking training. Reasonable accommodation does not mean that an employer has to recruit, promote, retain or provide training to a person who does not have the capacity to do a particular job. However, an employer cannot decide that a person with a disability is incapable of doing a particular job without considering whether there are appropriate measures which they could take to support the person to carry out the required duties. Similarly case law finds that employers need to seek medical input regarding persons with mental health problems prior to making decisions about their employment.

Under the **Safety, Health and Welfare at Work Act 2005**, the employer is responsible, as far as is reasonably practicable, for the safety, health and welfare of his or her employees. This duty extends to hazards that can adversely affect the employee physically and psychologically. The employer is required to identify and assess risks that exist to its employees and the context and content of the work they undertake and monitor risk factors in the work practices to ensure they do not adversely impact on employees’ mental and physical wellbeing. Where the employer becomes aware of an employee with mental health issues<sup>1</sup>, under common law, the employer has a duty of care to ensure that so far as is reasonable, they have access to facilities and arrangements for their welfare in line with providing a safe working environment, e.g. employee assistance programmes, alternative employment, reduction in hours or part-time work.

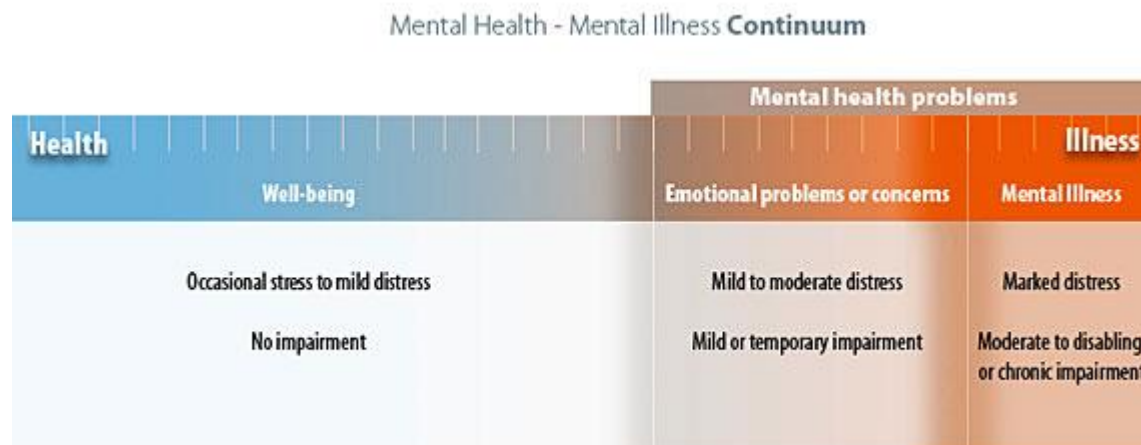
Mental health problems are growing societal problems which can affect an individual’s performance and interactions in every area of their lives including the workplace. They can affect the way we think, feel and act. Such problems can be diagnosed by a doctor – they are not

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<sup>1</sup> Mental health issues may exist but are being managed by the employee themselves (through medication or therapy etc.) but where they are struggling employer assistance may be required.

personal weaknesses<sup>2</sup>. Many people are frightened of the concept of mental health problems. The various diagnostic titles such as psychosis, schizophrenia, bipolar disorder and depression are seen as life-long labels which identify a person as somehow different from the rest of society. People can find the stigma that can be associated with significant mental health problems almost as difficult as the experience of being unwell.<sup>3</sup>

Just as we all have physical health, all of us have varying degrees of mental health which fluctuate at different points in time. Mental health problems are very common. One in four of us are expected to experience a mental health problem at some point in our lives and the World Health Organisation estimates that by 2020 depression will be the second greatest cause of disability in the world. There is no method of predicting which individuals will experience mental health problems to the extent that it interferes with their work. Depending on the circumstances in your life at any given time, your mental health may be located at any point along the mental health – mental illness continuum below<sup>4</sup>.



Source: University of Michigan:

[www.hr.umich.edu/mhealthy/programs/mental\\_emotional/understandingu/learn/mental\\_health.html](http://www.hr.umich.edu/mhealthy/programs/mental_emotional/understandingu/learn/mental_health.html)

<sup>2</sup> Mental Health Foundation (2011). *What works for you? How to help colleagues through tough times.* [www.mentalhealth.org.uk/content/assets/PDF/publications/what-works-for-you-new.pdf?view=Standard](http://www.mentalhealth.org.uk/content/assets/PDF/publications/what-works-for-you-new.pdf?view=Standard)

<sup>3</sup> Shine (2010). *Taking control of your mental health.* [www.shineonline.ie](http://www.shineonline.ie)

<sup>4</sup> [www.hr.umich.edu/mhealthy/programs/mental\\_emotional/understandingu/learn/mental\\_health.html](http://www.hr.umich.edu/mhealthy/programs/mental_emotional/understandingu/learn/mental_health.html)

## Structure

The guide is structured as follows:

- **Chapter one** will outline what we mean when we refer to mental health and highlight some of the pertinent data in this area for employers.
- **Chapter two** examines how wellbeing can be promoted in the workplace.
- **Chapter three** looks at recruitment and the key areas to remember.
- **Chapter four** outlines how to create an environment which will encourage employees to safely disclose any mental health problems.
- **Chapter five** offers ways in which line managers can be aware of signs that employees may be in need of assistance and suggests ways in which support and action can be engaged in.
- **Chapter six** covers aspects of the management of mental health problems and how the line manager might respond while the employee is unwell, upon return from a period of absence and on an on-going basis.

Finally, a number of useful resources are contained at the back of the guide which highlight organisations that may have further expertise and suggestions for assistance.

This toolkit is not a legal guideline. Full details of legal entitlements are available at [www.ibec.ie](http://www.ibec.ie). Similarly, new guides and leaflets have been produced by the National Disability Authority which can be accessed at [www.nda.ie](http://www.nda.ie) and the Equality Authority which are available at [www.equality.ie](http://www.equality.ie). This toolkit provides the tools, tips and advice that will help employers to develop good working practices for dealing with mental health, wellbeing and employment issues.

## Chapter 1: What do we mean when we talk about mental health and wellbeing?

Mental health is the emotional resilience which enables us to enjoy life, and survive pain, disappointment and sadness. Mental health can include a range of experiences or conditions that affect the health and wellbeing of everyone. Our mental health is very important for our overall wellbeing. Mental wellbeing describes the way we think and feel about ourselves and others, our confidence, and our ability to control things in our life. It goes beyond whether we experience mental health problems, and is not about whether or not we have a diagnosed mental illness. Mental health problems can range from the worries everyone experiences as part of every-day life to serious long-term conditions. The majority of people who experience mental health problems recover or learn to manage them, especially when they get help early<sup>5</sup>.

