The University of Birmingham

**Mental Wellbeing at Work Guidance**

|  |
| --- |
| **Contents** |
| **Section** |  | **Pages** |
| 1 | [Introduction](#Introduction) | 2 |
| 2 | [Purpose and scope](#Purposeandscope) | 2 |
| 3 | [Best practice](#bestpractice) | 3 |
| 3.1 | [Staff should endeavour to](#Employeesshouldendeavour) | 3 |
| 3.2 | [Managers should endeavour to](#Managersshouldendeavour) | 3 |
| 3.3 | [Human Resources should endeavour to](#HumanResourcesshouldendeavour) | 3 |
| 4 | [Advice for staff who have disclosed a mental health disability](#Adviceforemployees) | 3 |
| 5 | [Guidance for managers](#guidanceformanagers) | 4 |
| 5.1 | [Supporting the wellbeing of staff](#supportingthewellbeingofemployees)  | 4 |
| 5.2 | [Supporting staff with mental health problems](#supportingemployeeswithmhproblems) | 6 |
| 5.3 | [Workplace triggers for mental ill health](#workplacetriggers) | 7 |
| 5.4 | [Recognising the signs that a staff member may not be coping](#recoignisingthesigns) | 7 |
| 5.5 | [Wellness Recovery Action Plan (WRAP)/Advanced Statement](#wrapplan) | 8 |
| 5.6 | [Treatments – things to consider at work](#treatments) | 8 |
| 5.7 | [Dealing with a change of line manager](#changeoflinemanager) | 9 |
| 5.8 | [Supporting the rest of the team](#restofteam) | 9 |
| 6 | [Data protection](#dpa) | 9 |
|  |  |  |
| Appendix |  |  |
| 1 | [Sources of support and information](#appendix1)  | 10-14 |
| 2 | [Action to be taken by managers concerned about staff](#appendix2)  | 15-17 |
| 3 | [Different forms of mental health problem](#appendix3)  | 18 |
| 4 | [WRAP/ Advanced statement template](#appendix4) | 19-20 |
| 5 | [Talking to staff about their mental health](#appendix5)  | 21-22 |

1. **Introduction**

The mental wellbeing of staff at the University of Birmingham (the “University”) is of great importance. The University is committed to creating and promoting a positive working environment in which staff want to work and where they can excel. The University wants its staff to feel confident they can be open about mental health problems and that those who disclose such problems will be supported.

One in six people will experience a mental health problem in any given year and one in four throughout their lives. Yet, unfortunately, there is still a stigma attached to mental health, with many people feeling scared and confused about confronting the problem. Mental health is the mental and emotional state in which people feel able to cope with the normal stresses of everyday life. Problems may emerge suddenly as a result of a specific event, or gradually over a period of time when the situation may worsen or improve, and include stress, anxiety, depression, bipolar disorder and schizophrenia.

Wellbeing Services aims to raise the profile of and embed mental wellbeing into the culture, structures and processes of daily life of the University. This approach highlights a need for a co-ordinated focus on staff mental health and all members of the University, particularly line managers, should play a role in helping create a mentally healthy workplace.

1. **Purpose and scope**

The purpose of this guidance is to raise awareness of mental health problems and provide guidance for both staff and managers about creating a mentally healthy workplace.

Throughout this guidance, “staff” and “staff member” shall apply to all employees and workers of the University including, but not limited to, agency workers, honorary staff and associate members. “Employee” and “employees” shall only apply to those staff who are considered employees by Human Resources.

The guidance provides advice for staff on disclosing a mental health problem and sets out the support and services available to them. Whilst line managers are key people in spotting the early warning signs when a staff member is not coping at work, this guidance is intended for all staff to support them in identifying the signs when a colleague is not coping or is suffering from a mental health problem. .

This guidance has been written in line with information on supporting mental health at work produced by various organisations including Mind, SHiFT and ACAS.

Where appropriate, this guidance may be read in conjunction with the University’s [Attendance Management](https://intranet.birmingham.ac.uk/hr/leave/health/management.aspx) advice.

This guidance applies to all staff at the University. For guidance on the mental health of students, please see the [Student Services](https://intranet.birmingham.ac.uk/as/studentservices/disability/mentalhealth/index.aspx).

