

Commission de la santé mentale du Canada

Mental Health and Wellness: Modern Solution for a 21st Century Challenge

Louise Chénier, Program Manager, Workplace Mental Health Mental Health Commission of Canada

> #workplaceMH, #SantéMentaleAuTravail, #stigma, #MHCC_Conf ☑@MHCC_ ¶/theMHCC ☐/Mental Health Commission of Canada ▷/1мнсс ☐@theMHCC

Presenter



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Louise Chénier Program Manager, Workplace Mental Health Mental Health Commission of Canada



Focus of Today's Session

- 1. Why is this an issue?
- National Standard as a tool for the federal public service to advance workplace mental health
- 3. Federal Public Service Strategy and Joint Task Force Initiative
- 4. Case Study Testimonials
- 5. Practical Tips and Tools: Role of Executives in Advancing this Area



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THINK OF YOUR WORKPLACE.....



Stigma





Stigma



HEART SEASE. **CANOTHER** USF **7**Y Ι **PPLE NOT TO WORK**.

IMAGINE IF WE TREATED EVERYONE LIKE WE TREAT THE MENTALLY ILL.

Shocking, isn't it? But it's true. People simply don't take mental illnesses seriously. They assume that those with mental illness are weak or somehow at fault for their suffering. But like heart disease or any other serious affliction, people with mental illness can't get better

by themselves. The Canadian Psychiatric Research Foundation raises money to research mental illnesses in the hope of finding cures. Still, research into these diseases, which strike 1 in 5 Canadians, remains drastically underfunded. And that's as unsettling as the headline. We need



your help. If you can, please give. Call 1-800-015-CPRF or visit www.cprf.ca MENTAL ILLNESS IS REAL. HELP US FIND A CURE.



HEALTHY	ILL
	Diagnosable nental illness Severe and persistent functional impairment

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Mental Health Continuum Model



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An individual's mental health can move from good to poor mental health along a gradient on a daily basis



nctional impairment

Why is workplace mental health important?



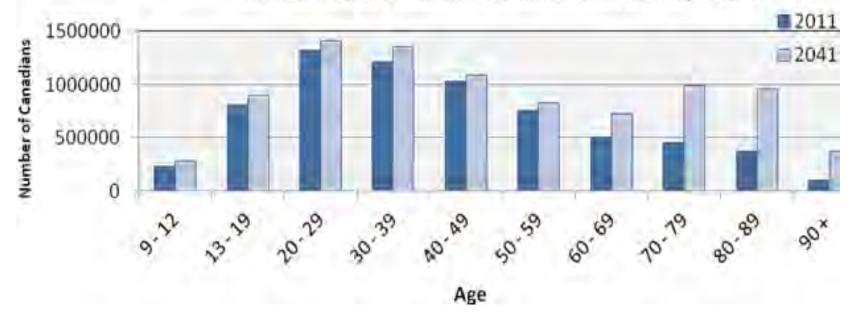
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Impact During Prime Working Years

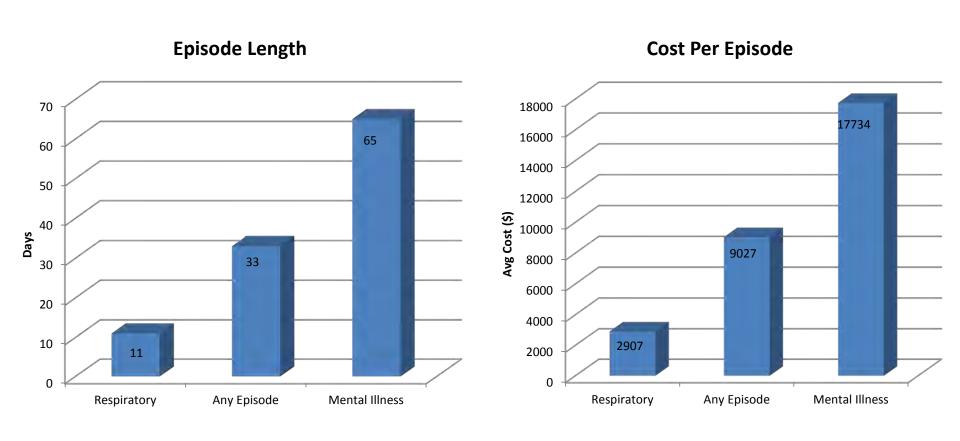
- One person in five will experience a mental health problem or illness in any given year in Canada
- People in their early working years are most affected