Our mental, like our physical health, needs to be protected. By looking after our mental wellbeing - for example, through physical activity, and providing opportunities for relaxation and social activities - we can increase our resilience to cope with life's difficulties and our ability to enjoy life. It is important to remember that such activities cannot prevent or treat serious mental health problems, which require expert help and can have serious impacts over long periods of time. In these cases, people should be encouraged to seek help as early as possible.

It is likely at some point that everyone will experience a strain on their mental health. For some this may be a mild and temporary experience of difficult mental health while for others there may be more severe or long-term conditions experienced.

### Facts about disability and mental health

- One in five people of working age experience a mental health problem, such as anxiety or depression<sup>6</sup>.
- Mental health problems account for up to 30% of consultations with GP's in Europe.
- Experts estimate that approximately one out of every two families will have a family member who has depression at one point in their lives.

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<sup>5</sup> [www.mentalhealth.org.uk/help-information/an-introduction-to-mental-health/what-are-mental-health-problems/?view=Standard](http://www.mentalhealth.org.uk/help-information/an-introduction-to-mental-health/what-are-mental-health-problems/?view=Standard)

<sup>6</sup> OECD (2011) *Sick on the job? Myths and realities about mental health at work*. OECD

- Some common mental health difficulties such as grief or stress can improve without any formal treatment possibly requiring only social support. Other mental health problems may require specialist support or treatment.
- Severe mental health problems are relatively rare (only 1-2% of the population<sup>7</sup>) with most falling into the mild to moderate category.

Mental health problems can occur in any individual, regardless of their job, gender, age or social background<sup>8</sup>. In relation to the workplace, people can experience mental health difficulties when they are bored, under-valued or under-stimulated and equally if too many demands are placed on them. The key to wellbeing in the workplace is striking the balance between these two opposing factors. Unresolved stress, anxiety or depression can develop into a mental health problem without the adequate support mechanisms or intervention.

### **Costs of mental health problems**

The costs of mental health problems for the individual, employers and society are significant. Figures from the International Labour Organisation estimate the costs to be in the region of 3-4 per cent of gross domestic product in the European Union<sup>9</sup>. In 2008 the Mental Health Commission report *The Economics of Mental Health Care in Ireland* estimated the direct annual cost of poor mental health in Ireland at €3 billion or 2% of GNP<sup>10</sup>. These costs include loss of potential labour supply, unemployment, absenteeism and reduced productivity in the workplace.

According to the Chartered Institute of Personnel and Development (CIPD) stress, anxiety and depression are the leading causes of long term absence for non-manual workers and the current economic climate has exacerbated stress levels in the workplace<sup>11</sup>. A recent IBEC survey found that there has been a steady increase in the proportion of employers citing mental illness as one

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<sup>7</sup> Mental Health Foundation (2011). *What works for you? How to help colleagues through tough times*. [www.mentalhealth.org.uk/content/assets/PDF/publications/what-works-for-you-new.pdf?view=Standard](http://www.mentalhealth.org.uk/content/assets/PDF/publications/what-works-for-you-new.pdf?view=Standard)

<sup>8</sup> We Can Work it Out: A local authority line manager's guide to reasonable adjustments for mental illness. Rethink (2009).

<sup>9</sup> International Labour Organization (ILO, 2000). *Mental Health in the Workplace*. ILO

<sup>10</sup> O'Shea, E. & Kennelly, B. (2008). *The economics of mental health care in Ireland*. National University of Ireland, Galway.

<sup>11</sup> Samaritans for Business: External Training Directory. Samaritans (2010).

of the main causes of long-term absence for males, increasing from 8% in 2003 to 15% in 2009. For females, the proportion also increased from 8% to 11% in the same time period<sup>12</sup>.

### **What are mental health problems?**

Mental health problems are usually defined and classified to allow professionals to divide and classify symptoms and direct people to the most appropriate assistance and treatment. The most common forms of clinically diagnosed mental health problems are depression and anxiety<sup>13</sup> with one in ten people affected at any one time. People with severe mental health problems may experience extreme mood swings in their mood from highs to lows on a regular basis, or may hear voices or delusions that cause them distress or interfere with their ability to relate to others. The latter can be diagnosed as psychosis. With these more severe conditions individuals may have periods where they lose touch with reality, hear or see things that others do not and hold unusual or irrational beliefs that interfere with their ability to carry on daily life. While general symptoms are common, individuals may behave in different ways when they are unwell.

It is important to be aware that only 1 in 100 people actually experience the more severe conditions while the majority are treated by their GP and are capable of continuing to work productively<sup>14</sup>. A GP is in a position to assess the problem with the individual and may either provide medication, monitor the patient over a period of time or alternatively refer the patient to a specialist e.g. a psychiatrist, psychologist or counsellor, if necessary. In addition, the GP may recommend a support group for the particular problem.

To follow is a summary description of the more well known mental health problems. The purpose of the descriptions is to raise awareness and create understanding. This is **not** a tool to diagnose mental health problems. Some of these symptoms can be experienced by people without them experiencing a mental health problem and not all people experience the same signs or symptoms but, they offer an overview of some mental health problems. Definitions for all mental health problems can be accessed at the Mental Health Foundation's A-Z of mental health problems at [www.mentalhealth.org.uk/help-information/mental-health-a-z/](http://www.mentalhealth.org.uk/help-information/mental-health-a-z/)

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<sup>12</sup> Employee Absenteeism: A Guide to Managing Absence. IBEC (2011).

<sup>13</sup> Line Manager's Resource: A practical guide to managing and supporting people with mental health problems in the workplace. Shift (2007).

<sup>14</sup> *ibid*



## **1. Depression**

While feelings of being miserable or sad occur generally with people from time to time, for some, these feelings will persist over a number of weeks, or recur regularly without any particular cause, and will interfere with their normal daily life. This is known as depression. A person experiencing depression will feel intense emotions of anxiety, hopelessness, negativity and helplessness.

Depression can occur suddenly as a result of physical illness, or particular stressors such as unemployment, bereavement, family problems or other life-changing events. Some people will only experience depression once while others may have recurring bouts of depression. Recovery can range from six months to a year or more.

Some of the common signs and symptoms which may be exhibited and can impact on a person's ability to work include:

- tiredness and loss of energy;
- loss of self confidence and self-esteem;
- feeling anxious all the time;
- sleeping problems;
- poor concentration;
- lack of energy;
- loss of motivation;
- feelings of worthlessness.

## **2. Bipolar disorder**

Bipolar disorder, a specific type of depression previously referred to as manic depression, is a condition where a person experiences dramatic mood swings from extreme low mood, tiredness and depressive symptoms to elated highs of overwhelmingly high energy levels, elation and enthusiasm. It involves mood swings where someone can experience at some times significant depression, and at other times excessive highs where they can lose touch with reality and do things that seem odd or illogical. Bipolar disorder affects over 3,000 people in Ireland.



