

Guidance for Implementing a Mental Health Programme



September 2020



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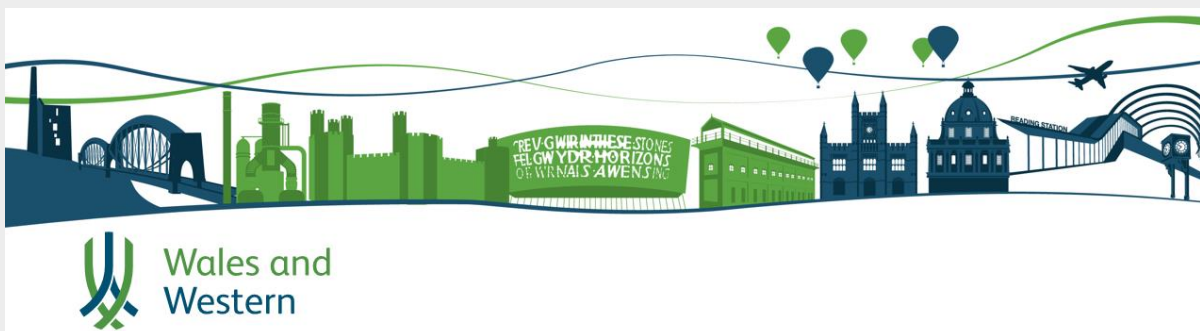
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Executive Summary

Construction work takes place in varied environments on and around Network Rail managed infrastructure, presenting a range of risks to workers mental health and wellbeing.

Many serious mental health illnesses can take years to develop and the immediate consequence of workplace exposure may be dismissed as not significant, compared to the immediate impact of physical injuries caused by accidents on our sites and in our offices.

Amongst our industry there is generally a low awareness of mental health risks and the controls needed. Many workers are away from home with inconsistent access to provisions.

Differing locations and employers make it difficult or impossible for some zero hours contract workers to access resources or health professionals, leading to problems often being overlooked.

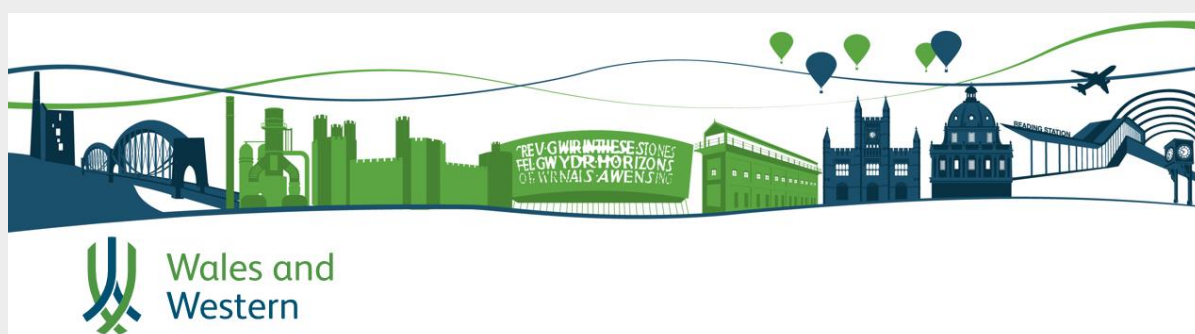
Recognising this need for improvement and greater awareness, the Capital Delivery Wales and Western **Safety, Health, Environment Leadership Team (SHELT)** created a remit for its Safety Forum to form a working group.

The working group is a collaboration of Capital Delivery Wales and Western and its supply chain. The aim of which was to:

- Review the current state of mental health provision by regional Principal Contractors;
- Identify good practice and areas for improvements;
- Communicate the finding's to SHELT and its members.

The group surveyed Principal Contractors across Wales and Western and found that 98% of respondents have a mental health programme or have access to resources. Of which 72% implemented their respective programmes within the last 3 years.

A lower rate of response was received in relation to questions about the Principal Contractor's supply chain. In summary, the majority were unaware if their supply chain had a mental health programme or access to resources; nor was it a consideration of their approved supplier process.



Overall, the survey showed that although the industry in our region is improving in supporting employee's mental health, there is still a lot to be done to ensure programmes are being implemented further down the supply chain / provision of resources is available

This guide has been produced with a dual purpose. It will act as aid to help those, within the rail industry, implement a mental health wellbeing programme into their organisations. And for those who have implemented a programme, it provides links to resources and examples of the next steps they could consider undertaking.

Thanks to Suttle Projects; R&W Rail; Dyer & Butler, Hochtief and Network Rail for their involvement with the working group and creating this guide.



Introduction

“A healthy workplace is one where employees and managers work together to protect and promote their health, safety and wellbeing and the sustainability of the business.”

‘Reference: “World Health Organisation’

1.1 Purpose

The purpose of this document is to describe how to implement a mental health programme into your organisation and to provide an insight and understanding of mental health in the rail industry. It will outline how employees can be affected by the work they undertake leading to stress, trauma, depression, and various other mental health illnesses.

The document includes:

- Facts and figures relating to mental health
- Basic measures that can be implemented into your company to improve mental health
- Common approaches being undertaken in the Rail industry
- Next Steps and Good Practices
- Resources available
- Things to consider

1.2 Scope

This guidance document is relevant to all parts of the rail industry. The document is aimed at industry leaders and those directly responsible for managing worker health and occupational health. The document should also be of interest to employees, representatives, and wider industry groups. It focuses on mental health in the workplace and ways of avoiding mental ill health in the workplace, in addition to as supporting those with mental illness. The results will be an all-round better working atmosphere which will promote better productivity and a reduction of absence due to mental health problems.

1.3 Survey Results

In a survey undertaken by this working group of Capital Delivery Wales and Western Principal Contractors, at the start of 2020, it was found that:

- 98% of respondents had a mental health programme or have access to resources. Of which:
 - ❖ 24% of respondents launched their programme within the last 12 months;
 - ❖ 48% of respondents have been running their programme for less than 3 years;
 - ❖ 15% of respondents have been running their programme for over 3 years;
- Programmes and resources include a mix of inhouse and outsources programmes; Mates in Mind; Mental Health England; Samaritans
- 71% of respondents have a process which allows employees to report mental health as a reason for being absent from work;

- Feedback and measurement of success and failures is received via employee surveys; sickness records; happiness surveys; click counter on the internally designed mental health app; feedback from mental health first aiders; discussion groups; length of service/retention of employees;
- 84% of respondents have a support mechanism for helping someone, who has been off work for mental health reasons, back into the workplace.

Facts and Figures

Below are some Facts and Figures surrounding different mental health disorders diagnosed in the UK.

At any given time 1 in 6 working age adults have symptoms associated with mental ill health (e.g. sleep problems, fatigue, etc.) which do not meet the criteria for diagnosis.

Mental illness is the largest single source of burden of disease in the UK. Mental ill health costs UK employers an estimated £33-42 billion per year

Suicide is the most common cause of death for men aged 20 – 49.

602,000 workers in Britain suffered from work related stress, depression or anxiety (New or long-standing) in 2018/19. This has now surpassed the historical one of work-related musculoskeletal disorder, indicating that businesses need to do more when it comes to their peoples mental wellbeing.

More than 75% of adults accessing treatment had a diagnosable condition prior to the age of 18

1 person in 4 will experience some form of mental health issue in any given year.