1. **Best practice**
	1. **Staff** should endeavour to:
* Raise issues of concern for themselves and/or other staff and to seek help from either their line manager or Human Resources;
* Disclose if they are experiencing problems at work in relation to mental health;
* Work with their line manager and/or Human Resources to find solutions to work-related problems; and
* Maintain an acceptable standard of behaviour at all times.
	1. **Managers** should endeavour to:
* Create a mentally healthy workplace;
* Look after their own mental wellbeing;
* Support the wellbeing of staff (see [Section 5.1](#supportingthewellbeingofemployees));
* Be aware of workplace triggers for mental health problems (see [Section 5.3](#workplacetriggers));
* Spot the signs when someone appears not to be coping (see [Section 5.5](#recoignisingthesigns)); Assist and support staff who have disclosed mental health problems; and
* Initiate or update a Reasonable Adjustment Consideration Form when a staff member has disclosed a disability to review and/or enhance the support provided to them.
	1. **Human Resources** should endeavour to:
* Provide advice and support to managers and staff in relation to mental health problems, referring to experts internally and externally where necessary;
* Monitor and report on sickness absence levels which relate to mental health problems; and
* Complete the Reasonable Adjustments Considerations form when a disability is disclosed in order to consider support for the staff member.
1. **Advice for staff who have disclosed a mental health disability**

The University is committed to the promotion of disability equality and will ensure that all members of its community are able to reach their full potential in a positive and supportive environment. The University therefore encourages staff with mental health problems to disclose their situation to their line manager to ensure the line manager is aware of their needs and can support them. Staff should consider how and when they would like to disclose such information, as well as how much and the kind of information they would like to share. If a staff member feels unable to disclose such information to their line manager they should contact Human Resources. Staff do not have to go into personal detail about their mental health and can just focus on what arrangements they consider may improve the effects of their mental health problems or their ability to do their job.

The potential benefits of disclosure are:

* It could make it easier for staff member to attend work and carry out their work, particularly at times when symptoms are greater;
* It enables staff to receive the support of their line manager and other colleagues;
* Keeping it secret may exacerbate the mental health problem(s);
* Being open can encourage others in the same situation;
* It gives a stronger basis for requesting changes to work or the work environment; and
* It gives the opportunity to receive specialist advice.

Following disclosure managers should discuss with the staff member whether it is appropriate to inform the next level of line management in order to ensure continuity of support during their absence or annual leave.

For further information and examples of reasonable adjustments for mental health conditions, there is the [Department of Health’s advice for employers](https://www.nhshealthatwork.co.uk/images/library/files/Government%20policy/Mental_Health_Adjustments_Guidance_May_2012.pdf) on workplace adjustments for mental health conditions.

Please also see the sources of support and information set out in [Appendix 1](#appendix1)**.**

1. **Guidance for Managers**
	1. **Supporting the wellbeing of staff**

By focusing on wellbeing rather than mental ill-health, managers are more likely to overcome any stigma attached to mental health. Managers can help support staff wellbeing by promoting the following practices:

* Ensuring they are approachable and have time for staff. Managers who regularly ask staff how they are and take an interest in their team’s lives outside work are more likely to build trust and therefore effectively prevent and manage stress at work. However, managers should be aware that some staff may be less comfortable sharing details of their personal lives than others.
* Helping new staff understand the University faster and support them in their role. Use a buddy or mentor system which enables colleagues to support other colleagues outside the line-management structure. Develop a local induction plan and enable attendance at the University’s Central Induction.
* Ensuring that staff have the right level of skill for the job and are provided with the resources and training required.
* Engaging staff in their work. Staff who know the direction of the University and how their team fits into that and feel able to feed back their views will be better motivated and more able to help meet team objectives.
* Facilitating effective communication and information transfer. All staff should have regular one-to-one meetings with their line manager to enable a regular discussion about work and personal development issues. Regular meetings also provide an opportunity for managers to determine whether staff are coping at work and for staff to disclose mental health problems.
* Monthly team meetings provide the opportunity for upwards and downwards communication, and team building should also be held. Performance and Development Reviews (PDRs) should be held with all employees and include a discussion of learning and development opportunities.
* Developing a culture where open and honest communication is encouraged and support and mutual respect are standard. Encouraging an ethos where staff know that it is okay to talk about mental health and that it is safe to disclose their own mental health problems helps reduce the stigma that surrounds it. It will also allow staff to discuss with managers if they consider they may need any adaptations to working practice that will support them in doing their job.
* Promoting positive working relationships. Harassment and negativity are detrimental to a successful working environment. Staff should not be made to feel isolated due to the nature of the work they do or as a result of more personal factors such as cultural or religious beliefs, race, sexuality, disability, age, gender, gender reassignment, pregnancy or maternity, or marital status. It is important that managers promote a positive working environment; challenging inappropriate behaviour quickly and sensitively. A work culture should be developed where everyone is treated with respect and dignity and where bullying and harassment are not tolerated.
* Trying to ensure both managers and staff enjoy a good work/life balance. In the short term, long hours might seem manageable and boost productivity. However, a lack of sleep and relaxation time can quickly take its toll on staff and lead to irritability, lower productivity and poor performance. Flexible working hours, where this is possible, could help staff to balance the demands of home life with work. Managers should try to ensure that work is planned so that staff are not required to work additional hours at short notice.
* Encouraging exercise and social events, including those available at the University. Physical activities boost staff health, mental wellbeing and teamwork. Staff can take part in activities at the [University’s Sports Centre](https://sportandfitness.bham.ac.uk/) during their lunch break, before or after work.
* Checking the work environment and, where possible, eliminating potential stressors. Noise, temperature and light levels can have an impact on wellbeing. Space dividers, quiet spaces or music may improve the environment, or could be part of the problem, leading people to feel isolated and/or disconnected.
* Being aware of risks outside the workplace. Be aware of what is happening in a staff member’s personal life as stress outside of work (for example, illness, bereavement or financial worries) might be contributing to the staff member struggling to cope in the workplace.
* Regularly monitoring workloads to ensure they are manageable.
	1. **Supporting staff with mental health problems**

It is estimated that 1 in 6 people will experience a mental health problem at any given time, meaning that managers are likely to have a staff member affected in some way at some point. However, even during periods of mental distress, staff can continue to make a valuable contribution with the right support.

Mental health problems range across a spectrum from mild to severe and [Appendix 3](#appendix3) outlines some of the different forms of these problems together with the possible impact on the workplace. The extent to which mental health problems cause particular distress can depend on the following:

* The level and type of mental health problem;
* Previous history of mental ill health; and
* The extent of the support and social network (friends, partner, family, work colleagues etc).

Mental health problems may be a constant presence in a person’s life. However, they are sometimes spasmodic episodes, whereby the person functions very well, but intermittently has recurring periods of illness. A mental health problem is sometimes a one-off event from which the person, with appropriate support, fully recovers.

Some people with mental health problems have a clear grasp of their personal challenges and needs. Others will be aware but may be afraid to tell anyone or ask for help. A proportion of people, however, will have very little insight into their problems, which can make their management at work more complex.

While mental ill health is a sensitive and personal issue, like any health problem, most people prefer honest and open enquiries over reluctance to address the issue. Shying away from the subject can perpetuate fear of stigma and increase feelings of anxiety. Often staff will not feel confident in speaking up, so a manager making the first move to open up a dialogue is very important. It is often the everyday things that make a difference, like asking ‘How are you?’ A staff member may want to talk about it, they may not; however, just letting them know that they do not have to avoid the issue is an important first step.

Regular catch-ups/one-to-one meetings are an opportunity to start the conversation, which should always be in a private, confidential setting where staff feel equal and at ease. Questions should be simple, open and non-judgemental to give staff ample opportunity to explain in their own words.

The level of support and action required by managers will very much depend on the circumstances and whether there is an emerging or mild, serious or very serious level of concern. [Appendix 2](#appendix3) outlines the action to be taken by managers concerned about a staff member.

A manager who has spotted the signs of a person not coping, or when another staff member has raised a concern about a staff member, should arrange an informal meeting to discuss the concerns. Please refer to Level 1 of [Appendix 2](#appendix3) for guidance on carrying out the meeting.