### 3. Personality disorders

Personality disorders affect how a person thinks and acts. With a personality disorder an individual may think, feel and act in ways that make it hard for them to get on with others or cope with day-to-day life. They may have a small number of attitudes, behaviours and coping mechanisms thereby making them quite inflexible and often failing to see a need for change. This can result in them feeling anger and distress and hurting themselves or others. Personality disorders can be hard to treat as they are deep-rooted but people can be helped to manage their difficulties. It is estimated that 10% of the population may have a form of personality disorder.

People with personality disorders may struggle to<sup>15</sup>:

- form or keep relationships;
- get on with family, friends, people at work;
- keep out of trouble;
- control their feelings or actions.

### 4. Anxiety

Anxiety is common among both men and women. It is sometimes related to stressful events or situations, such as exams, work pressures or relationship issues. It can be experienced normally by individuals in certain situations, however, where it begins to have a negative impact on a person's everyday life it may become a mental health problem. Signs of anxiety include a racing heart, rapid breathing and sweating. There are different types of anxiety such as panic attacks and social phobia.

Someone having a panic attack<sup>16</sup> experiences a sudden and intense sensation of fear. They may feel they have lost control and feel desperate to get out of the situation that triggered the anxiety. Symptoms of a panic attack can include:

- rapid breathing;
- gastrointestinal complaints;
- breathlessness;

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<sup>15</sup> [www.mentalhealth.org.uk/help-information/mental-health-a-z/](http://www.mentalhealth.org.uk/help-information/mental-health-a-z/)

<sup>16</sup> *ibid*

- sweating;
- feeling faint or dizzy;
- shivering or shaking;
- palpitations.

## 5. Psychosis and schizophrenia

**Psychosis** affects 1 out of every 33 people. It occurs where the person appears to lose touch with reality. It can be accompanied by irrational and unfounded beliefs (delusions) and/or hallucinations (seeing, hearing, smelling or sensing things that others do not). Psychosis can be a symptom of some of the more serious forms of mental health problems including bipolar disorder, schizophrenia and personality disorder.

The exact causes are unclear but the risk factors that increase our chances of developing a psychosis include:

- family history of psychosis;
- early infections;
- trauma, stress;
- several substances including cannabis.

Common symptoms include:

- confused thoughts;
- disorganised speech and thought
- anxiety;
- various types of delusions: grandeur, persecution, referential, somatic are other examples
- auditory/somatic and visual hallucinations;
- social withdrawal.

Getting medical help early is very important for people experiencing psychosis<sup>17</sup>.

**Schizophrenia** affects 1 out of 100 people. It is a term used to describe someone who experiences a range of symptoms<sup>18</sup>. It is a serious mental health problem, marked by disturbances

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<sup>17</sup> ibid

in how a person thinks, perceives, feels and acts. Symptoms can vary greatly from one individual to another but can include:

- difficulty in concentrating;
- uneasiness around other people;
- hearing voices;
- hallucinations;
- a feeling of being controlled.

### **Mental health and work**

When we are mentally healthy we are more likely to fulfil our potential, function well and cope with and enjoy work, family and social relationships, and to make healthy choices about our lives. Mental health problems and stress are associated with many of the leading causes of disease and disability in our society (British Heart Foundation, 2010). Promoting and protecting the mental wellbeing of the workforce is important for individuals' physical health, social wellbeing and productivity.

Mental health problems are not necessarily a barrier to effective working, and work can play a very positive role in supporting individuals who have, or who are recovering from, mental health problems. To encourage and support mental wellbeing in employees, employers can work on creating the right environment and management structures and support the employment of people who have experienced mental health problems. It is important to remember that the vast majority of people with mental health problems are capable of continuing to work productively<sup>19</sup>.

### **Mental health and stigma**

Individuals with mental health problems are often reluctant to discuss their experience of being unwell with anyone other than maybe their closest friends or family. There is a clear stigma attached to mental health problems as 50% of people surveyed in a See Change study said that if they were experiencing a mental health problem they would not want anyone to know about it.<sup>20</sup>

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<sup>18</sup> Line Manager's Resource: A practical guide to managing and supporting people with mental health problems in the workplace. Shift (2007).

<sup>19</sup> Line Manager's Resource: A practical guide to managing and supporting people with mental health problems in the workplace. Shift (2007).

<sup>20</sup> Public attitudes Towards Mental Illness: A benchmark study for See Change 2010

Stigma remains an enduring problem, with widespread negative consequences. It has a negative impact on the willingness of people to acknowledge mental health problems with subsequent difficulties for early diagnosis and treatment.

Mental health remains an area that many people do not understand or may fear and as a result it is not talked about very often and this can lead to stigma and prejudice emerging.

**Ciara**

I've dealt with suicidal ideations and I've been off work and I'm almost at the stage where I feel I can go back to work. But I now have to deal with my own stigma and wondering what the stigma of others will be. Do they know why I was off work? How will they feel once I come back? What are they saying about me? Will they look at me differently; will they think of me differently?

Research suggests that every organisation is affected by mental distress and ill health in the workforce.<sup>21</sup> At any time a portion of the workforce will be experiencing poor mental health, depression or stress related difficulties. Research also suggests that employment is associated with better mental health. There are a number of key workplace variables that are important to mental health in the workplace. These include good quality jobs, working conditions and management.

People with mental health problems often do not feel comfortable about disclosing that they have mental health problems. This can limit the level of support and assistance that employers can provide for employees at this time. This will be covered in Chapter 4.

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<sup>21</sup> Sainsbury Centre (2007).

## Chapter 2 – Promoting wellbeing

Research tells us that there are significant business reasons to invest in wellbeing initiatives at work. Given appropriate action, a range of significant costs could be avoidable. UK research carried out in 2007 found that wellbeing initiatives could impact retention, productivity, absenteeism and performance while also assisting and supporting employees experiencing distress. Allowing stigma or corporate culture to prevent employees from seeking needed treatment or support, wastes valuable potential particularly as treatment can be effective in managing the situation.

Everything from sports and social activities to a balanced diet can enhance and protect both employees' mental and physical health. To facilitate the promotion of wellbeing, the prevention of workplace related mental health problems or the exacerbation of mental health problems, there are a number of things employers and organisations can do. These include the provision of good working conditions which avoid job strain and engaging in sound management practices to avoid the development of work-related mental health problems and to minimise productivity losses of workers.

Communication, however, is central to promoting wellbeing in that it ensures awareness regarding what may impact your personal wellbeing and additionally how to be more sensitive to the needs of others in the workplace. Very often employees are reluctant to seek help initially, therefore staff and employers will benefit from greater awareness as colleagues may be more likely to notice a change in manner from individuals experiencing mental health problems. A work culture where everyone is treated with respect and dignity and issues such as bullying and harassment are not tolerated will also improve the mental wellbeing of employees.

The promotion of such a culture may yield a reduction in sickness absence, grievance and discrimination claims, complaints and the incidence of mental health problems<sup>22</sup>. You, as a line manager, can promote such a culture by:

- Eliminating or minimising stress at the source.

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<sup>22</sup> Line Manager's Resource: A practical guide to managing and supporting people with mental health problems in the workplace. Shift (2007).

