


Mental Health Commission of Canada

Commission de la santé mentale du Canada




Capital Health

The Working Mind: Workplace Mental Health & Wellness


Claudia Canales, MSW Manager, Workplace Projects, Openings Minds, MHCC
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Workplace Health Promotion Coordinator, CDHA

September 24, 2014, Noon - 1:00 p.m. ET
Hosted by Samuel Breau, Program Manager, Workplace Mental Health, MHCC




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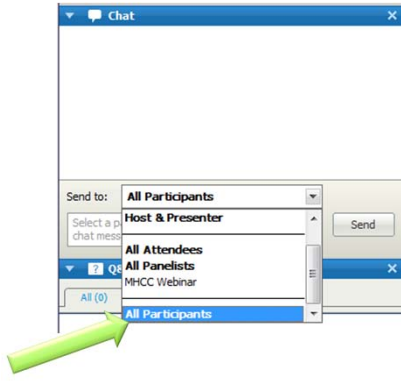


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Important! Send questions/comments to: 'All Participants'



Chat

Send to: All Participants

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Host & Presenter

All Attendees

All Panelists

MHCC Webinar

All (0)

All Participants

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Presenters

			
Samuel Breau	Claudia Canales	Andrew Szeto	Laura Smith
Mental Health Commission of Canada	Mental Health Commission of Canada	Mental Health Commission of Canada	Capital District Health Authority


/ 3



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Agenda

1. National Standard for Psychological Health and Safety in the Workplace
2. What is Opening Minds?
3. The Working Mind: Workplace Mental Health & Wellness
4. Capital District Health Authority: Embracing The Working Mind
5. Question Period

/ 4

Intent of the National Standard

- ✓ Wellness for all
- ✓ Reduce stigma
- ✓ Reduce stressors
- ✓ Happier workplaces, enhanced productivity, better health, safety, and fiscal performance
- ✓ Improved risk management
- ✓ Increased organizational recruitment
- ✓ Retention
- ✓ Corporate and social responsibility

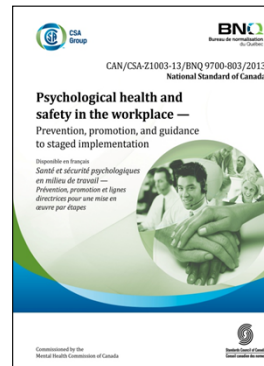


/ 5

Purpose of the Standard

Prevent psychological harm
due to conditions in the workplace

Promote psychological health
in the workplace through support



/ 6



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What is the Standard?

The Standard is a set of guidelines, tools, and resources focused on promoting employees' psychological health and preventing psychological harm due to workplace factors


- Voluntary – set of tools, not rules
- Aligned with existing standards and tools
- Applicable to any organization – regardless of size or sector
- Intended to enable employers and employees to measure progress
- Doesn't create new legal obligations but may have influence on the application of seven branches of law that currently exist
- Informative annexes are included to help users develop approach to implementation and integration

/7




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What is Opening Minds?

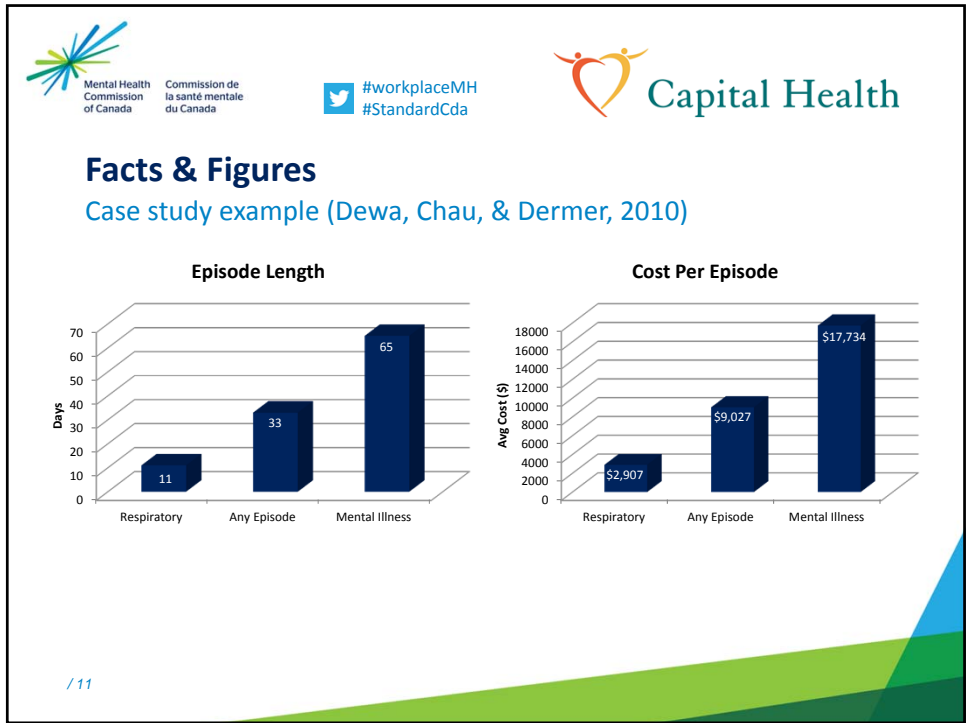
- Mental illness anti-stigma initiative of the MHCC
- Identify successful anti-stigma programs through scientific evaluation
- Promote successful programs across Canada
- Four target groups: healthcare providers, youth, the news media, and the workplace
- 140 partners past and present
 - ~16 active workplace partners