* 1. **Workplace triggers for mental ill health**

Everyone has mental health and, like physical health, it fluctuates along a spectrum from good to poor. Work can have a huge impact on mental health by promoting wellbeing or triggering problems. All staff should be aware of the potential workplace triggers for stress, such as:

* Long hours and no breaks;
* Unrealistic expectations or deadlines;
* High-pressure environments, such as work with a big impact which involves tight deadlines;
* Poor working environment, such as work areas that have not been designed or adapted for the work being undertaken, or that may have poorly controlled workplace hazards;
* Unmanageable workloads or lack of control over work;
* Negative relationships or poor communication;
* Workplace culture or lack of management support;
* Job insecurity or work areas undergoing significant changes to structure or function; and
* Lone working.
	1. **Recognising the signs that someone may not be coping**

Managers and colleagues may observe a colleague who appears not to be coping at work. Spotting the signs in the early stages, may enable an intervention before the staff member’s mental wellbeing deteriorates. A key part of spotting the signs is managers and colleagues observing what they see as they walk around the workplace, or in one-to-ones, tea breaks, lunches, or team meetings.

Some of the key signs to look out for are changes in the person’s usual behaviour, e.g. a change in performance, sickness absence, or punctuality. Managers and colleagues may notice an increased use of alcohol, drugs or smoking. Other signs might be tearfulness, headaches, loss of humour and changes in emotional mood. A manager who knows their staff will be better placed to recognise any changes in usual behaviour.

* 1. **Wellness Recovery Action Plan (WRAP**)/**Advanced Statement**

A WRAP/Advanced Statement contains practical, mutually agreed steps that will be taken to support a staff member who experiences a mental health problem, whether or not they have disclosed this as a disability. They can help managers balance supporting staff member’s mental health needs and ensuring they undertake key functions of their jobs. Where a staff member has identified that they consider themselves to have a disability a Reasonable Adjustments Consideration form should be completed by the manager. If a WRAP/Advanced Statement is already in place, this should be referred to within this form.

A WRAP/Advanced Statement is usually drafted by the staff member, sometimes with the support of a health professional, and discussed and agreed with their manager. Working with the staff member to develop this will help the manager and the staff member to identify what the early signs of mental distress are, who may need to be contacted and how the staff member like to be supported.

A template WRAP/Advanced Statement is contained in [Appendix 4](#appendix4) and should cover:

* The signs and symptoms of their mental health problem(s);
* Any triggers for distress;
* What support may help, including any potential adjustments that could be considered; and
* The nominated person to contact for the staff member in the event of a mental health crisis.

For those staff who have already disclosed a mental health problem, it is better to prepare a WRAP/Advanced Statement when they are well. This enables managers to refer back to the WRAP/Advanced Statement when they have spotted early warning signs/triggers and discussions should be easier if the WRAP/Advanced Statement has already been agreed. For staff who have not previously disclosed a disability, a WRAP/Advanced Statement should be prepared as soon as possible.

The WRAP/Advanced Statement should be a live document and reviewed regularly between managers and staff.

* 1. **Treatments – things to consider at work**

There are many different treatments for people suffering with mental health problems. The type of treatment may affect people and impact on work differently. For some their behaviours may alter, and/or they may need time off to attend medical appointments or treatment sessions.

The National Institute for Clinical Evidence (NICE) usually recommends drug-based or talking therapies. For those with mild to moderate problems, talking therapies are usually the initial treatment. For people with more severe forms of mental health problem drug therapies may be unavoidable and essential to ensure a good quality of life. If talking therapies are not sufficiently effective, drug therapies are then usually recommended, or a combination of drug and talking therapies.

GPs are usually the initial point of contact and provide access to more specialist treatments. People are often guided through a “stepped care” model of provision.

* 1. **Dealing with a change of line manager**

Staff with mental health problems who move into a new role with a new line manager may need to consider how information on their situation is passed on to the new line manager in order for support to continue. Similarly, if the line manager changes for other reasons, the best method of informing the new line manager is a meeting between the staff member, the existing line manager and the new line manager, where possible. It is the staff member’s decision on whether they are happy for disclosure and how this occurs.