- Minimising the negative effects of stress via education and management strategies.
- Assisting individuals who are experiencing the effects of stress<sup>23</sup>.

## **Stress**

Pressure is part of life and helps keep us motivated and creates a sense of satisfaction when we succeed, however, excessive pressure can lead to stress. If stress is excessive or goes on for some time, it can lead to mental and physical ill health. The Health and Safety Authority report that there are as many definitions of stress as there are definitions of fatigue, mental health and upset. Ultimately stress is a negative feeling, associated with physical and psychological symptoms. People under stress may act angrier, more confrontational, fatigued, prone to upset, depressed or withdrawn, show less time for others and impose an urgency on situations which is unrealistic.

Stress experiences may differ from person to person, but the feelings it brings about tend to be similar, regardless of what causes the stress. Stress can be caused by factors at work or at home. How people cope with pressure will be affected by a variety of factors, including the amount of support available from friends, family and the workplace, as well as their own personal coping mechanisms.

A good employer should be mindful of the levels of stress that all employees experience at work and ensure that particular employees do not experience extreme pressure because of their workload. It can be difficult to know when 'stress' turns into a mental health problem, or when existing mental health problems are made worse by stress at work.

## **Preventative/Wellbeing strategies**

A recent IBEC survey of Human Resource Management practices<sup>24</sup>, found that over one-third of respondents had engaged in employee health screening in the 12 months preceding the survey. Almost one in five (18%) had a stress management campaign and just over one in ten (11%) had held a mental wellbeing campaign in the previous year<sup>25</sup>. These campaigns vary depending on the organisation's focus but can take the form of awareness training including:

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<sup>23</sup> Mental Health in the Workplace: Tackling the effects of stress. The Mental Health Foundation (1999).

<sup>24</sup> Employee Absenteeism: A Guide to Managing Absence. IBEC (2011).

<sup>25</sup> *ibid*

- the signs and symptoms of stress, anxiety and depression;
- resilience and looking after your own mental health;
- information on nutrition, exercise and a range of stress relieving activities such as meditation or yoga.

Creating the right environment and supportive relationships between staff can assist in preventing employees from experiencing work-related mental health problems and help your organisation to thrive. It is important to make sure that work environments are suitable for the task. Noise, temperature and light levels can all have a big impact on wellbeing<sup>26</sup>. For line managers, wellbeing can be achieved through employee engagement across the team and implementing work-life balance initiatives.

### **Employee engagement**

Developing a culture of employee engagement can help to ensure employee wellbeing and develop a highly motivated team. The aim of employee engagement is to elicit emotional, cognitive and physical engagement from employees while maintaining a healthy work experience. When a team is engaged and feels valued, this can affect individuals who are less engaged in a positive way. The organisation must work to develop and nurture engagement, which requires a two way relationship between employer and employee. With regards to mental health, employee engagement can help to reduce stress levels, promote a culture of support, assist in employee retention, and help to reduce the likelihood of work related mental health problems. Positive employees are valuable to an organisation. Members of disengaged teams are more likely to suffer from exhaustion, cynicism and reduced professional efficacy, in short mental burnout. This burnout that occurs can lead to more serious conditions such as mental health problems. The Health and Safety Authority of Ireland encourages companies to explore what they can do to promote employee engagement.

Employee engagement can be achieved in recognising:

- The importance of leaders and managers as role models and involving employees in shaping the ways of working in the organisation.

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<sup>26</sup> Taking Care of Business: An employers' guide to mentally healthy workplaces. Mind (2010).

- The need to consider employee engagement within the context of the overall business strategy and culture.
- The value of addressing employee engagement in any change programme.
- The necessity for internal communication to keep employees informed.
- The importance of a strong link between employee training and career development.
- The considered use of reward and recognition although the link to engagement is less direct as different employees value different forms of reward and recognition.
- The importance of understanding employees differing life circumstances and its impact on their level of engagement at work.

### **Work-Life Balance**

Some companies choose to implement initiatives to address challenges that employees may face through the dual demands of their work and non-work commitments. These can include flexible working arrangements, flexitime, part-time work and working from home. Work-life balance initiatives are a way for employers to translate their commitment to their employees into practical initiatives, with minimal cost implications. The following are some of the main ways in which work-life balance policies can benefit employers:

- Improved morale, motivation and commitment – employees appreciate the organisation's facilitation of their non-work needs and work-life balance initiatives are a way for organisations to provide a non-monetary method of rewarding and recognising employees.
- Reduced labour costs – flexible working arrangements may provide a mechanism for employers to reduce labour costs in the short term (temporary part-time, term-time leaving arrangements).
- Reduced stress – employees are better able to balance work and non-work issues and can avail of flexibility to manage pressure points in their lives.
- Reduced casual sickness – employees may have to miss days at work, arrive late or leave early, or use work time to deal with family or personal issues.
- Improved retention – Individuals may stay with an organisation longer because of access to work-life balance policies.



## Chapter 3 – Recruitment

Recruitment issues generally only arise in respect of a person who has previously experienced a mental health problem. The greatest barrier people with mental health problems face is the requirement or opportunity to prove their effectiveness. Research indicates that in general, once this opportunity is given, employees demonstrate strong loyalty toward their employer and take less sick leave than the average employee<sup>27</sup>. This barrier is often due to the stigma associated with mental health problems in general. For employers this becomes an issue where people are unwilling to disclose any information regarding previous experience with mental health problems for fear that the stigma attached to that illness may dampen their chance of recruitment. It is essential to note that the majority of those who have experienced mental health problems continue to work or have returned to work successfully.

Some companies require prospective employees to complete a medical during the recruitment process and this process can offer itself as an opportunity for a potential employee to disclose any mental health related information. In this way a potential employee can talk to an occupational health professional and agree a strategy for how to disclose and manage any subsequent episode of mental ill health<sup>28</sup>. This is essential to ensure that any additional help required is clear to all concerned.

It is not appropriate to ask questions regarding any form of disability including mental health but if a candidate does raise the subject it may be important at a second interview to ask what adjustments or additional supports would be required to carry out the job as outlined. It is not appropriate to ask about the individual's conditions, treatment or other details that are irrelevant to the work situation. It is important that all candidates are aware of the demands and requirements of the role and the culture of the organisation so that they can identify any areas that may pose problems for them.

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<sup>27</sup> Line Manager's Resource: A practical guide to managing and supporting people with mental health problems in the workplace. Shift (2007).

<sup>28</sup> *ibid*

## Chapter 4 – Creating an environment for disclosure

Discussing mental health at work can be challenging for both employer and employee. The employee may not wish to disclose the existence of a mental health problem to their employer for fear that they may be discriminated against or stigmatised. From an employer point of view, however, disclosure of a mental health problem allows the employer to provide various supports to the employee that can assist them in the work environment. The employer should therefore strive to provide a safe culture and safe environment, where an employee feels comfortable in disclosing any mental health problems, feels able to ask for any supports needed, and is assured that their disclosure of such an illness will not have a negative impact on their career<sup>29</sup>.