Stress, anxiety and depression are the biggest cause of sickness absence in our society

Work-related stress, depression or anxiety accounts for 44% of work-related ill health and 57% of working days lost, in 2017/18.

'Reference: Mental Health First Aid (MHFA) England, HSE Annual Statistics'

Implementation

This section provides an understanding of some of the measures you can put in place to raise awareness and support people with mental health illnesses in your company.

3.1 Developing the Business Case

When setting out to develop a business case for implementing a mental health wellbeing programme it is useful to consider the wider contexts and basic premise as to why health interventions are useful to the company. There are many reasons to support this idea and some of these are reflected in the following discussion.

Across the UK, there is a growing focus on how to move from reactive health management to becoming proactive.

Employers who choose to invest in the health of their staff can realise clear benefits. This can be in the form of occupational health programmes that deliver effective preventative measures that protects staff from developing the onset of ill health conditions in the first place.

3.1.1 Cost Management

Cost management is a reasonable expectation for a workplace health intervention. To assess the savings that may be gained, the following data sources can be examined:

- Sickness absence;
- Staff turnover costs;
- Accidents and injuries;
- Medical insurance claims
- Insurance costs and legal fees;
- Disability incident and duration reports;
- Presenteeism surveys.

Identifying costs can seem difficult, however, the RSSB have developed a **Cost Benefit Analysis Tool**, appendix 1, as a way for you to work out the financial costs of poor health and wellbeing to your business. It assists you with building a business case to identify likely returns on investment from different programmes designed to support the health of your workforce.

Below is an example of how the tool can help you calculate the costs of poor health and wellbeing in your organisation and compare it to the benefits of implementing a mental health or overall occupational wellbeing programme, which will assist with building the business case.

'Reference: RSSB – Developing Health and Wellbeing Business Cases'

Step 1 – Calculate the Costs

Assumptions:

- 10 x employees;
- £25,000 x average gross wage plus non-wages costs;
- 228 x annual number of working days per employee;
- 5 x annual working days lost per employee from sickness absence;
- 5% of employees leaving voluntarily each year due to health and wellbeing issues;
- £12,500 average turnover cost per employee;
- £10,000 annual costs of employee claims;
- £5,000 annual cost of related insurance and legal fees.

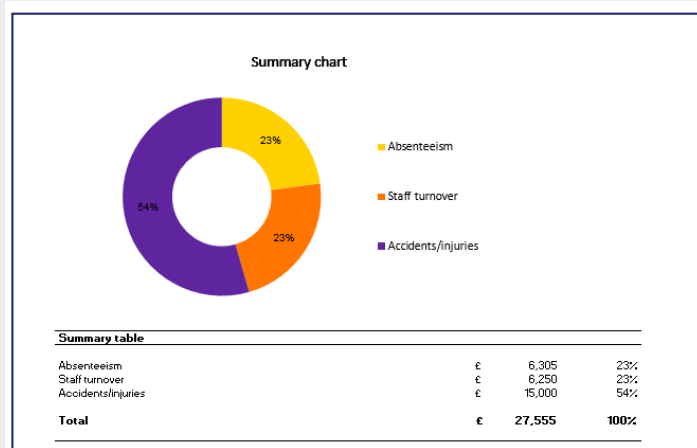
Example - What are my costs? RSSB

| Employee information | |
|---|----------|
| 1 Total number of employees in your business | 10 |
| 2 Average gross wages plus non-wage costs (£) | £ 25,000 |
| 3 Annual number of working days per employee | 228 |

| Cost of sickness absence | |
|--|----------------|
| 4a Annual working days lost per employee from sickness absence | 5 |
| OR | |
| 4b Annual proportion of working time lost per employee from sickness absence | |
| 5 Indirect Sickness Absence Costs | 15% |
| Total annual cost of absenteeism to your business (£) | £ 6,305 |

| Cost of health-related turnover (skip this step if intervention being tested is not directly linked to reducing voluntary attrition) | |
|--|----------------|
| 6 Percentage of employees that leave voluntarily each year owing to health and well-being issues | 5% |
| 7 Average turnover cost per employee (£) | £ 12,500 |
| Total annual cost of health-related turnover to your business (£) | £ 6,250 |

| Cost of accidents, injuries and ill health (skip this step if intervention being tested is not related to reducing claims burden) | |
|---|-----------------|
| 8 Annual cost of employee claims for accidents, injuries and ill health (£) | £ 10,000 |
| 9 Annual cost of related insurance and legal fees (£) | £ 5,000 |
| Total annual cost of health-related employee claims and fees (£) | £ 15,000 |



'Reference: RSSB – Developing Health and Wellbeing Business Cases'

Step 2 - Build the Business Case

Once you know your costs you now need to **build a business case** for action. In this example, the following assumptions were considered:

- 5 years x length of business case (this is the length in time you wish to access your programme and expect to see returns for your investment);
- £5,000 start up costs including materials and equipment you may need;
- Other Costs = £500 in year 1 to an increase in year 5 of £541 (e.g. cost of time lost from taking part in the programme).

Business case parameters

Project name:

Length of business case in years: ?
(for example: period over which returns are expected)

The estimated startup costs of the programme including materials and equipment you may need.

The estimated annual running cost of the programme such staff costs incurred in running and maintaining the programme.

Any other costs such as the cost of time lost from taking part in the programme.

You can enter data for all employees or a sub-set of employees that your health and well-being project is targeted at.