Mental Health Problems and Illnesses in the Population



Facts and Figures







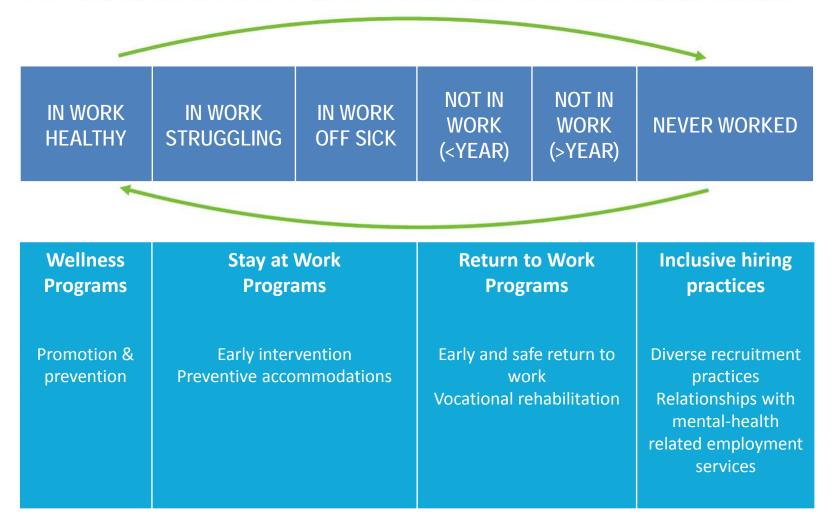
The Cost of Doing Nothing

- ✓ Absenteeism
- Presenteeism
- Disability claims
- Injuries / illnesses
- Grievances / complaints
 - Turnover
- Legal implications

Background



The strongest predictor of return to work is the availability of evidence-based employment programs





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THERE ARE SOLUTIONS

Supporting Workplace Mental Health

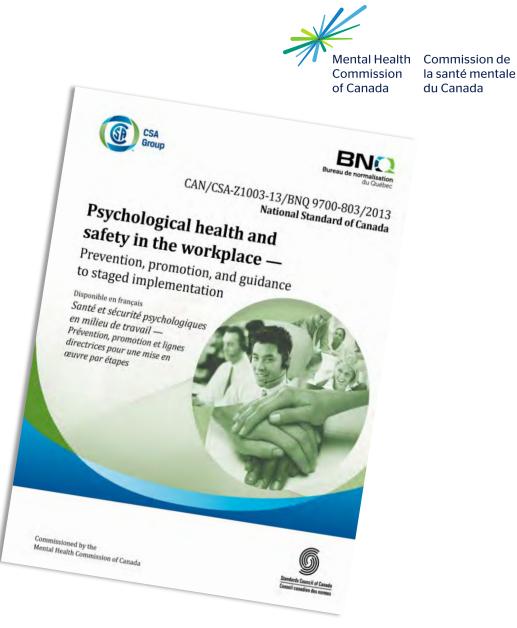


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The Standard

- Framework
- Tools not Rules
- Free
- Voluntary



Download: csa.ca/z1003



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Workplace Mental Health Factors



Psychological Support



Organizational Culture



Clear Leadership & Expectations



Civility & Respect



Psychological Demands



Growth & Development



Recognition & Reward



Involvement & Influence



Workload Management



Balance



Psychological Protection



Supportive Physical Environment



Engagement





5 Pillars to Your Workplace Mental Health Strategy

Programs

Policies

policies

Employee

recognition

Space for privacy

(e.g. quite room)

Accommodation

Return to work plans

Workplace awareness campaigns

Occupational health services department

Integrated wellness program

Peer support programs

Self-help tools

Benefits

EAP or EFAP

STD & LTD leave

Paid leave for medical appointments or family obligations

Prescription drug coverage

Coverage for psychological services

Training

Resiliency

Mental health training (e.g. MHFA)

Anti-stigma training (e.g. The Working Mind)

Respect in the workplace

Management training

Assessment

Employee surveys (Guarding Minds @ Work)

Interactive Audit Tool

Mental Health at Work (Excellence Canada)

Health risk assessments

Accreditation/Certification

National Standard for Psychological Health & Safety in the Workplace

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FEDERAL PUBLIC SERVICE



Cannot Ignore Anymore



"Mental health challenges are a reality in all parts of society and in all workplaces... We must create the space for open and stigma-free dialogue that allows for honesty and compassion as well as focus on preventing harm, promoting health and resilience, and addressing incidents or concerns"