Disclosure is defined as the *“the deliberate informing of someone in the workplace about one’s disability”*<sup>30</sup>. There is no obligation on individuals to disclose a disability or mental health problem to existing or prospective employers, except under health and safety legislation where it could create a risk to the employee, employer or other individuals. People fear a negative impact on their employment generally or on promotional opportunities that may arise.

In some cases disclosure has been associated with negative consequences. They include:

- a change in the way the individual is perceived by others;
- a change in the way people treat them;
- an increase in supervision from managers;
- the potential for discrimination;
- the need to prove their capability to their manager;
- the loss of a promotion or even a job.

Survey research suggests that 59% of employees feel uncomfortable talking to their manager about their mental health<sup>31</sup>. The main reason for that discomfort is fear of losing their job, followed by concern about their colleagues finding out. Trust plays a vital role in creating an

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<sup>29</sup> Employee Absenteeism: A Guide to Managing Absence. IBEC (2011).

<sup>30</sup> Ellison, M., Russinova, Z., MacDonald-Wilson, K. and Lyass, A. (2003). “Patterns and correlates of workplace disclosure among professionals and managers with psychiatric conditions”, *Journal of Vocational Rehabilitation*, 18, 3-13.

<sup>31</sup> Fear of stigma stops employees with mental health problems from speaking out. Rethink (2010).

environment for disclosure and is the difference between an effective and ineffective support mechanism. Individuals may consider a number of factors when deciding whether to disclose.

- **The timing** – Prospective employees are faced with the decision to share at application, interview or after taking the position? In the case of a visible disability, disclosure may occur at interview stage; however, for a non-visible disability, particularly a mental health problem, the decision to inform an employer is far more complex. Irish research by Workway (2005)<sup>32</sup> on mental health found that two thirds of the individuals it surveyed with mental health problems had decided against informing prospective employers at interview stages, while 41% continued to conceal their mental health problem at work.
- **The effect of the disability or mental health problem on their work** – if their work is unaffected by their disability or mental health problem, many individuals may see no reason to disclose it.
- **The culture and work environment of the organisation** – if employees trust the culture and have good working relationships with their managers and colleagues they may feel more comfortable in disclosing. In particular, research found that organisations with supported employment or positive action towards disability were most likely to have a positive effect on disclosure<sup>33</sup>. Some individuals may choose to informally disclose partial information to a colleague without giving full details.
- **The stability of the work environment** – employees in temporary employment may feel less comfortable with disclosure than those in more stable employment. Equally, individuals in more senior positions may feel more in control of their jobs and therefore, disclose.

Regular work planning sessions, appraisals or informal chats about progress are all ordinary management processes which provide neutral and non-stigmatising opportunities to talk about

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<sup>32</sup> Workway (2005). Mental health and employment: *Guidelines on disclosure of a disability*. [www.workway.ie](http://www.workway.ie)

<sup>33</sup> Wilton, R.D. (2006). "Disability in the workplace". *Just Labour*, Vol. 8, Spring.

any problems an employee may be having<sup>34</sup>. If an employer demonstrates an ability to open up and be empathetic, an employee will be more likely to disclose sensitive information honestly making it easier for a manager to offer the support needed. Employing people with experience of mental health problems will also contribute to promoting a culture of openness within your workplace, where employees feel safe to talk about any problems they have and ask for help early. Such a supportive culture can assist employees in deciding whether to disclose that they have a mental health problem or disability.

Having a policy on wellbeing and mental health can provide a structure and facilitate what can be a difficult situation for the line manager also. Having clear steps and guidelines on how to engage with employees on sensitive topics like wellbeing and mental health makes it easier for an appropriate proactive strategy for addressing the situation which can be guided by the employee.

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<sup>34</sup> Mindful Employer: Line Managers' Resource. Workways (2011).

## Chapter 5 – Early intervention

As a line manager, you can and should be aware of potential signs that an employee may be experiencing difficulties. This does not require you to understand his or her mental health problem or diagnosis, but rather to identify and address the barriers to normal working life that the employee might experience. Furthermore it is unnecessary for you to know whether or not they have a personal experience of a mental health problem – it is more important to respond sensitively to someone who seems troubled than to find out whether or not they have a particular diagnosis. The longer a situation is left to continue, the harder it may become to solve. Understanding and a little accommodation may be all that employees need to overcome an episode or difficult experience. If an employee is already off sick, a lack of contact or support from you might mean they feel unable to return<sup>35</sup>. Early identification and action will minimise risks around people not returning as work would be seen, not as part of the problem but as part of the solution.

### Identifying early signs of distress

Obviously, as a line manager you are not expected to be an expert in the area of mental health, however, there are a number of key signs that may alert you to difficulties that a member of your team may be experiencing. These symptoms can occur in any combination and each individual is different so they may experience different levels at different stages. Symptoms include:

- changes in a person's usual behaviour;
- poor performance;
- tiredness;
- increased absence;
- previously punctual employees turning up late<sup>36</sup>;
- noticeable increase in alcohol consumption or smoking;
- loss of humour;
- constant headaches;
- tearfulness.

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<sup>35</sup> Line Manager's Resource: A practical guide to managing and supporting people with mental health problems in the workplace. Shift (2007).

<sup>36</sup> *ibid*

### **Some possible signs of a mental health problem**

Please note there are other possible causes of such signs so it is more important to respond sensitively to someone who seems troubled than to find out whether or not they have a diagnosis.

#### **Signs of depression**

People who are depressed may:

- Be tearful, nervous, irritable;
- Have low confidence;
- Lose interest in their work and find it difficult to concentrate;
- Feel overwhelmed and unable to deliver what is expected of them;
- Lose their appetite;
- Get tired easily.

At worst, they may feel suicidal. If an employee expresses suicidal intent it is important to immediately get assistance. (The HSE run a suicide first aid course, ASIST for individuals interested in training in this area).

#### **Signs of anxiety**

Anxiety takes many forms from general anxiety to anxiety triggered by a particular situation (a phobia). People experiencing anxiety may seem unusually worried or fearful in most situations.

They may:

- Appear pale and tense;
- Be easily startled by everyday sounds;
- Have difficulty concentrating;
- Be irritable;
- Try to avoid certain situations.

#### **Signs of panic attacks**

Panic attacks are usually a sign of anxiety and are common in the workplace. Someone experiencing a panic attack may:

- Be breathing rapidly
- Be sweating
- Feel very hot or cold
- Feel sick or faint
- A task that other people consider simple may seem impossible to them.

The symptoms of a severe panic attack can be quite similar to a heart attack, and someone experiencing one may be convinced that they are going to die.

#### **Signs of obsessive compulsive disorder**

OCD is a common form of anxiety involving distressing repetitive thoughts. To stop these excessive thoughts people engage in compulsive actions which they feel they must repeat in order to feel less anxious or stop their obsessive thoughts. For example, some people's obsessive thoughts revolve around germs and diseases. To cope with this anxiety they may wash their hands repeatedly. Compulsions often involve checking, cleaning, counting or dressing rituals.