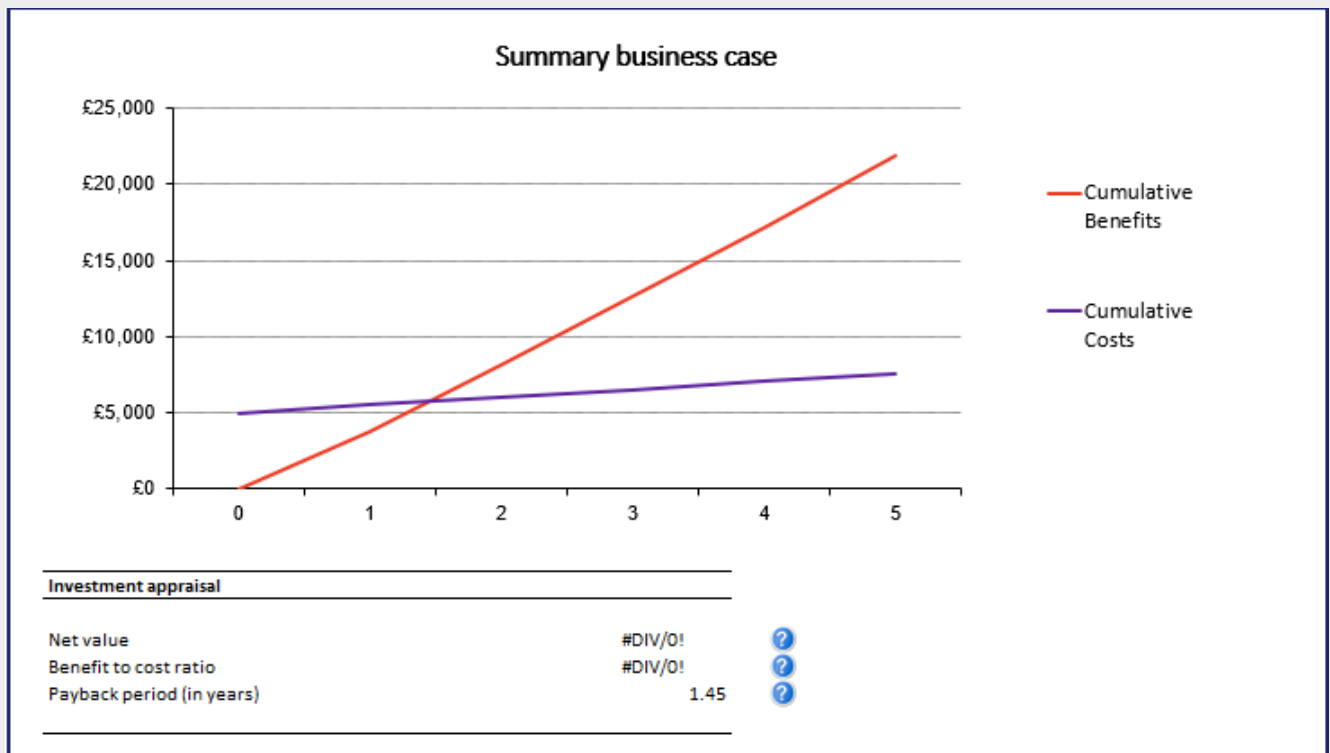
| | | Years | | | | | | | |
|---|---|----------|----------|----------|----------|----------|----------|---|---|
| | | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Employee information | | | | | | | | | |
| Numbers of employees | ? | 10 | 10 | 10 | 10 | 10 | 10 | | |
| Average gross wages plus non-wage costs (£) | ? | £ 25,000 | £ 25,500 | £ 26,010 | £ 26,530 | £ 27,061 | £ 27,602 | | |
| Number of working days in a year | ? | 228 | 228 | 228 | 228 | 228 | 228 | | |
| Costs | | | | | | | | | |
| Start up costs (£) | ? | £ 5,000 | | | | | | | |
| Running costs (£) | ? | £ - | £ - | £ - | £ - | £ - | £ - | | |
| Other costs (£) | ? | | £ 500 | £ 510 | £ 520 | £ 531 | £ 541 | | |
| Indicators | | | | | | | | | |
| For the current year or Year 0, enter current rates and costs. For future years, estimate how your health and well-being project might impact on these rates and costs. | | | | | | | | | |
| Working days lost per employee from absence | ? | 5.0 | 4.5 | 4.0 | 4.0 | 4.0 | 4.0 | | |
| OR Proportion of working time lost per employee | ? | 0.15 | | | | | | | |
| Indirect Sickness Absence Costs | ? | | | | | | | | |
| Proportion of employees that leave each year (%) | ? | 5.00% | 2.50% | 2.50% | 2.50% | 2.50% | 2.50% | | |
| Average turnover cost per employee (£) | ? | £ 12,500 | £ 12,750 | £ 13,005 | £ 13,265 | £ 13,530 | £ 13,801 | | |
| Cost of claims for accidents, injuries and ill health (£) | ? | £ 10,000 | £ 10,000 | £ 10,000 | £ 10,000 | £ 10,000 | £ 10,000 | | |
| Cost of insurance and legal fees (£) | ? | £ 5,000 | £ 5,000 | £ 5,000 | £ 5,000 | £ 5,000 | £ 5,000 | | |

The indicators section is where you will need to add the current rates and costs to the company and for the future years you must estimate what you think these indicators will cost you.

'Reference: RSSB – Developing Health and Wellbeing Business Cases'

Once the data has been inputted the formulas will calculate whether there is a financial benefit or not. In the worked example below, year zero and one there is a loss, however, by the end of year five there is a positive financial benefit of £14,247. The graph indicates the cumulative costs vs the cumulative benefits and as you can see in this example the benefits outweigh the costs.

| Business case | | Years | | | | | |
|--|---|----------|----------|---------|----------|----------|----------|
| | | 0 | 1 | 2 | 3 | 4 | 5 |
| Benefits/savings | | | | | | | |
| Absenteeism | £ | - | £ 559 | £ 1,141 | £ 1,164 | £ 1,187 | £ 1,211 |
| Staff turnover | £ | - | £ 3,188 | £ 3,251 | £ 3,316 | £ 3,383 | £ 3,450 |
| Accidents/injuries | £ | - | | | | | |
| Total benefits | £ | - | £ 3,747 | £ 4,392 | £ 4,480 | £ 4,569 | £ 4,661 |
| Cumulative benefits | £ | - | £ 3,747 | £ 8,139 | £ 12,619 | £ 17,188 | £ 21,849 |
| Costs | | | | | | | |
| Start up costs | £ | 5,000 | | | | | |
| Running costs | £ | - | £ - | £ - | £ - | £ - | £ - |
| Other costs | £ | - | £ 500 | £ 510 | £ 520 | £ 531 | £ 541 |
| Total costs | £ | 5,000 | £ 500 | £ 510 | £ 520 | £ 531 | £ 541 |
| Cumulative costs | £ | 5,000 | £ 5,500 | £ 6,010 | £ 6,530 | £ 7,061 | £ 7,602 |
| Net benefits/savings | | | | | | | |
| Net benefits (Benefits minus costs) | £ | -£ 5,000 | £ 3,247 | £ 3,882 | £ 3,960 | £ 4,039 | £ 4,120 |
| Cumulative net benefits | £ | -£ 5,000 | -£ 1,753 | £ 2,129 | £ 6,088 | £ 10,127 | £ 14,247 |



'Reference: RSSB – Developing Health and Wellbeing Business Cases'