* 1. **Supporting the rest of the team**

Managers should be aware of the impact one staff member’s mental health problem could potentially have on the rest of the team. The team may react negatively to the staff member’s behaviour while unwell, or to any reasonable adjustments that are made, or even to an increase in their own workload if the staff member is not well enough to work. It is advisable to manage this by:

* Being honest and open with the team, so long as it does not breach confidentiality or data protection (see section 6 below);
* Creating an environment where staff can air their concerns; and
* Treating all staff fairly.
1. **Data Protection Act**

Medical or health-related records are classed as sensitive personal information and therefore must be processed with the utmost confidentiality. The data must be held securely with restricted access. Caution must therefore be exercised in the writing, storing and distribution of such data. Please be aware that a staff member has the right to see all their personal information (including any written comments) held by the University. Sensitive personal information should be encrypted when being stored and sent electronically.

**Appendix 1**

**Sources of support and information**

|  |
| --- |
| **Urgent sources of support and information** |
| **If a manager considers a staff member has serious intention to harm themselves or others they should contact the Emergency Services by dialling 999.**Further details of the emergency and urgent care services can be found on the [NHS 111](https://www.england.nhs.uk/urgent-emergency-care/nhs-111/) website**If deliberate self-harm or suicidal/homicidal feelings have recently been expressed, advise the staff member to contact their GP, NHS 111 or Birmingham Healthy Minds.**[NHS 111](https://www.england.nhs.uk/urgent-emergency-care/nhs-111/) can also put people in touch with a GP and also provide further information or advice. Telephone: 11124 hour information and adviceThe NHS website has a section on [mental health](https://www.nhs.uk/mental-health/) providing advice about what to do if an individual or someone close to them has a mental health problem. |

|  |
| --- |
| **Internal sources of support and information** |
| **Workplace Wellbeing** The University provides a variety of services to support staff in their working lives. [Employee Assistance Programme (EAP)](https://intranet.birmingham.ac.uk/hr/wellbeing/workhealth/employee-assistance-programme-eap.aspx)Provided through Health Assured, as part of Wellbeing Services, the EAP offers staff free and confidential information, advice and support 24 hours a day, 365 days per year through their dedicated confidential helpline. **0800 028 0199****Mental Health First Aiders (MHFA)**We have a group of staff who have volunteered to undertake the role of a MHFA, having completed the required 2-day training course. They are available to assess and signpost staff who are experiencing distress or difficulty whilst at work.[Occupational Health](https://intranet.birmingham.ac.uk/hr/wellbeing/workhealth/index.aspx) practitioners who provide advice to the University on health issues that may have an effect on attendance at work or on a staff member whilst at work. Occupational Health can also advise on supporting staff returning from sickness absence due to mental illness, understanding the impact that mental health illness has in the workplace or reasonable adjustments in relation to health-related disabilities. Access to Occupational Health is by referral from a manager and can be made through a HR Adviser. The[Staff Enabling Network](https://intranet.birmingham.ac.uk/collaboration/equality/staff/staff-networks/enabling-staff-network/enabling-staff-network.aspx)meets termly to work with the University to improve services for disabled staff.  |

|  |
| --- |
| **External sources of support and information** |
| **Workplace Health**[NHS Live Well](https://www.nhs.uk/live-well/) provides free advice on managing long-term conditions, and general advice about staying healthy at work.[[Access to Work](https://www.gov.uk/government/publications/access-to-work-guide-for-employers)](https://www.gov.uk/government/publications/access-to-work-guide-for-employers)is a government run programme delivered by Jobcentre Plus to help overcome barriers that disabled people come across in getting into or retaining employment. A mental health support service is also available for staff, delivered through Remploy (see below for details).**Mind** Out of hours confidential listening service telephone: 0808 808 0330 Wednesday to Sunday, 8pm to 12amNational information telephone: 08457 660 163Monday to Friday, 9.15am to 4.15pmMind offers information on topics ranging from types of distress, where to get help, drug treatments, alternative therapies, who’s who in mental health and where to find advocacy and other services.Mind leaflet - [Top tips for staying well at work](https://www.mind.org.uk/workplace/mental-health-at-work/taking-care-of-yourself/tips-for-employees/)[Remploy Workplace Mental Health Support Service](https://www.remploy.co.uk/individuals/finding-work-and-support-work/your-lifestyle-and-wellbeing/mental-health-support)is a free and confidential support service available to individuals with a mental health condition, who are absent from work or finding work difficult. It is aimed at helping people to remain in, or return to, their role.This service has been designed to support those experiencing depression, anxiety, stress or other mental health problems affecting their work.The advisors are trained and experienced in supporting mental health at work and provide:* Work focused mental health support for six months, tailored to the needs of the individual;
* Assessment of the individual’s needs to identify suitable coping strategies;
* A personalised support plan, detailing the steps needed to remain in, or return to, work;
* Suggestions for adjustments in the workplace, or in working practices, that could help individuals to fulfil their role; and
* Advice and guidance for employers on how they can support staff who have a mental health condition.