/8

Opening Minds Workplace Partners & Projects

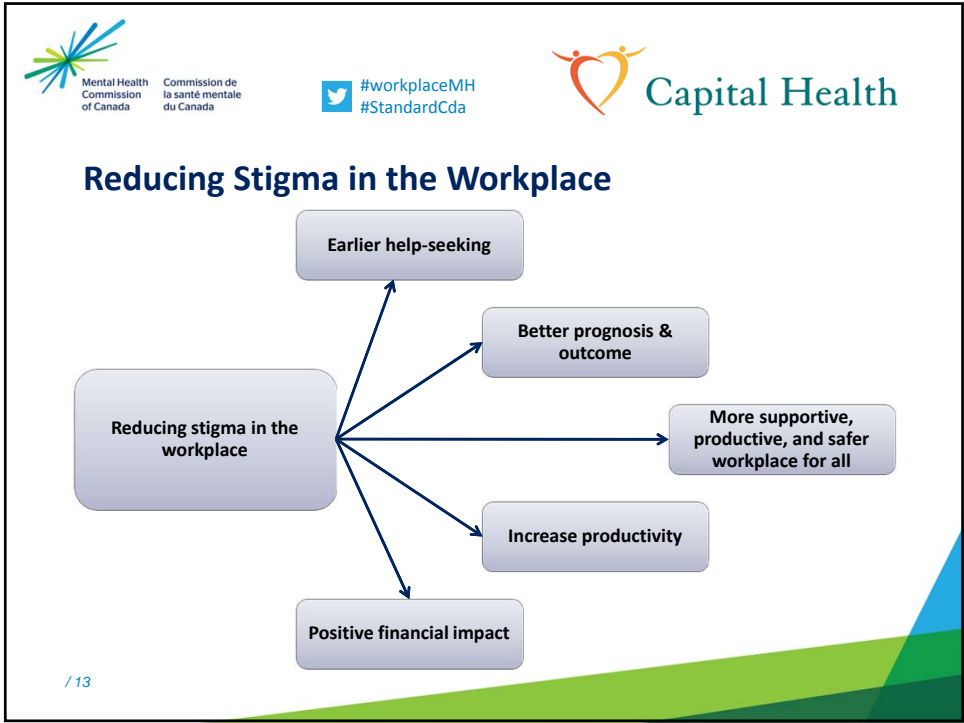


The infographic features logos for the Mental Health Commission of Canada, the Commission de la santé mentale du Canada, and Capital Health. It includes social media handles #workplaceMH and #StandardCda. The main text states: "1/3 of disability claims are related to mental health problems and mental illnesses but account for about 70% of the total disability claim costs... from \$15 to 33 billion (Cdn)". A map of Canada is shown with the text "\$51 Billion Dollars" overlaid on it. At the bottom left, there is a citation: "Sroujian (2003) Lim, Jacobs, Ohinmaa, Schopflocher, & Dewa (2008)". The page number "/ 10" is at the bottom left.



Why is it important to reduce the stigma of mental illness?