3.1.2 Non-Financial Benefits

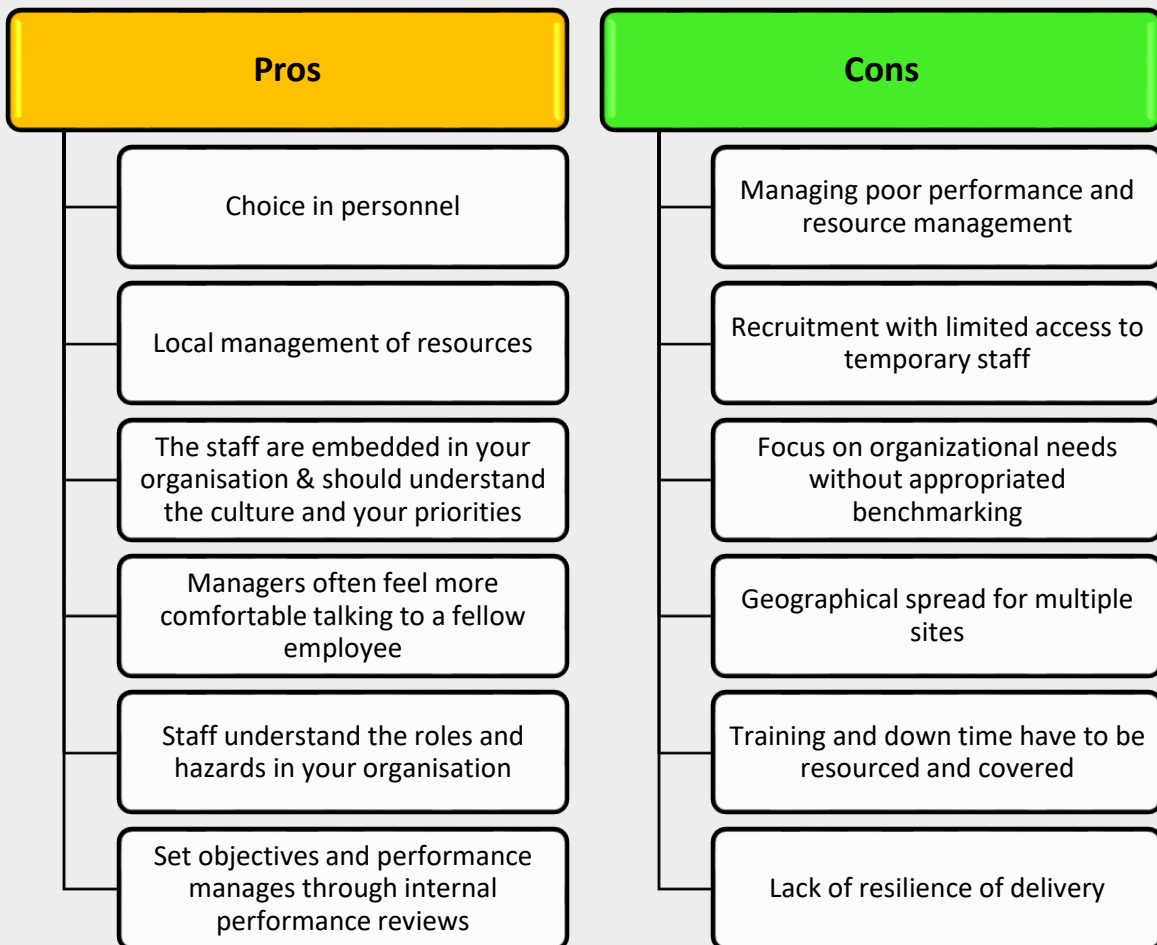
In addition to financial benefits of implementing a mental health or occupational wellbeing programme you may find a more engaged and motivated workforce; reduction in accidents; improved overall health and decrease physical / financial problems associated with mental illness; reduction in workplace violence and harassment; improved company morale; you may become an employer of choice; a healthier company culture; reduction in absence rates and staff turnover and; a positive impact on insurance and legal costs.

3.2 Occupational Health Service Options

The level and type of mental health services you require will vary according to the needs of your organisation. However, a recent survey by RSSB (A full survey report will be available as part of the Challenge Fund report in 2020) of rail organisations found that most mental health services are commissioned as part of a wider occupational health service. And there are three commonly used occupational health models you could choose from.

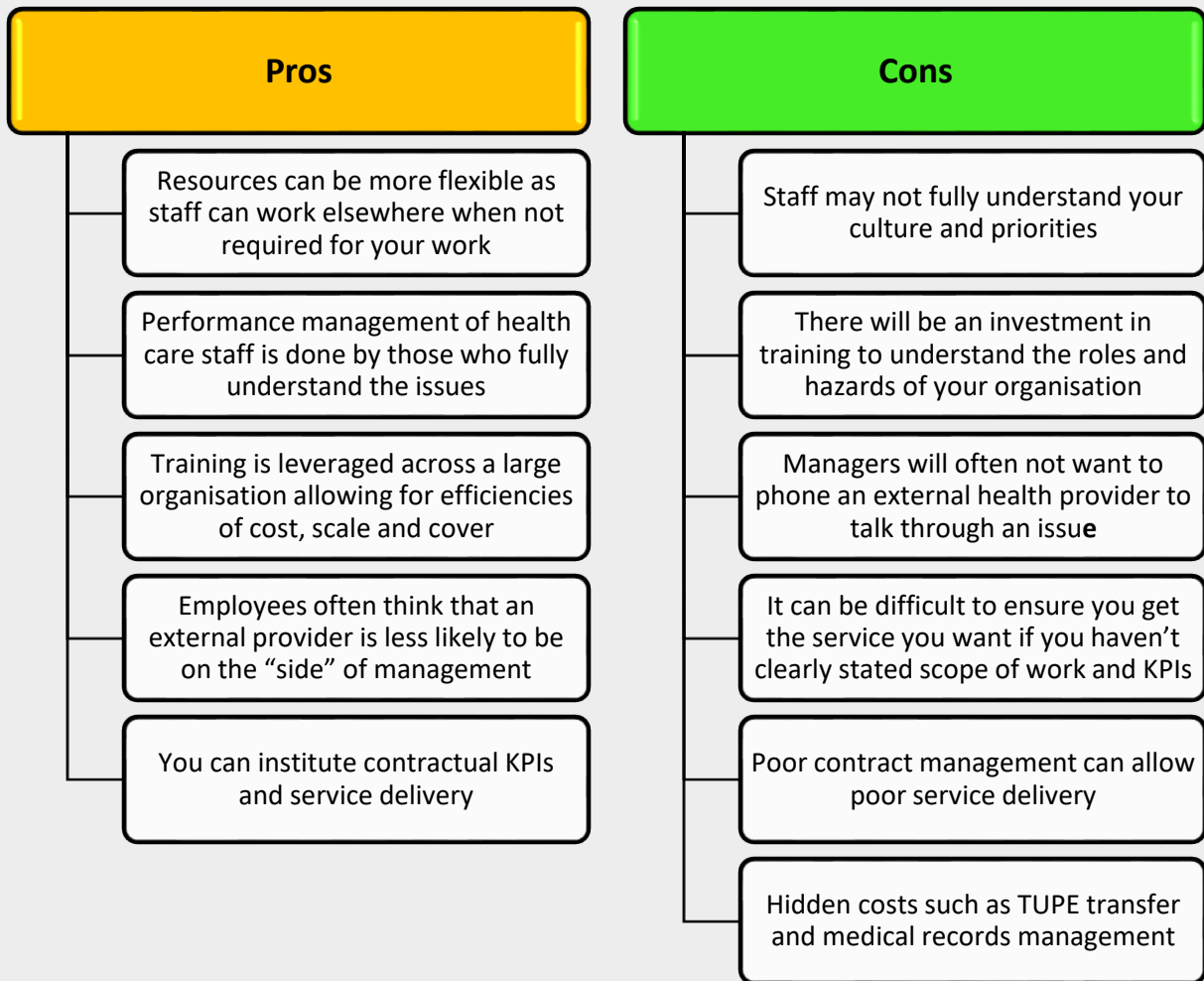
3.2.1 In house Services

The organisation employs the health care staff needed



'Reference: RSSB – Occupational Health The Wise Buyer'