---- Clerk of the Privy Council, 22nd Annual Report to the Prime Minister on the Public Service of Canada

First Joint Task Force Report C December 2015

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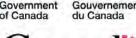


- Recommendations align with the Standard
 - Work already underway
- Executives are key in realizing and implementing the recommendations across the public service



Federal Public Service adopt the following vision:

To create a culture that enshrines psychological health, safety and well-being in all aspects of the workplace through collaboration, inclusivity and respect. This obligation belongs to every individual in the workplace.



of Canada Second Joint Task Force Report Canada May 2016



- Provides specific direction to federal public service organizations in key areas
- Federalized version of Assembling the Pieces, which will service as a roadmap for organizations
 - Centre of Expertise for Federal Public Service

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Federal Public ServiceCanadaWorkplace Mental Health Strategy

Focus on three strategic goals:

- 1. Change the culture
- 2. Build capacity
- 3. Measure, report, and continuously improve



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Big changes happen one small step at a time.

Case Study Research Project



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Following More than 40 Organizations



Three year national study (Feb 2014 - March 2017)

- Breakdown barriers to implementation and identify gaps and challenges
- Determine promising practices
- Build a strong business case for implementation
- Inform future revisions to the Standard
- Identify tools/resources to help with implementation
- Create a blueprint for future organizations that wish to implement the Standard

Michael Garron Hospital



(formerly Toronto East General Hospital)







- The staff of the emergency department have received training in mental health first aid
- A burnout checklist was developed for nursing units
- An environmental analysis in order to improve the workplace violence prevention program
- Change management seminars for staff
- Anti-stigma campaign
- Peer support program in the emergency department
- Train managers in Queen's University's Workplace Mental Health Leadership certificate program

The Outcomes



The Michael Garron Hospital has experienced a **7% decrease** in overall healthcare costs over the last four years and a decrease in days absent (10.66 in 2008 to 6.55 in 2014).

The hospital's overall **staff engagement scores** have significantly increased placing them as the leading community hospital in 9 of 11 engagement categories. They believe their staff engagement score improvements have been a significant driver in improving their **patient satisfaction and overall quality metrics**.



- Canadian telecommunications and media
- Serves over 13 million phone lines
- Revenue \$19.49 Billion in 2014
- More than 55,000 employees
- Ranked number 262 on the 2011 edition of the Forbes Global 2000 list

Key Activities



- Overall mental health strategy and policy
 - Stress management
 - Training for managers and employees
 - Work-life balance support
- Mental health awareness campaigns
- New services and business programs
 - Full-time resource for the implementation of the Standard
 - Workplace mental health peer support program
 - Virtual and technological programs for remote employees
 - Integration of best practices related to mental health in all key or high risk processes (eg., performance management)

Bell's Mental Health Scorecard Bell

Category	Key indicators	2010	2011	2012	2013	2014							
		actual	actual	actual	actual	actual	Q1	Q2	Q3	Q4	YEE	4 last quarters	Target
Short term disability	% of employees with at least 1 MH related claim during the year											quantoro	
	Avg claim duration (days) - MH cases												
	Total cost (excl. Bell Media)												
	% of payroll (excl. Bell Media)												
	% of MH related diagnoses										ors		
	Relapse rate									51	Jears		
	Recurrence rate							h	101		1		
Long term disability	% of MH related diagnoses (New cases only)					- tr	ack	En					
	# new MH claims accepted			Nica	tor	5, •							
Usage of benefits and programs supporting	% of total drug costs related		e In	aice									
mental health	% of payroll (excl. Bell Media) % of MH related diagnoses Relapse rate Recurrence rate % of MH related diagnoses (New cases only) # new MH claims accepted % of total drug costs related # and Perform Perform												
	rr of leaders in scope for Workplace Mental Health Leadership training program												
	Cumulative # of employees who completed initial D225 (MH1 Classroom) (In & Out of scope, Active & Inactive)												
	% of in scope employees who completed Mental Health 1 Classroom training												
	% of in scope employees who completed Mental Health 2 Classroom training												
	% of in scope employees who completed certification - module 3												
	# of MH events												
	# of hits on Bell Let's Talk internal website												