/ 12



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The Working Mind: Workplace Mental Health & Wellness

By the Mental Health Commission of Canada
Adapted from the Department of National Defence's
Road to Mental Readiness programs

The Working Mind


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The Working Mind

- Based on the Road to Mental Readiness (R2MR) program
 - Canadian Department of National Defence program
 - Increase mental resiliency of soldiers to deal with stressful and traumatic situations
 - Strong evidence base
- R2MR is being implemented by Canadian Police departments



National Defence / Défense nationale


/ 15

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R2MR: Current Sites



- Vancouver
- Edmonton
- Calgary
- Winnipeg
- Ontario Police College
- York Regional
- Fredericton
- NB RCMP
- Québec City

/ 16

R2MR in Other Organizations

The image displays three variations of the Mental Health Continuum Model (MHC), each showing a spectrum from 'HEALTHY' to 'ILL' with associated symptoms and signs.

- Top Model (Road to Mental Readiness - Canada):**
 - HEALTHY:** Normal life patterns, Stable employment, Stable income, Normal social patterns, Healthy & family life, Healthy friends & family, Confident in self & others, Confident in supervisor.
 - REACTING:** Nervousness, irritability, Anxiety, anger, Frustration, Disruption in work, Disruption in family life, Disruption in social life, Disruption in relationships, Disruption in self-care, Disruption in self-identity, Disruption in self-esteem, Disruption in self-worth, Disruption in self-respect, Disruption in self-confidence, Disruption in self-belief, Disruption in self-image, Disruption in self-perception, Disruption in self-concept, Disruption in self-identity, Disruption in self-esteem, Disruption in self-worth, Disruption in self-respect, Disruption in self-confidence, Disruption in self-belief, Disruption in self-image, Disruption in self-perception, Disruption in self-concept.
 - INJURED:** Anxiety, anger, Frustration, Disruption in work, Disruption in family life, Disruption in social life, Disruption in relationships, Disruption in self-care, Disruption in self-identity, Disruption in self-esteem, Disruption in self-worth, Disruption in self-respect, Disruption in self-confidence, Disruption in self-belief, Disruption in self-image, Disruption in self-perception, Disruption in self-concept.
 - ILL:** Depression, Anxiety, Frustration, Disruption in work, Disruption in family life, Disruption in social life, Disruption in relationships, Disruption in self-care, Disruption in self-identity, Disruption in self-esteem, Disruption in self-worth, Disruption in self-respect, Disruption in self-confidence, Disruption in self-belief, Disruption in self-image, Disruption in self-perception, Disruption in self-concept.
- Middle Model (RCMP-GRC):**
 - HEALTHY:** Normal life patterns, Stable employment, Stable income, Normal social patterns, Healthy & family life, Healthy friends & family, Confident in self & others, Confident in supervisor.
 - REACTING:** Nervousness, irritability, Anxiety, anger, Frustration, Disruption in work, Disruption in family life, Disruption in social life, Disruption in relationships, Disruption in self-care, Disruption in self-identity, Disruption in self-esteem, Disruption in self-worth, Disruption in self-respect, Disruption in self-confidence, Disruption in self-belief, Disruption in self-image, Disruption in self-perception, Disruption in self-concept.
 - INJURED:** Anxiety, anger, Frustration, Disruption in work, Disruption in family life, Disruption in social life, Disruption in relationships, Disruption in self-care, Disruption in self-identity, Disruption in self-esteem, Disruption in self-worth, Disruption in self-respect, Disruption in self-confidence, Disruption in self-belief, Disruption in self-image, Disruption in self-perception, Disruption in self-concept.
 - ILL:** Depression, Anxiety, Frustration, Disruption in work, Disruption in family life, Disruption in social life, Disruption in relationships, Disruption in self-care, Disruption in self-identity, Disruption in self-esteem, Disruption in self-worth, Disruption in self-respect, Disruption in self-confidence, Disruption in self-belief, Disruption in self-image, Disruption in self-perception, Disruption in self-concept.
- Bottom Model (Employee Assistance Services - Royal Canadian Mounted Police):**
 - HEALTHY:** Normal life patterns, Stable employment, Stable income, Normal social patterns, Healthy & family life, Healthy friends & family, Confident in self & others, Confident in supervisor.
 - REACTING:** Nervousness, irritability, Anxiety, anger, Frustration, Disruption in work, Disruption in family life, Disruption in social life, Disruption in relationships, Disruption in self-care, Disruption in self-identity, Disruption in self-esteem, Disruption in self-worth, Disruption in self-respect, Disruption in self-confidence, Disruption in self-belief, Disruption in self-image, Disruption in self-perception, Disruption in self-concept.
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TWM: Objectives