**Source:** Mental Health Foundation (2011). *What works for you? How to help colleagues through tough times.*

It might be the case that certain tasks, work environments, times of the day or particular teams are more likely to be associated with people experiencing difficulty. Other signs of increasing stresses in the workplace can manifest through disputes, increased staff turnover or increases in grievances and complaints<sup>37</sup>. Similarly, if the employee is having frequent short bursts of sickness absence with a variety of reasons such as stress, back pain or where there is no reason given, there may be an underlying, if transitory, mental health problem that should be discussed.

### **Gary**

In 2009 I was working long hours and hitting a lot of stressful situations during my working day. I battled through and told no one of how I was feeling, within three months of this lifestyle and work load, I was starting to have anxiety and depressing thoughts, suicidal thoughts were always nagging me and convincing me that they were the solution. During September 2009, I built up the courage to explain how I was feeling to my wife, my employers, my family and my friends, this was both the scariest and most rewarding thing I have ever done.

### **How can you help?**

Discussions with employees can occur through normal management processes such as regular work strategy sessions, appraisals or informal progress chats which provide “neutral and non-stigmatising<sup>38</sup>” opportunities to discuss any problems an employee may be having. At all times, in the language used and the attention given, your employee should be treated with respect. Your behaviour will act as a model for your team. Following the first communication, schedule a follow up date to see how they are coping and if further adjustments or assistance may need to be provided or facilitated where possible.

The use of open questions, such as “*How are you doing at the moment?*” or “*Is there anything that we could do to help?*” can help the employee express any concerns they may be experiencing.

Questions should be neutral and you should give the employee time to answer. If you have specific grounds for concern – such as poor performance, it is important to raise this at an early stage. Again the use of open, exploratory and non judgmental questions can elicit the key

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<sup>37</sup> Mental Health in the Workplace: Tackling the effects of stress. The Mental Health Foundation (1999).

<sup>38</sup> Line Manager's Resource: A practical guide to managing and supporting people with mental health problems in the workplace. Shift (2007).

information from employees. For example, *‘I’ve noticed that you’ve sometimes been arriving late recently and wondered if there was a problem.’*

These discussions should be private, positive and supportive and identify what the issue is and what if anything you can assist with. It is important for the employee to only share as much or as little as they want to. You should reassure them that they do not have to answer any questions that they would prefer not to. It can be useful to ask how the employee would like you to help them. Try not to jump to conclusions, assumptions or diagnoses as you probably are not a medical or psychologically trained expert. It is important at this stage also to avoid making assumptions about what someone can or cannot do.

Other opportunities to open up communication can come about when dealing with absence. In particular, it is good practice to have a return to work interview whether the absence has been brief or long-term. For short absences, it can be a quick, informal chat that gives you an opportunity to check how someone is getting on. It is important that employers engage in systematic monitoring of sick-leave behaviour to detect longer-term or repeated absences as early as possible and manage those by providing immediate retention support or access to relevant supports as necessary. This will hopefully lead to the avoidance of unnecessary dismissal caused by mental health problems through the provision of adequate incentives, information and support.

It is important to remember that not every situation will be experienced in the same way by everyone in your team. Factors such as additional pressures or events that are happening in other aspects of an individual’s life may result in different reactions to similar experiences.

## **Listening**

Often employees who have experienced stress, anxiety or depression in the workplace need a platform to vent their emotions. In these incidents, it is necessary to listen, sympathise and give the employees the space to recover. The employee may be upset and therefore it is important to be reassuring and to listen to them before informing them of the types of support the organisation can provide or referring them towards expert help in this area.



Where appropriate you may need to offer coaching or assistance to help them to see how they can deal with a work problem. At times, empathy may be all that is needed, however where there are serious underlying problems, the best approach is to refer them to someone trained to provide appropriate support<sup>39</sup>. Many organisations have employee assistance programmes where trained counsellors provide support to employees, within an agreed framework. During difficult times or when the organisation is going through upheaval, requests for assistance may become more frequent. An effective line manager should be able to anticipate and identify problems, dealing with them before they escalate. Taking the time to get to know your team, regular communication and meetings will enable a line manager to notice any emotional difficulties or changes that may be occurring for an employee.

If an employee is experiencing severe symptoms of a mental health problem, you should seek advice from an occupational health provider or medical personnel.

### **Confidentiality**

Sometimes employees will be reluctant to talk to their own manager for a variety of reasons. Line managers should not take this personally but should ask the employee to identify if they would prefer to speak to another line manager. It is important that the right person has been selected to interact with the employee. Very often employees communicate on different levels with different people and therefore it is important to find someone who can put the employee at ease. An employee must know that the door is open for discussion at all times.

All discussions should be confidential. It is important to be clear about your confidentiality and about who will be told what. If an employee elects to speak to a particular line manager, it should be made clear to them that while any information will be treated as confidentially as possible, if a health and safety risk is identified, it may be necessary to disclose that information to the company's Occupational Health Specialist or HR specialist for the purpose of assisting the employee in getting the support they need.

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<sup>39</sup> The Essential Guide to Line Management. IBEC (2011).

### How do I respond in a crisis?

People with mental health problems sometimes experience a **crisis**, such as breaking down in tears, having a panic attack, feeling suicidal or losing touch with reality. Should this occur there are a number of general strategies that you can use to help:

- Listen without making judgements;
- Provide reassurance and offer practical information;
- Ask them what would help them;
- Avoid confrontation even if they become agitated or aggressive;
- Ask them if there is anyone you would like them to contact on their behalf e.g. a friend or relative;
- Encourage them to get professional help.

If the team member is **seeing, hearing or believing** things that no-one else does it can be a symptom of a mental health problem. It is important to:

- gently remind them who you are and why you are there;
- not reinforce or dismiss their experiences but acknowledge how their symptoms are making them feel.

If an employee is experiencing severe symptoms of mental health problems, you should seek advice from an occupational health provider or medical personnel.

If your team member says they are feeling **suicidal** or cannot go on or you suspect that they are thinking of taking their own life, it is very important to encourage them to get help.

Support details for experts in this area such as the Samaritans are available at the back of this guide.

**Source:** Mental Health Foundation (2011). *What works for you? How to help colleagues through tough times.*

## Chapter 6 – Managing wellness and mental health problems

As an employee manages their mental health through wellbeing strategies or medical or counselling techniques there will be different supports or needs they may have which the employer or line manager can assist with.

### **Maintaining contact throughout sickness**

As a matter of good practice, employers should keep communication channels open with an employee who is out sick. The employer should have on-going contact with the employee as to when they will be fit to return, while assuring them of their value to the company. People who are absent with mental health problems sometimes report a sense of dread in returning to work having been out sick.