[Samaritans](https://www.samaritans.org/) Tel: 08457 90 90 90 Email: jo@samaritans.orgThe Samaritans provide a 24-hour source of support by telephone, email, letter or face-to-face for people who are experiencing feelings of distress or despair, including those who feel suicidal. **SANE** Tel: 0845 767 8000[SANE](http://www.sane.org.uk/) runs a national out-of-hours helpline offering specialist emotional support and information to anyone affected by mental illness, including family, friends and carers. Open every day of the year from 6pm to 11pm. |

|  |
| --- |
| **Additional sources of advice and information for managers** |
| [Time to Change](https://www.time-to-change.org.uk/)is England's biggest programme to challenge mental health stigma and discrimination.**MINDFUL EMPLOYER®** Is developed, led and supported by employers, the [MINDFUL EMPLOYER®](https://www.mindfulemployer.dpt.nhs.uk/) initiative is aimed at increasing awareness of mental health at work and providing support for businesses in recruiting and retaining staff.**Health & Safety Executive (HSE)**The HSE have a detailed and informative section dedicated to [managing stress](https://www.hse.gov.uk/stress/) within the workplace for managers, this includes a template stress risk assessment and guidance. |

**Appendix 2**

**Suggested action to be taken by managers concerned about staff**

Managers who have spotted the signs of a staff member who appears not to be coping should consider taking the following actions depending upon their level of concern. It is not necessary to commence at level one if the concern is very serious.

|  |
| --- |
| **Level 1: Emerging or mild concern**  |
| If the staff member has already disclosed a mental health problem:* Raise any concerns with the staff member informally using language such as “I have noticed…” and “I wonder if we could meet to discuss…” If the situation is not causing urgent concern, it may be better to wait to raise the matter in a regular catch up/one-to-one meeting. Please see [Appendix 5](#appendix5) for further guidance;
* Arrange to meet with the staff member to discuss concern, providing examples of changes in their behaviour and ask how they are;
* Refer to the staff member’s WRAP/Advanced Statement if already developed;
* Check whether the staff member has visited their GP and support/advice has been received;
* Where the staff member considers their condition constitutes a disability, discuss any existing reasonable adjustments and whether further adjustments may be required;
* Discuss whether the staff member would benefit from more regular one-to-one meetings; and/or
* If a WRAP/Advanced Statement has not already been developed, consider developing one if appropriate. See [Section 5.6](#wrapplan)and [Appendix 4](#appendix4).

If the staff member has not already disclosed a mental health problem:* Suggest the staff member contacts the [Employee Assistance Programme (EAP)](https://intranet.birmingham.ac.uk/hr/wellbeing/workhealth/employee-assistance-programme-eap-and-citizens-advice.aspx);
* Advise the staff member of the support available, referring to the further sources of support set out in [Appendix 1](#appendix1);
* Be clear about who else, if anyone, needs to be informed, taking into consideration the limits to confidentiality and data protection; and/or
* Consider developing a WRAP/Advanced Statement, if appropriate. See [Section 5.6](#wrapplan) and [Appendix 4](#appendix4).
 |