- Reduce the stigma of mental health problems and illnesses
- Promote mental health in the workplace
- Reconceptualize how employees think and talk about mental health and mental illness
- Help employees identify poor mental health in themselves and others

/ 18



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TWM: Objectives


- Teach coping skills to manage stress and poor mental health
- Review employees', managers' and employers' mental health rights and responsibilities
- Create a more supportive environment for all

/ 19




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TWM: Main Components

Education-based program for a general workplace audience

- Anti-stigma module and evidence-based content
 - Video-based content, mythbusting, facts, etc.
- “Big 4” skills (SMART goal setting, mental rehearsal, positive self-talk, diaphragmatic breathing)
- Mental Health Continuum Model

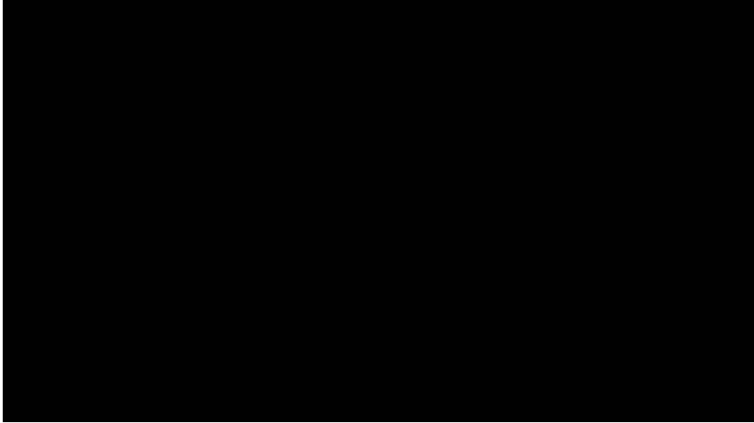
/ 20

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Video—Stigma and Discrimination in the Workplace