Maintaining regular contact can help reduce any feelings of isolation, and to show them that their contribution to the organisation is being missed and demonstrate the company's concern for their welfare. A lack of contact could be interpreted as a sign that the company is not concerned and that there is no pressing need for them to return to work<sup>40</sup>. At the same time it is important that medical and personal boundaries are understood and will be respected.

Managers often fear that contact with someone who is off sick will be seen as harassment. However, the view from the majority of people who have experienced a mental health problem is that appropriate contact is vital<sup>41</sup>. Without the necessary contact, employees may feel under valued which can exacerbate already low self-esteem. Depending on the severity of the experience, and with the advice of an occupational health provider or medical personnel, managers may be able to explore the option of flexible arrangements between work and absence such as working for a couple of hours a day from home (there may be sickness benefit implications to this which need to be considered – advice should be sought from the Department of Social Protection).

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<sup>40</sup> The Essential Guide to Diversity. IBEC (2009).

<sup>41</sup> Line Manager's Resource: A practical guide to managing and supporting people with mental health problems in the workplace. Shift (2007).

While an employee may wish to have no contact, it is ill advised to sever all contact with the individual. All evidence suggests that this hinders employees' recovery and greatly reduces the chances of a successful return to work. People may request no contact because they feel embarrassed. Treating the employee normally while maintaining support can often overcome this obstacle. Sometimes an employee will prefer to retain contact with someone other than their line manager. In these circumstances a Human Resources or other manager may be appropriate.

In addition, there are obligations on the employee to make contact in line with company policy. It is important from the first call when an employee rings in sick to agree when follow-up contact will be made. This means that the lines of communication remain open particularly at the early stages.

### **June**

Recovery from mental illness is possible. In 2005 my perception of mental health problems changed forever. I was voluntarily admitted to a psychiatric hospital— suffering from an acute episode of depression and anxiety. I was to remain there for seven weeks. Three weeks later I returned to work and six years later my experience has taught me that with the right supports in place it is possible to recover from a mental health problem – a lesson we all need to remember.

### **Communicating with colleagues**

It is important to agree with the person what, if anything, they wish their colleagues to be told. This may require a balance between maintaining their confidentiality and letting people understand what is happening. Similarly it is important to ascertain whether they want to be visited or receive cards or not. If cards are usually sent if there is a physical health problem, the same procedures should apply to a mental health problem. Treatment of someone with a mental health problem should be exactly the same as any other sickness absence. It is important that you check in with the employee over time, as their requests may change as their mental health improves. If there is a written absence policy in place this will enable you to open a conversation regarding the level of contact to be made.

## Return to Work

Research has shown that the longer a person is absent from work, the harder it is for them to return. According to Philips et al <sup>42</sup>, there is evidence to suggest that a 'proactive approach to supporting the return to work of ill employees can have beneficial consequences both in terms of reducing lost working days and securing an employee's continued employment'. In addition, rehabilitation to work after longer term absence due to mental health problems will usually be more cost effective than early retirement and recruiting and training a replacement.<sup>43</sup>

It is important to remember that pressures can affect a person when they return to work after experiencing a mental health problem related absence. When colleagues are aware of what has happened, relationships can change and make it much more difficult for the person to resume a normal life.

Before an employee returns to work, you should consider with the employee any factors that may have contributed to their absence and that could realistically be changed or accommodated<sup>44</sup>.

Adjustments to working arrangements may need to be made to ensure a swift return to productivity. It is necessary to be realistic about workloads when the employee first returns. It is important to set achievable workloads and attainable goals. However, it is as important not to "side-line" the individual and take responsibilities away from them either. Support is crucial and these adjustments should be backed up with continuous informal chats in order to maintain a comfortable platform for both parties to monitor progress. Some companies have implemented a mentor or buddy scheme to give an employee the opportunity to talk to someone who is not their manager.

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<sup>42</sup> Absence Management and the Issues of Job Retention and Return to Work, Human Resource Journal, Vol.12, No.2, Philips, J., Cunningham, L., Dibben, P., (2002).

<sup>43</sup> Mental Health in the Workplace: Tackling the effects of stress. The Mental Health Foundation (1999).

<sup>44</sup> Line Manager's Resource: A practical guide to managing and supporting people with mental health problems in the workplace. Shift (2007).

**In consultation with the employee regarding what might best suit their circumstances some common adjustments include:**

- Phased return to work starting with a few hours a day and building up to their usual hours
- Reduced hours or changed work pattern
- Later start time – some medication can make individuals drowsy early in the morning and they may require some flexibility with their start time to accommodate
- Changes to workload
- Changes to work environment
- Instead of a long lunch break - a series of short breaks throughout the day can be useful
- Accommodation of time off for medical or counselling/therapeutic appointments.

**Avoid:**

- Bringing noticeable special attention to the employee. Any additional interaction should be done so in private to avoid resentment both with the individual and their peers.
- Having a backlog of work waiting for an employee. Finding a backlog of work can often suddenly bring about an incident of stress likely to cause mental distress<sup>45</sup>. A work overload may compel employees to work longer hours, which, if sustained, may compound the experience of stress. Workload must be examined in relation to the speed at which work has to be completed and the nature and control of the employee's pace.

**Be aware:**

- Sometimes employees will return while still on a course of medication. Occasionally, medication can have distressing side effects, which can be easily confused for the original illness, or can affect an employee's ability to perform certain job related tasks. This is of particular importance to be mindful of where jobs have associated health and safety risks.

**Consider:**

It takes time when returning after any sort of illness to be fully fit again. Therefore, it may be useful, where possible, to adjust work in the early stages to promote a swift return to full recovery and ease the individual back in. Full communication of the reasons and timeframes of

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<sup>45</sup> Line Manager's Resource: A practical guide to managing and supporting people with mental health problems in the workplace. Shift (2007).

these actions are important to communicate, to avoid the employee feeling they are being “side-lined”. It is essential that people returning from absence due to mental health problems are given an equivalent level of flexibility and support as those returning from physical health problems.

Other issues to be mindful of which may impact on an individual's mental health include:

- Job context – is there a balanced mix of tasks?
- Autonomy – can the employee influence the pace and sequence of activities?
- Scope for contact and report – can the employee call upon colleagues or superiors when they are experiencing problems at work?
- Pressure of work – are there any peak times or workload peaks?
- Working conditions that create problems – are there any factors in the working environment that create obstacles to completion or success?
- Personal characteristics – are the demands of the post commensurate with the skills and knowledge of the employee?
- Fear, ignorance or hostility from colleagues – has the stigma attached to mental health problems become apparent among the peers of the affected employee<sup>46</sup>? Any bullying or harassment that may arise needs to be addressed and removed promptly.

### **Unsuccessful return to work**

Sometimes the return to work may not work out properly with the individual returning too soon or issues arising. In this scenario, a progress review should be put in place, while giving further options for future adjustments that may ease the return. This should always be followed by a discussion with the employee to explore where they see their recovery going. For example, in some cases if all reasonable adjustments have been made, it may be necessary to consider alternatives.