|  |
| --- |
| **Level 2: Serious concern**  |
| Before taking any action seek advice from your local HR team to discuss the staff member’s health and behaviour observed. After seeking advice from the local HR team:* Invite the staff member to a meeting; consider whether the invite should be made verbally or in writing. If there is a serious concern, a verbal invite would avoid any delay;
* Be clear about the purpose of the meeting (i.e. continued concern about wellbeing and conduct). Be clear about who will be present at the meeting, holding the meeting in line with the format in [Appendix 5](#appendix5);
* If the staff member is happy to share information, ascertain whether there is any formal medical diagnosis;
* Advise the staff member of the support available ([Appendix 1](#appendix1));
* Determine whether the staff member has visited their GP and has received advice/support;
* Recommend a referral to Occupational Health. If the staff member is unwilling to attend, this should be noted;
* Consider, after receiving advice from Occupational Health, whether reasonable adjustments may be appropriate (see [Section 5.6](#wrapplan));
* Clarify any next steps in writing to the staff member, including expectations of behaviour;
* Continue to monitor and put in place a further review meeting; and/or
* Develop a WRAP/Advanced Statement (see [Section 5.6](#wrapplan) and [Appendix 4](#appendix4)), if appropriate.
 |

|  |
| --- |
| **Level 3: Very serious concern (**staff member **very unwell or in clear danger)**  |
| If you consider a staff member has a serious intention to harm themselves or others, contact the Emergency Services by dialling 999. If on-site please also make Security aware on 43000.If deliberate self-harm or suicidal/homicidal feelings have recently been expressed, advise the staff member to contact their GP or NHS 111 **(**see [Appendix 1](#appendix1)**)**.To further support a staff member, managers should:* Support the staff member in obtaining the specialist support they need and signpost to an appropriate support organisation. Managers are not responsible for resolving the staff member’s issues or providing out of working hours support;
* Consult with the Head of Wellbeing Services who will consider duty of care obligations (to the individual and other staff) and whether life might be at risk;
* If possible, hold a meeting according to the format in [Appendix 5](#appendix5);
* It is recommended that a management referral is made to Occupational Health. If the staff member is unwilling to attend, this should be noted;
* At the earliest opportunity, draw up a WRAP/Advanced Statement (see [Section 5.6](#wrapplan) and [Appendix 4](#wrapplan));
* At all stages of action try to seek the staff member’s support and agreement on next steps. At the very least inform the staff member what you are doing/have done; and/or.
* Clarify actions/next steps in writing and continue to monitor and review.
 |

**Appendix 3**

**Different forms of mental health problem**

The majority of people who experience a mental health problem suffer from a common mental health problem. Examples of the different forms of mental health problem are:

* Mild anxiety, mild depression, mild obsessive compulsive disorder can often, with careful planning, be managed at work.
* Schizophrenia and bipolar (formerly known as manic-depression) can be chronic but well-managed through drug therapies. Staff may need periods away from work (when symptoms become more acute) but function reasonably well in-between
* Personality disorders - a complex diagnosis where common treatments are limited in effectiveness as symptoms of these disorders can lead to considerable problems in their management at work.

Other possible related conditions include:

* Stress, whilst in itself is not a medical condition, if it becomes unmanageable it can have physical, psychological and behavioural symptoms which, if not addressed, can lead to mental health problems.
* Addiction difficulties (drugs, alcohol, gambling) are often associated with mental health problems. Addictions can be complex conditions and their management at work may often require considerable medical support.

**Appendix 4**

**WRAP/ Advanced Statement Template**

This document is usually drafted by the staff member with the support of a health professional (for example an Occupational Health Adviser) or REMPLOY Support Worker which is then discussed and agreed with the staff member’s manager to outline steps taken to support an staff member’s health at work. This information will be held confidentially and regularly reviewed. Staff only need to inform their manager about their health in relation to their role and the workplace and as far as they feel comfortable. The WRAP/Advanced Statement will help agree how to practically support staff in their role and address any health needs.