/ 21

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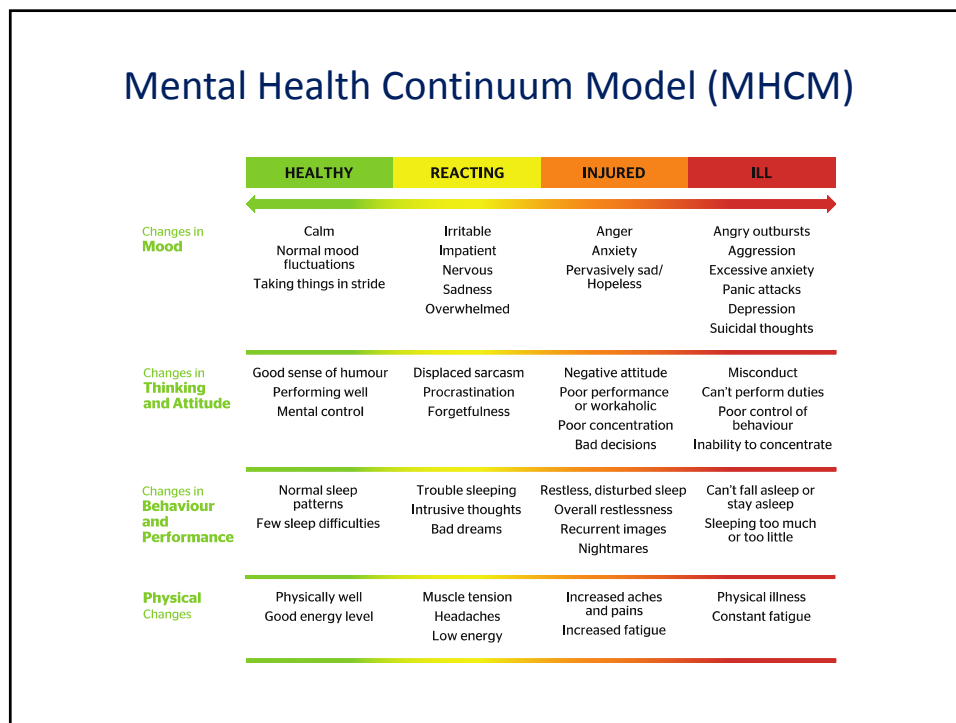
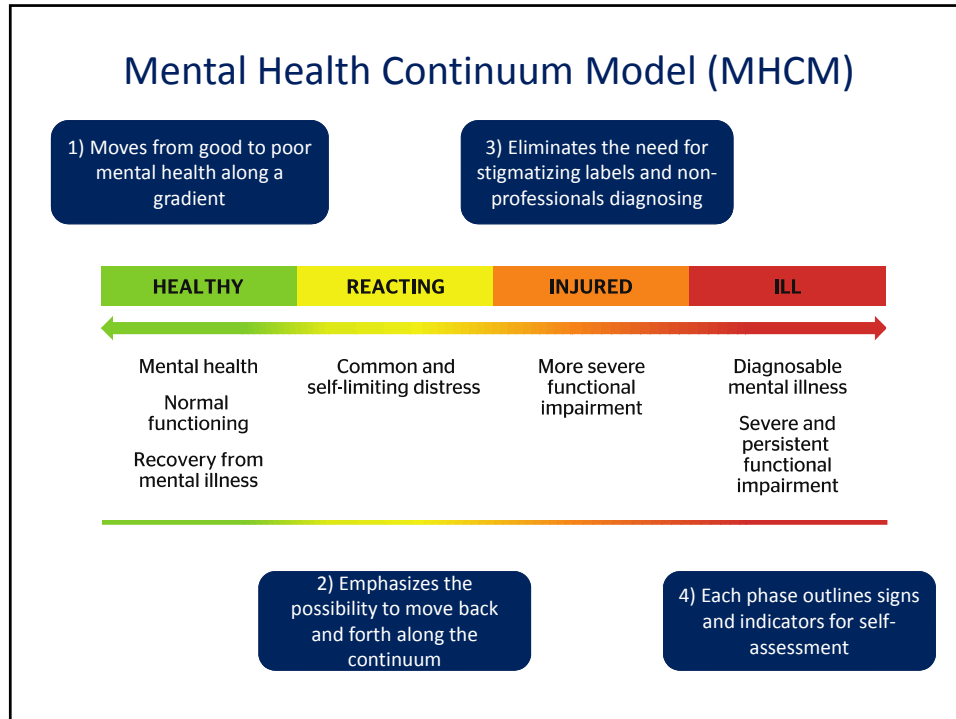
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Perceptions of Mental Health and Mental Illness

HEALTHY	ILL
Mental health	Diagnosable mental illness
Normal functioning	Severe and persistent functional impairment
Recovery from mental illness	

/ 22



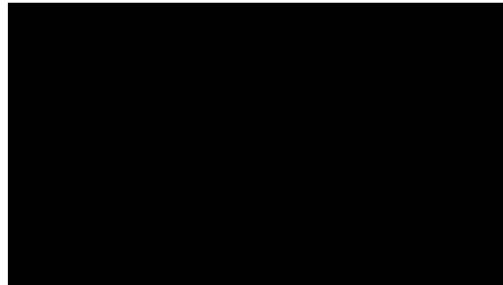


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Videos

Six videos throughout the program of people with lived experience discussing their journeys in mental health



/25

TWM Wallet Cards




MENTAL HEALTH CONTINUUM MODEL

← HEALTHY REACTING INJURED ILL →

<ul style="list-style-type: none"> • Normal fluctuations in mood • Normal sleep patterns • Physically well, full of energy • Consistent performance • Socially active 	<ul style="list-style-type: none"> • Nervousness, irritability, sadness • Trouble sleeping • Tired/low energy, muscle tension, headaches • Irritability • Decreased social activity or withdrawal 	<ul style="list-style-type: none"> • Anxiety, anger, pervasive sadness, hopelessness • Restless or disturbed sleep • Fatigue, aches and pains • Decreased performance, absenteeism • Social avoidance or withdrawal 	<ul style="list-style-type: none"> • Extreme anger, acute, prolonged depression • Unconscious in the street • Episodes of physical illness • Unable to perform roles at work • Severe, ongoing withdrawal
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ACTIONS TO TAKE AT EACH PHASE OF THE CONTINUUM