3.2.2 Outsourced services – an outsource provider employs the health care staff needed



Reference: RSSB – Occupational Health The Wise Buyer

3.2.3 A mixed service – a combination of in-house and outsourced services.

3.2.4 Mental Health Professionals

There is a whole host of professionals working in mental health, the table below describes a selection of them:

| <u>Mental Health Professional</u> | <u>What they can do</u> |
|--|---|
| Mental Health Nurse | Registered nurse who specialised in mental health. Nurses can assess patients’ mental health, manage medication administration and oversee medication impact. |
| Psychologist | Psychologists study human behaviour. Clinical and Counselling psychologists can assess mental health and provide therapy. |
| Psychiatrists | Qualified medical doctor who specialised in psychiatry. Can assess mental health, suggest treatment and prescribe medication. |
| Trauma Focused Practitioners | Mental health professional who is trained in evidence-based interventions for trauma, such as trauma focused cognitive behavioural therapy or eye movement desensitisation and reprocessing. The term trauma focused practitioner is not a statutory protected title. In theory, this means anyone could use it. In practice, specialists in this field are expected to register with an accreditation body defined by the type of psychotherapy offered. |
| Counsellors and psychotherapists | Professional who provides mental health treatment. As with trauma focused practitioners, the terms counsellor and psychotherapist are not statutory protected titles. Professionals of these areas are still expected to register with their relevant accreditation body. |

‘Reference: RSSB – Commissioning Mental Health Services in Rail’

3.2.5 Creating a Strategy

Reflect and understand where your organisation is on the mental health programme journey, as this will help you strategize which approach to take. If, for example, it is a new topic then mental health should be gradually introduced and promoted to raise awareness, before rolling out any training courses or recruiting volunteers for mental health first aiders or champions.

In essence, your strategy should focus on the whole person. Mental health should be one element alongside physical, financial and emotional wellbeing.

The following are steps to consider when creating your strategy:



Example strategy:

Based on the traditional primary, secondary and tertiary approach to stress management, our example strategy focuses on

- a) having appropriate policies and developing line manager skills,
- b) providing opportunities for employees to build their resilience,
- c) enabling early advice and support from appropriate health services and
- d) building a culture of support through awareness and education. The various elements are described in the graph below.



Industry Common Approaches

In this section you will learn about initiatives other rail organisations across Capital Delivery Wales and Western use to assist with implementing their mental health strategies.

4.1 Mental Health First Aid England / Wales

Mental Health First Aid England / Wales offer expert guidance and training to support mental health, in the workplace and beyond. One of their services is the provision of training such as Mental Health First Aider and Champion training.

Mental Health First Aiders



Available as a two day face to face session, or as a flexible online delivery.

Learners will gain:

- An in depth understanding of mental health and the factors that can affect wellbeing
- Practical skills to spot the triggers and signs of a range of mental health issues
- Confidence to step in, reassure and support a person in distress using the Mental Health First Aid action plan
- Enhanced interpersonal skills such as non-judgemental listening
- Knowledge to help someone recover by guiding them to further support, whether self-help resources, internal support such as EAP, or external sources such as their GP
- Understanding of how to keep themselves safe while performing their duties
- A quick reference card for the Mental Health First Aid action plan

MHFA Champions



One day session available face to face.

Learners will gain:

- Knowledge and confidence to provide Mental Health First Aid for the most common mental health issues
- Understanding of how to help build a mentally healthy workplace, challenge stigma and support positive wellbeing
- A quick reference card for the Mental Health First Aid action plan

Having people who are trained to one of these levels in your organisation is a fantastic asset. For example, Mental Health First Aiders will have the skills to have a non-judgmental conversation with someone who is experiencing emotional distress or a mental health issue and effectively guide the person to the correct on-going support.

- Encourage people to talk more freely about mental health.
- Reduce stigma around mental health.
- Creating a positive culture.
- Promote wellbeing.
- Promote early intervention which enables recovery.

To ensure you have engaged mental health first aiders it is recommended that they volunteer to become one rather than it be mandated.

Mental Health First Aiders are trained to:

- Spot the early signs and symptoms of mental ill health
- Start a supportive conversation with a colleague who may be experiencing a mental health issue or emotional distress
- Listen to the person without judgment
- Assess the risk of suicide or self-harm
- Encourage the person to access appropriate professional support or self-help strategies. This might include encouraging access to internal support systems such as Employee Assistance Programme or in-house counselling services
- Escalate to the appropriate emergency services, if necessary.
- Maintain confidentiality as appropriate
- Protect themselves while performing their role

You may wish to consider mental health champions instead. Choose what is best for your organisation.

Below is an example table of some common signs of mental health issues, however, this list is not exhaustive and does not always mean someone is struggling with mental health. Always talk to the person directly and don't make assumptions or listen to gossip.

Common Signs of Mental Illness

| Physical | Psychological | Behavioural |
|-------------------------------|--|---|
| Fatigue | Mood Changes | Changes in Performance |
| Indigestion or Upset Stomach | Tearfulness | Uncharacteristic Errors |
| Headaches | Indecision | Sickness/Absence |
| Appetite and Weight Changes | Loss of Motivation | Changes in Relationship |
| Joint and Back Pain | Loss of Humour | Lateness or Leaving Early |
| Changes in Sleep Patterns | Increased Sensitivity | Working for Longer Hours |
| Visible Tension and Trembling | Difficulty Relaxing | Taking on too much work |
| Chest or throat pain | Illogical or irrational thoughts | Irritability |
| | Responding to experiences not observed by others (like hearing voices) | Increased smoking, drinking and recreational drug use |
| | Distraction or confusion | Restlessness |
| | Anxiety and excessive worry | Anger or aggression |
| | Feeling low | Repetitive speech or activity |
| | Thoughts about suicide or self-harm | Disruptive or antisocial behaviour |
| | | Intense or obsessive activity |
| | | Overreaction to problems |
| | | Risk-taking |
| | | Overexcitement or euphoria |
| | | Withdrawal |
| | | Increased frequency of sickness or absence |

4.2 Awareness Campaigns

Various organisations are providing awareness campaigns to assist with mental health strategies. The different campaigns include:

- Setting standards presentations – Half day presentation surrounding behavioural culture and including a section on depression and suicide to raise awareness and prompting discussions between employees encouraging them to speak out.
- General Awareness Training which is facilitated by an external organisation. Creating a shared view and vocabulary of wellbeing, build awareness and visibility of mental health wellbeing.
- Resilience Training - Focusing on a resilient thinking, motivation and engagement as well as building a personal resilience toolbox i.e. managing personal energy and impact of technology is a great way to reduce mental health issues in your organisation. Including personal development workshops to include relationship management, leading teams, and time management.
- Other common courses being delivered:
 - Assertiveness training
 - Stress Awareness
 - Anxiety and Depression Awareness
 - Suicide Awareness
 - Anger Management training
 - Gambling, alcohol and debt awareness
 - Cognitive Behavioural Therapy (CBT) sessions
 - Yoga and Pilates sessions