|  |
| --- |
| **In your own words, how does your mental health problem affect you? How might your symptoms impact on your work?** |
|  |
| **Can you describe in your own words any triggers for mental ill health and early warning signs that might be noticed.** |
|  |
| **What support could the University consider putting in place to minimise triggers or support you to manage your symptoms at work? Is there anything we should try to avoid doing?** |
|  |
| **If your health deteriorates, or we feel we have noticed early warning signs of distress, what should we do? Who should we contact?** |
|  |
| Please provide contact names and numbers of people we should contact in such circumstances. |
| Name(s) | Emergency contact number(s) |
|  |  |
|  |
| **Please also provide scenarios when your health changes in a minor way and you are still able to get into work. Please also advise as to what steps you can take (or do) in such circumstances. Is there anything the University can consider to facilitate this?** |
|  |
|  |
| 1998 Data Protection Act, Consent to Process Personal Information The personal information collected on this form will be processed by the University in accordance with the terms and conditions of the 1998 Data Protection Act. We will hold your data securely and not make it available to any third party unless permitted or required to do so by law. The requested information will be used as follows: 1. The purpose for collecting the information is to support the staff member’s health and work.
2. The information will be disclosed to appropriate managers and health professionals to enable them to support the staff member.
3. The information will be kept for the duration of the staff member’s employment or the earlier agreed date.
4. The information will be stored securely in a locked cupboard. The information will be shared either by confidential posting of paper copies, or when sending by email, the information will be password protected and the password conveyed in a separate email message. The information will be destroyed as confidential waste.

The University Data Controller is Nicola Cardenas Blancoand [University’s Data Protection Policy](http://www.birmingham.ac.uk/documents/university/legal/data-prot-policy.pdf).**By signing this form, the staff member agrees to the University processing their personal data as described above.**  |
|  |
| Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Staff member)Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Manager)Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Appendix 5**

**Meeting with a staff member to discuss their mental health**

The content of meetings will vary depending on whether there is a mild, serious or very serious level of concern, however, in preparation for a meeting managers should:

* Be certain about how to open the discussion as well as the purpose of the meeting. Managers should state the purpose as positively as possible;
* Ensure they are prepared to best encourage dialogue through presenting themselves as genuinely concerned, empathic and warm;
* Be prepared to articulate the concern verbally and clearly, with examples of behaviour/conduct witnessed; set out clearly the expected standards of conduct; be specific about what is and what is not acceptable.

General tips for managers:

* Avoid clichés like ‘cheer up’ or ‘I’m sure it’ll pass’ instead being open minded, non-judgemental and listening will help the conversation;
* Think about body language: try to be relaxed and open - looking uncomfortable won’t go unnoticed and may perpetuate the taboo;
* Managers should ask how they can help bearing in mind that people will want support at different times in different ways;
* Try not to ask too many questions, instead offer many more reflections than questions; and
* Be prepared to give the staff member time: some people may not be able to tell you everything there and then. They may need time to get back to you when they feel ready.

Holding the meeting:

* Ask open questions about what is happening, how they are feeling and what the impact of their condition is. For example:
	+ How long have they been feeling unwell? Is this an ongoing problem or something that an immediate action could put right?
	+ Are there any immediate support needs? Possibly suggest the staff member seeks advice from their GP or NHS 111.
	+ Are they receiving any support?
	+ Do they consider work may have contributed to their distress and, if so, how? Are there any problems outside of work?
	+ Ask whether an Occupational Health appointment would be useful.
	+ Is there any aspect of their medical care that it would be helpful for you to know about (for example, side effects of medication that might impact on work)?
	+ Do they have ideas about any adjustments to their work that may be helpful either short or long term?
	+ If they have an ongoing mental health problem, would it be useful to discuss their established coping strategies and how the organisation can help?
* Managers should wait patiently for the staff member to respond to the concerns raised and reflect back to the staff member what they have understood.
* Establish communication of their situation to colleagues, if necessary and if they agree;
* Decide what needs to happen next, seeking the opinions and suggestions of the staff member;
* Decide whether a review meeting is helpful and when;
* Let the staff member know who will be informed about the outcome of your discussion, such as HR, Health & Safety Co-ordinator, trusted colleague as appropriate; and
* Managers should keep a note of the discussion at the meeting for future reference ensuring that the member of staff’s electronic personal record contains this information. Health information is classified as “sensitive personal data” under the Data Protection Act and should therefore be held in accordance with the legal requirements (see [Section 7](#dpa)).