<ul style="list-style-type: none"> • Focus on task at hand • Break problems into manageable chunks • Identify and nurture support systems • Maintain healthy diet 	<ul style="list-style-type: none"> • Recognize limits • Get adequate rest, food and exercise • Drop in on healthy coping strategies • Identify and recognize stressors 	<ul style="list-style-type: none"> • Identify and understand own signs of distress • Talk with someone • Seek help • Seek social support instead of withdrawing 	<ul style="list-style-type: none"> • Seek professional help • Make health care provider involvement • Reach out to family and friends
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OPENING MINDS

The Mental Health Continuum Model (MHCM) was developed by the Department of National Defence as part of the Road to Mental Readiness (RCMR) program. Opening Minds, the anti-stigma initiative of the Mental Health Commission of Canada, has adapted the MHCM and RCMR into The Working Mind, a mental health and anti-stigma program for the general workforce.

The MHCM and the coping strategies listed on this card will help you identify signs of good to poor mental health and offer you ways to get back to the healthy phase.

OPENING MINDS CONTACT INFO:

OUCHER OFFICE Suite 307 5000 Park Road SE Calgary, Alberta T2C 0L3 Tel: 403-292-5836 Fax: 403-292-4044	OTHER OFFICE Suite 307 5000 Park Road SE Calgary, Alberta T2C 0L3 Tel: 403-292-5836 Fax: 403-292-4044
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STRATEGIES


- SMART Goal-Setting: set goals that are Specific, Measurable, Attainable, Relevant and Timebound
- Mental Rehearsal/Visualization: mentally prepare for "what ifs"
- Self-talk: Focus, Relax, Confident
- Calming/Deep Breathing

POTENTIAL SOURCES OF SUPPORT AND HELP


- Family/friends
- Colleagues, supervisors, human resources
- Employee and Family Assistance Programs
- Family doctor and other health care providers
- Community resources
- Inpatient or private services, such as psychologists

OTHER TECHNIQUES


- Join a support group
- Plan time for rest and fun
- Ask for help when necessary
- Set limits and boundaries
- Balance demands and priorities
- Identify unhealthy coping
- Apply problem-solving skills
- Keep lines of communication open
- Make self-care a priority
- Accept that you cannot do it all
- Get help sooner, not later
- Accept offers of help from friends
- Learn and try new ways to cope
- Be honest with yourself about how you're doing
- Focus on regaining health




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Two Versions of TWM

- Employee Workshop (~ 3 hr)
- Manager Workshop (~ 6 hr)
 - How managers can address employee mental health at each stage along the MHCM
 - General information on accommodations and employees', managers' and employers' mental health rights and responsibilities
 - » HR staff
- Optimally, about 16-24 per session


/ 27




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Train the Trainer

5 day course:

- Participants learn to facilitate both the Employee and Manager versions of TWM workshops
- Key concepts: mental health, workplace specific information, information on accommodations, and adult education principles
- Opportunities throughout the week to practice presentation skills
- Participants are evaluated at the end of the week

/ 28



Organizational Rollout & Evaluations

- Trained 50 trainers (five org.) to present TWM
- Approximately 1000 employees and managers since Jan 2014

Program Efficacy

- Attitudes towards people with mental illness
- Resiliency and coping skills
- Mental health and wellbeing
- Presenteeism
- Program feedback

Pre-workshop questionnaire

→

→

Post-workshop questionnaire

→

3-month follow-up questionnaire

/ 29



Preliminary results: 550 managers and employees

Pre-workshop questionnaire

→



The Working Mind


→

Post-workshop questionnaire


Quantitative Results

- Significant ↓ in stigmatizing attitudes in managers, significant ↓ in employees; medium to large effect size (d)
- Significant ↑ in resiliency skills; medium effect size (d)
- Significant ↑ in positive managerial attitudes


/ 30



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Preliminary Evaluation Results


Qualitative Results

<p>Reduced stigma; more awareness and understanding:</p> <p><i>“I liked that the workshop dispelled myths & common misconceptions”</i></p> <p><i>“An eye-opening experience”</i></p>	<p>Practical skills; more equipped to address MH:</p> <p><i>“How to identify continuum in personal life”</i></p> <p><i>“Relevant to real life work and personal situations”</i></p>	<p>Workshops well received:</p> <ul style="list-style-type: none"> Excellent videos of people with lived experience Interactive Well presented, interesting, engaging, enjoyable
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/ 31