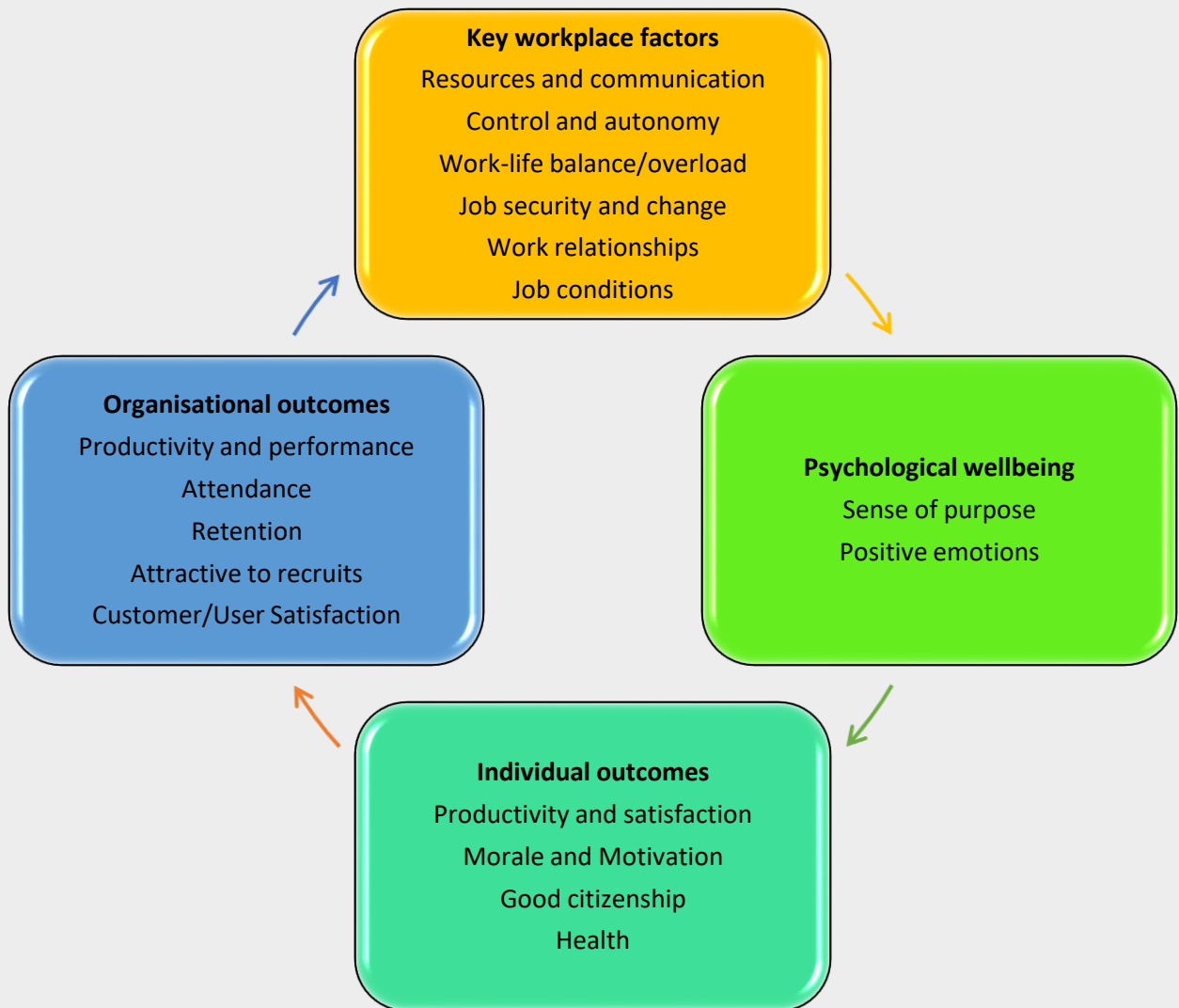
4.3 Health and Wellbeing Survey

A common approach in the industry is mental health and wellbeing surveys. Organisations are using this as a way of understanding how employees are feeling working for them and use this information to help create their mental health strategies.

Surveys are also used post implementation to understand successes and failures which identifies areas for improvement and next steps.

4.4 Asset Tool

An Asset Tool, such as the one in the diagram below, is a great way to work out factors in the workplace that can affect someone's mental health and how to improve those factors to create a much more positive workplace, increasing productivity and reducing mental health issues for workers.



Next Steps and Good Practices

Once you have completed the first flurry of implementation it is always good to have an eye on the next steps. In this section you will find ideas and suggestions of initiatives which may not be implemented until year 2, 3 or 4 of your strategy.

5.1 MHFA / Champion Refresher Training and Support

Having MHFA / Champions is great however, once trained they need to be supported. This can be undertaken in a number of ways such as 8 weekly phone / virtual calls, if they are spread out across the region, or quarterly face to face meeting's. This is an opportunity to provide organisational updates and to learn from the MHFA's about what topic areas they are encountering and identify any hot spots or trends. However, fundamentally this call or meeting is to offer advice guidance and support for MHFA / Champions as they may be impacted by some of the conversations they encounter. This support can be given by the host and also the community of MHFA / Champions.

Physical first aiders regularly refresh their skills so why not the MHFA / Champions? It will refresh their skills whilst demonstrating your organisation's commitment to treating physical and mental wellbeing equally.

As there is currently no set guidance refresher timescales vary across Principal Contractors in Wales and Western. The majority have not had a mental health programme implemented long enough to require refresher training, however, overall the strategies suggest either every 2 or 3 years.

Good Practice - In Wales and Western Network Rail's MHFA's attend an annual conference to refresh, upskill and maintain their continual professional development (CPD).

5.2 Line Manager Training

Line managers are usually the first person to be made aware of an employee struggling with their mental health. This could be from the employee themselves or another employee who is concerned for their colleague's welfare.

Line managers have the most contact with their teams so providing them with training is a great way to combat poor mental health in your organisation. Some line managers may not wish to undergo the full 2-day mental health first aider training, nor take on their duties, so a 1 x day awareness course may be preferable.

RSSB have produced a line manager training document, RSSB – Promoting good mental health line managers resource, *appendix 2*, which is a training guide for line managers to gain basic knowledge in how to deal with certain situations.

Network Rail's Wales and Western Occupational Health and Wellbeing team have designed a one-day training course, Wales & Western Managers Supporting Mental Health Delegate Guide, *appendix 3*. In addition, they have created a Wellbeing Discussion Tool, *appendix 4*, as a starting point for employees to write down any concerns that may be impacting on their wellbeing. The tool helps articulate how the employee is feeling in order to convey it to their line manager.

5.3 Trauma

The construction industry we work in combined with the railway environment can at times be highly dangerous place to work. This can lead to a traumatic event which can cause mental health problems for those who are involved. Examples of which are near misses; accidents at level crossings; death of a member of the public or colleague; suicide attempt; livestock on the railway; derailment; drowning; scaffolding failure and; work related violence.

One of the principal concerns in the aftermath of a traumatic event is to minimise the risk to the affected employees from the potentially adverse effects of the trauma. Providing an effective response depends on identifying interventions that are appropriate to the circumstances and the affected individuals. Some interventions may not be provided directly by the employers and in some cases may require specialist clinical intervention. It is important for the organisation to allocate responsibility to someone within the organisation who can ensure that the programmes of support are appropriate for the affected individuals, and to assure follow-up on agreed actions. Organisations should adopt active support for those who experience adverse reactions, by using practical support, watchful waiting, normalising reactions, risk assessment, regular monitoring and peer support frameworks.