The Outcomes



2X increase in utilization

Improvement in Employee & Family Assistance Program use Double digit % decrease

Fewer short-tem disability claims related to mental health

Workplace programs delivering promising results

Implementation Facilitators



- 1. Active leadership support
- 2. Adequate structure and resources
- 3. Organizational size
- 4. Psychological health awareness
- 5. Existing Psychological Health & Safety processes, policies, and programs
- 6. Prior Implementation Experience
- 7. Connection

Implementation Barriers



- 1. Limited access to psychological health data
- 2. Significant organizational change
- 3. Inconsistent leadership support
- 4. Lack of demonstrated employee awareness
- 5. Inadequate resources
- 6. Conceptual confusion (e.g. critical events, excessive stress)

Key Take-Aways for Executives

- Leadership
- Engage all stakeholders
- Communicate
- Recognition and reward
- Walk the talk
- Recognize indicators of mental distress
- Competency skills
- Accommodation and return to work
- Ensure direct reports understand mental health policy
- Educational opportunities
- Encourage and support staff



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Mental Health Continuum Model



Normal sleep patterns Few sleep difficulties	Trouble sleeping Intrusive thoughts Bad dreams	Restless, disturbed sleep Overall restlessness Recurrent images Nightmares	Can't fall asleep or stay asleep Sleeping too much or too little
Physically well Good energy level	Muscle tension Headaches Low energy	Increased aches and pains Increased fatigue	Physical illness Constant fatigue

What Can You Do as a Manager?



- Do not ignore warning signs—trust your instincts
- Do not assume it is a performance issue, ask questions to ensure you understand the root causes
- Do not attempt to diagnose a mental health issue
- Provide guidance and support in a sensitive manner



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What Can You Do as a Manager? (cont'd)

- Offer accommodations
- Be supportive of employees returning to work
- Build your own awareness and confidence
- Know where to locate resources and contacts so that you can quickly react
- Foster an open, inclusive environment
- Lead by example

What Can You Do as a Colleague?



- Talk to your manager or Human Resources (HR) department about improving your workplace
- Take part in the conversation
- Be an agent of change—think about your part in influencing the culture
- Explore the situation
- Encourage your colleague to take action
- Seek additional support
- Look after yourself



What Can You Do for Yourself?

- Recognize when you might be experiencing difficulties with your own mental health
- Seek out resources and supports available in your community and at work
 - Talk to your manager, occupational health professional, or HR Division (HR Advisor)
 - Contact your confidential Employee Assistance Program (EAP)
 - Contact the confidential Informal Conflict Management Services - proactive conflict management

The Bottom Line



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- ✓ There is no health without mental health
- Investing in workplace mental health leads to better health, happier workplaces, enhanced productivity, improved safety & financial performance
- ✓ There are resources to help, including the National Standard, that can show you the way forward

YOU HAVE A KEY ROLE TO PLAY TAKE ACTION AND START THE CONVERSATION

Resources

National Standard

National Standard for Psychological Health and Safety in the Workplace

www.csagroup.org/z1003

Assembling the Pieces - An Implementation Guide to the National Standard for Psychological Health and Safety in the Workplace

www.csagroup.org/z1003

Video Series

13 Factors: Addressing Mental Health in the Workplace

English:<u>www.youtube.com/playlist?list=PL2NuAPXp</u> 80hZmoVaECl6sRiV9lQ25XkId

French:<u>ww.youtube.com/playlist?list=PL2NuAPXp8o</u> <u>hZvcz2iL26CNqJWwyERL2Hx</u>

Federal Speakers' Bureau on Mental Health See GCConnex for more details

Mental Health Literacy Training

Mental Health First Aid www.mentalhealthfirstaid.ca

The Working Mind <u>www.mentalhealthcommission.ca/English/initiati</u> <u>ves/11893/working-mind</u>

Workplace mental health initiatives Bell Let's Talk www.letstalk.bell.ca/en/

Not Myself Today www.notmyselftoday.ca

Workplace Strategies for Mental Health <u>www.workplacestrategiesformentalhealth.com</u>

Federal Public Service Workplace Mental Health Strategy https://www.tbs-sct.gc.ca/psm-fpfm/healthysain/wwb-memt/mhw-mmt/strategy-strategieeng.asp



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Thank you!

Mental Health Commission of Canada Visit us: <u>www.mentalhealthcommission.ca</u> Contact us: <u>info@mentalhealthcommission.ca</u>

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