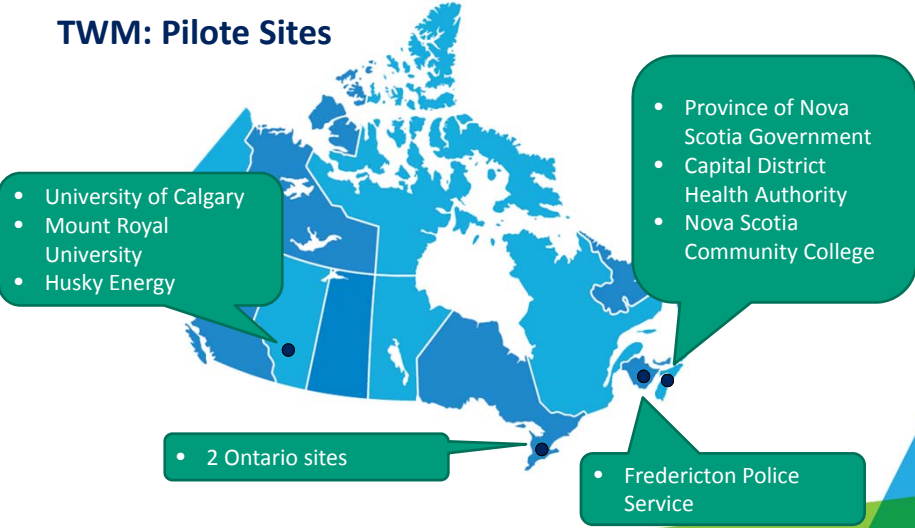
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TWM: Pilote Sites



- University of Calgary
- Mount Royal University
- Husky Energy

- Province of Nova Scotia Government
- Capital District Health Authority
- Nova Scotia Community College

- 2 Ontario sites
- Fredericton Police Service

/ 32



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About Us

- The largest provider of health services in Nova Scotia
- Over 12,000 employees
- Provide medical and surgical care, mental health care, community health programs, addiction prevention and treatment, and environmental health services
- Nine hospitals and dozens of community health centres
- We serve 400,000 residents in the Halifax region and specialist services to Atlantic Canada

/ 34

The slide contains logos for the Mental Health Commission of Canada, social media handles #workplaceMH and #StandardCda, and the Capital Health logo. Below the logos is the 'About Us' section with a bulleted list of facts. The slide has a decorative green and blue geometric pattern at the bottom.



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Getting Started

- Stigma related to mental illness identified
- Learned of Opening Minds
- September 2013 trained 10 facilitators for *The Working Mind*

/ 35



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Implementation

- Offered sessions to Leaders – winter/spring 2014
- Held 12 sessions, 114 people trained
- Sessions held in various locations

/ 36



What we heard

“One of the most useful and informative sessions that I've attended during my many years at CDHA. It provided me with a few ‘aha’ moments and many useful tools to help me grow and have a better understanding of mental health issues.”

/ 37



What we heard


“Overall enjoyed the day and found the information valuable & will be a good resource moving forward.”

“I will be better equipped to have the conversation and to deal with the situation correctly & better support the individual appropriately.”


“Excellent day, has given me confidence to act upon mental health issues if brought to me. Also gave information on who to contact. Thanks!”

“[I have a] better understanding of challenges & coping skills & resources available to us.”


/ 38



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Our Facilitators

Dedicated and passionate

“As a facilitator in TWM, it is very rewarding to see managers’ reactions of insight when pondering stigma, mental health, and addictions in the workplace. The reactions from the majority have been wonderful and the minority of other comments have been constructive – example program needs to be longer. As we move into stage two of training – employees, I believe we will continue to see positive change among those who attend.”

/ 39



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Next Steps



Employee Sessions



September-December 2014

/ 40



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Join the Conversation

Communicate. Contribute. Collaborate.



COLLABORATIVE SPACES is an online repository and conversation place for mental health in Canada. Share mental health information with others and learn from others as they post. The more you contribute, the more robust a resource it will be!

<http://www.mentalhealthcommission.ca/English/spaces>

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/ 41



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