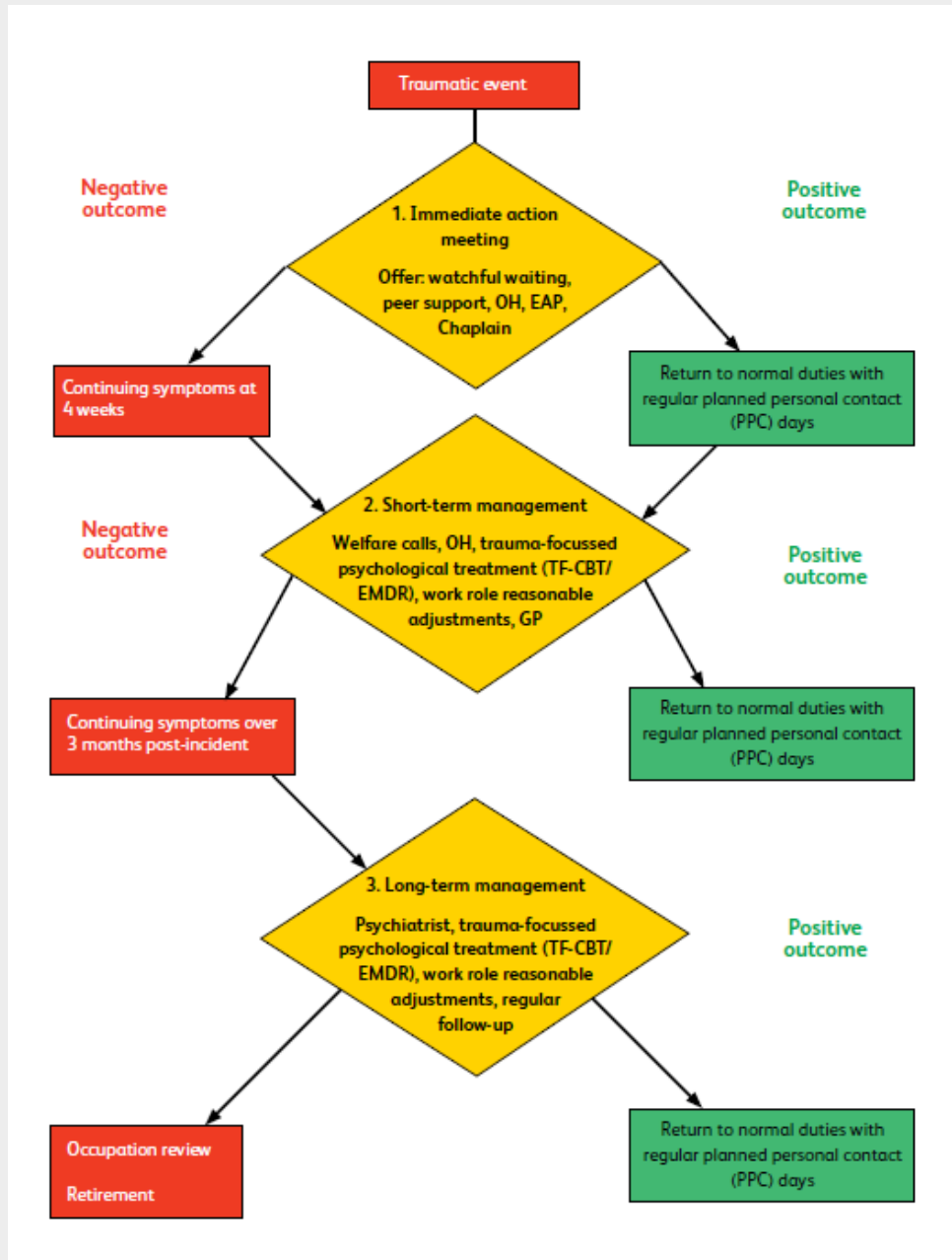
Therefore, having a procedure and supporting resources in place to management traumatic events is encouraged.

Procedures for managing psychosocial risk should dovetail with other crisis management and business continuity procedures, as well as care and support systems, and become routine practice

Network Rail have developed their own internal standard for the management of traumatic events, *appendix 5*, and is supported by a trauma screening questionnaire, *appendix 6*.

The RSSB have also produced a guidance document - Guidance for responding to a potentially traumatic experience in rail, *appendix 7*, to help its members support their employees following a potentially traumatic experience. It is further supported by The Trauma Management Toolbox, *appendix 8*. Below is an example of a trauma management flowchart taken from the toolkit.

Trauma Management Flowchart



'Reference - RSSB – The Trauma Management Toolbox'

What does psychosocial mean? *“the influence of social factors on an individual's mind or behaviour, and to the interrelation of behavioural and social factors”*

Reference “Oxford English Dictionary, 2012”

5.4 Stress Risk Assessment

Mental distress should be considered as a psychosocial occupational hazard for some roles in the rail industry and be managed accordingly. In such circumstances, you should conduct role stress risk assessments that consider exposure to trauma alongside wider work-related stressors and put appropriate mitigation in place. This should ideally be undertaken as part of initial job design, with ongoing review processes for established roles.

Reference “RSSB Guidance for responding to potentially traumatic incidents in rail”

In addition, there are other factors which can cause stress at work including influences from the home life. Below are some key points to include in a Stress Risk Assessment.

| | |
|--|---|
| <p><u>Demands</u></p> <ul style="list-style-type: none"> • Do you feel you have just the right amount of work to do? • Could you say what work you have to much/little of? • Do you take the breaks you are entitled to at work? • What training if any will help you to do your job? | <p><u>Relationships</u></p> <ul style="list-style-type: none"> • How could communication in the team be improved? • If you feel that your experiencing bullying or harassment at work, what part of the company’s grievance policy could help? |
| <p><u>Control</u></p> <ul style="list-style-type: none"> • How could you have a say about how your job is done? • How could you be more included in decision making in the team? • How could you be more involved in decision making? | <p><u>Role</u></p> <ul style="list-style-type: none"> • Are you clear about your roles and responsibilities at work? • If you feel there is any ambiguity or confusion (role Conflict) in your job? |
| <p><u>Support</u></p> <ul style="list-style-type: none"> • How could your line managers better support you to do your job? • How could your colleagues better support you to do your job? • Are there any parts of your job that you find especially difficult? • Do you feel you have a healthy work life Balance? | <p><u>Change</u></p> <ul style="list-style-type: none"> • How could your line manager better support you during change at work? • How could your organisation better support you during change at work? |

‘Reference - RSSB – Promoting good mental health line managers resource’

Examples of stress risk assessment forms can be found on pages 18-19 of RSSB – Promoting good mental health line managers resource, *appendix 2*; and in *appendix 9* which is Network Rails own version. The Wellbeing Discussion Tool, *appendix 4*, could also be used as a good supporting document in order to start discussions between the line manager and employee.

5.5 Supply Chain

A vital next step of mental health programmes is ensuring that Principal Contractor's supply chain have adequate support for their employees.

In a survey undertaken by this working group of Capital Delivery Wales and Western Principal Contractors, at the start of 2020, regarding their supply chain it was found that:

- **75%** of respondents did not have, in their approved supplier process, a requirement that their supply chain had a mental health programme/access to resources;
- The **majority** of respondents did not know whether their supply chain had a mental health programme/access to resources;
- **67%** of respondents said that their supply chain could access their programme/resources if they didn't have their own. However, clarification is needed as to whether this is restricted to only whilst operational on a project;

The survey showed that although the industry in our region is improving in supporting employee's mental health, there is still a lot to be done to ensure programmes are being implemented further down the supply chain / provision of resources is available.

Whilst Principal Contractors have procedures in place to ensure their supply chain meet their approved supplier requirements, they don't all ensure that there is a requirement for mental health provision.