Where attendance, performance or conduct issues arise the normal company procedures should be employed where the issues are not related to the mental health problem. This may be up to and including termination if not appropriately resolved<sup>47</sup>.

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<sup>46</sup> Line Manager's Resource: A practical guide to managing and supporting people with mental health problems in the workplace. Shift (2007).

### **Managing on-going illness while at work**

It is important to remember that most people experiencing on-going mental health problems will be able to continue to work successfully without any disruption and with minimal or often no support. Therefore, unless an employee asks for specific assistance, that employee should be treated exactly the same as other employees regardless of their illness. It is essential that no assumptions are made about individual's capabilities or career prospects or requirements as this may be perceived as discriminatory.

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<sup>47</sup> Line Manager's Resource: A practical guide to managing and supporting people with mental health problems in the workplace. Shift (2007).



## Useful resources

*Some of the useful resources that are available or may be of interest to those looking to source contact points or further information. This list is not exhaustive but has been suggested by experts in the field of mental health and was correct at the time of publication.*

### Guidelines

- Equality and mental health: How the law can help you; Equality and mental health: What the law means for your workplace – Available from the Equality Authority  
[www.equality.ie](http://www.equality.ie)
- Breaking the silence in the workplace: A guide for employers on responding to suicide in the workplace – Available from the Irish Hospice Foundation and Console  
[www.hospice-foundation.ie/](http://www.hospice-foundation.ie/) and [www.console.ie](http://www.console.ie)

### Survey data

- Employee Absenteeism: A guide to managing absence – Available from IBEC  
[www.ibec.ie](http://www.ibec.ie)
- [www.mind.org.uk/assets/0001/6315/5681\\_EmpOutlook\\_Mental\\_Health\\_Focus - CIPD\\_survey.pdf](http://www.mind.org.uk/assets/0001/6315/5681_EmpOutlook_Mental_Health_Focus_-_CIPD_survey.pdf)
- [www.mind.org.uk/assets/0001/6314/Managing\\_and\\_supporting\\_MH\\_at\\_work.pdf](http://www.mind.org.uk/assets/0001/6314/Managing_and_supporting_MH_at_work.pdf)

### Useful online resources

- Mental health information  
[www.shineonline.ie/](http://www.shineonline.ie/)  
[www.spunout.ie/](http://www.spunout.ie/)  
[www.yourmentalhealth.ie/](http://www.yourmentalhealth.ie/)  
[www.seechange.ie /index.php/stigma-and-discrimination/99-get-help](http://www.seechange.ie/index.php/stigma-and-discrimination/99-get-help)
- Mental health information, training and education  
[www.mentalhealthireland.ie/](http://www.mentalhealthireland.ie/)  
[www.detect.ie/](http://www.detect.ie/)

- Simple diagnostic tool for depression:  
[www.beyondblue.org.au/index.aspx?link\\_id=89.676](http://www.beyondblue.org.au/index.aspx?link_id=89.676)
- Simple diagnostic tool for anxiety:  
[www.beyondblue.org.au/index.aspx?link\\_id=90.614](http://www.beyondblue.org.au/index.aspx?link_id=90.614)
- Intervention services to clients:  
[http://mymind.org/index.php?p=1\\_9\\_ePsychologist](http://mymind.org/index.php?p=1_9_ePsychologist)
- In-crisis Phone support:  
[www.samaritans.org/talk\\_to\\_someone/find\\_my\\_local\\_branch/ireland.aspx](http://www.samaritans.org/talk_to_someone/find_my_local_branch/ireland.aspx)
- Self-help modules:  
[www.beyondblue.org.au/index.aspx?link\\_id=89](http://www.beyondblue.org.au/index.aspx?link_id=89)
- HeadsUp CBT Based Online Skills  
[www.headsup.ie/selfhelp/index.php](http://www.headsup.ie/selfhelp/index.php)
- Wellness Recovery Action Plans  
[www.mentalhealthrecovery.com](http://www.mentalhealthrecovery.com)

### Helpline numbers/websites

#### Aware Defeat Depression

72, Lower Leeson Street  
Dublin 2.

[www.aware.ie](http://www.aware.ie)  
[info@aware.ie](mailto:info@aware.ie)

01-6617211 (*7 days from 10am - 10pm*)  
1890 303 302

#### Console

Console House  
4 Whitethorn Grove  
Celbridge  
Co. Kildare

[www.console.ie](http://www.console.ie)  
[info@console.ie](mailto:info@console.ie)

01-6102638  
1800 201 890

#### GROW in Ireland

Ormonde Home  
Barrack Street  
Kilkenny

[www.grow.ie](http://www.grow.ie)  
[info@grow.ie](mailto:info@grow.ie)

1890 474 474

#### Headstrong

16 Westland Square  
Pearse Street  
Dublin 2

[www.headstrong.ie](http://www.headstrong.ie)

01 4727 010

**HeadsUp**

Roslyn Park, Sandymount, Dublin 4  
[www.headsup.ie](http://www.headsup.ie)

For a list of helpline numbers text Headsup' to 50424.

**Irish Advocacy Network**

c/o Health Care Unit  
Rooskey,  
Monaghan  
Co. Monaghan

[admin@irishadvocacynetwork.com](mailto:admin@irishadvocacynetwork.com)

047 38918

**Living Links**

McDonagh House  
Dublin Road  
Nenagh  
Co. Tipperary

[www.livinglinks.ie](http://www.livinglinks.ie)

087-9693021

**Mental Health Ireland**

Mensana House  
6 Adelaide Street  
Dun Laoghaire  
Co. Dublin.

[www.mentalhealthireland.ie](http://www.mentalhealthireland.ie)  
[info@mentalhealthireland.ie](mailto:info@mentalhealthireland.ie)

01-2841166

**My Mind**

1 Chelmsford Road  
Ranelagh  
Dublin 6

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

01 443 3961

**National Office for Suicide Prevention**

Population Health Directorate  
Health Service Executive  
Dr Steeven's Hospital  
Dublin 8

[www.nosp.ie](http://www.nosp.ie)  
[info@nosp.ie](mailto:info@nosp.ie)

01-6352139 or 01-6352179

**Pieta House**

Lucan Road  
Lucan  
Co. Dublin

[mary@pieta.ie](mailto:mary@pieta.ie)  
01 601 0000

**Reachout.com**

16 Westland Square  
Pearse St.  
Dublin 2

<http://ie.reachout.com/>  
[info@inspireireland.ie](mailto:info@inspireireland.ie)

**Samaritans**

4-5 Usher's Court  
Usher's Quay  
Dublin 8

[www.samaritans.org](http://www.samaritans.org)  
[jo@samaritans.org](mailto:jo@samaritans.org) (24 Hour Email Help)

01-6710071 or 1850 609090

**Shine**

38 Blessington Street  
Dublin 7

[www.shineonline.ie](http://www.shineonline.ie)

[info@shineonline.ie](mailto:info@shineonline.ie)

Office: 01 8601620 or 1890 621 631