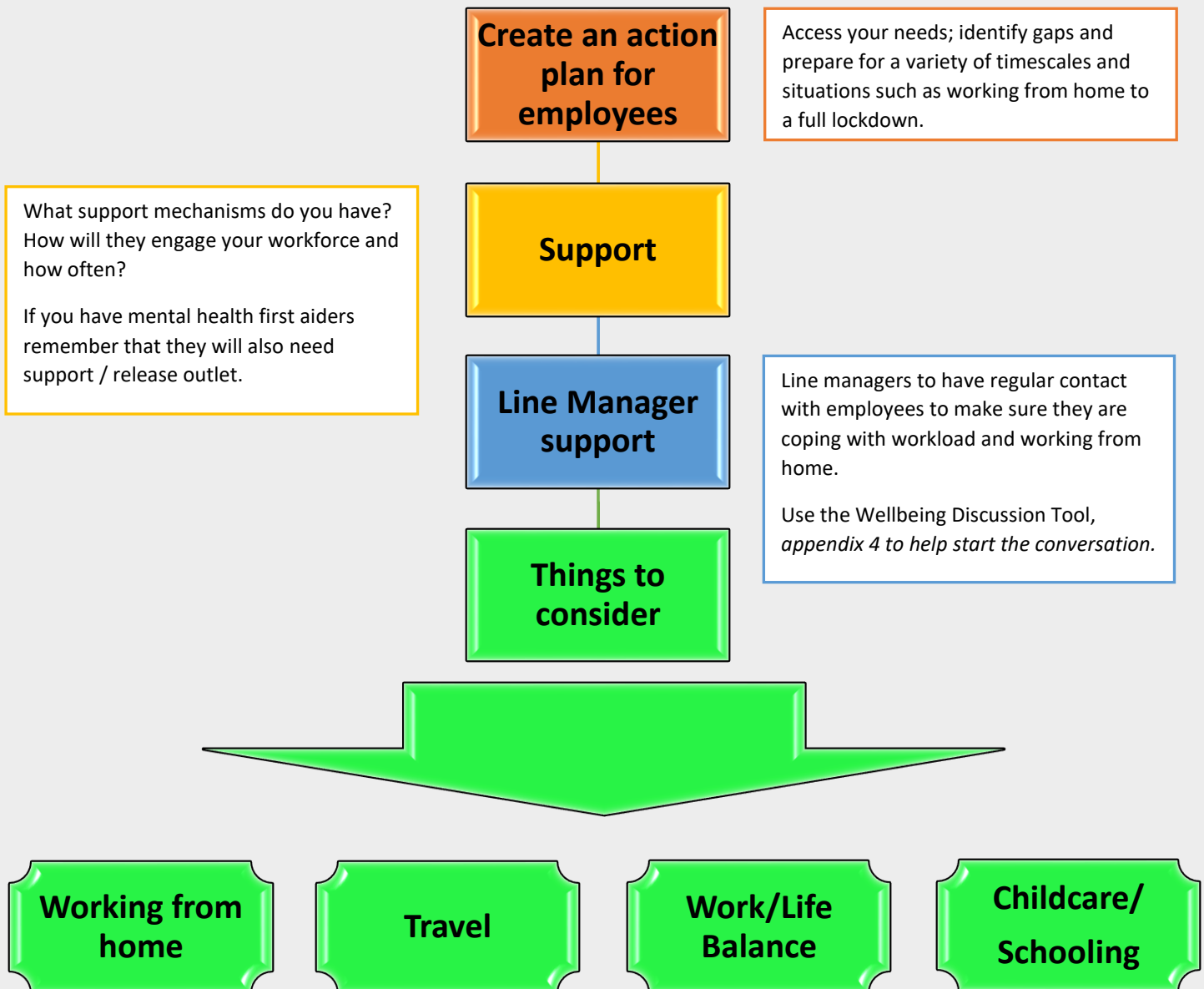
N.B. - Agency labourer's are particularly at risk. Principal Contractors and their agency supply chain should focus attention in rectifying this area. A suggestion may be for the Principal Contractor to provide a stopgap by allowing labourer's access their programme / resources whilst a permanent solution is sought.

There are a number of Principal Contractors, who are further down the implementation process than others, have addressed this issue. Below are some responses on how they promote their programmes / resources to their supply chain:

- Include a requirement in the contract;
- Include in the tender / approved supplier process;
- Have clearly identifiable mental health first aiders on site (like physical first aiders) and make them available to everyone on site;
- Invite everyone on site to the mental health briefing's / resilience / anxiety awareness sessions;
- Hold supply chain engagement days where mental health facilities are explained and encourage the supply chain to implement their own programmes;
- Promote via posters and newsletters;
- Discuss during start-up / site meetings. Make it an agenda item;

Pandemics

Recent experience with health pandemics, such as COVID-19, has shown how people’s mental health can be adversely affected. With this in mind it is vital all organisations are ready for any future instances. Below are some things to consider when preparing an action plan / procedure:



6.1 Working from home

How are employees affected from a total reduction of face to face conversations and an increase use of computer technology to interact with people?

6.2 Travel

How do employees feel about using public transport to travel to work, if needed, and what impact does this have on their mental wellbeing?

6.3 Childcare / Schooling / Caregivers

How are employees with families / guardians able to cope with children being home schooled while fulfilling their work requirements?

How are single parents / guardians accommodated, regarding work, if childcare provisions are not available due to a total lockdown situation?

What measures can you implement to ensure caregivers are considered and accommodated?

Do you have family friendly policies and are they suitable and sufficient for pandemic situations?

6.4 Work/Life Balance

Sometimes switching off at the end of the day is more difficult due to changes in working hours. What can the organisation do to help?

6.5 Anxiety and Depression

Anxiety and depression may increase during a pandemic and unfortunately access to counselling and support may decrease due to a demand in services. What can your organisation do to prepare for such eventualities?

How will line managers be able to spot the signs of anxiety, depression as well as other mental health illnesses while working remotely? How can your organisation help them?

6.6 Physical Health and Nutrition

The ability to physically exercise may be restricted, and diet and nutrition may decline as employees could decide to choose less health food options. Both of which can impact on mental health. What can your organisation do to help employees during this time?

6.7 Bereavement

During pandemics sadly employees or loved one's may die. What support is these for employees in such a situation?

6.8 Returning to the Workplace

It is vital to prepare for reintroducing your employees back to the office/worksite.

These are some steps to consider.

- Support and upskilling of line managers.
- Support for mental health first aiders/ champions.
- Support employees when returning to the workplace, consider using the Wellbeing Discussion Tool, *appendix 4*, to help facilitate conversation between the line manager and the employee;
- Employee surveys -
 - For those working from home it will help you understand what is working well and what is not working well.
 - For those returning to the physical workplace it will help you understand any anxiety or concerns your employees may have and allow you to prepare accordingly.
- Phased returns to the physical workplace. Include information such as the risk assessment controls; who needs to return and the numbers; what the safe working arrangements are; what the work environment will look like; where and from whom to get additional PPE, if needed; signs and symptoms to report; who to report concerns to and how to escalate; frequency of check-in's and method of communication with line management.

Available Resources

There are multiple resources available to support organisations and workers when trying to improve mental health and wellbeing in their workforce. Below is a list of resources which may be of assistance. A full list of organisations and websites can be found in *appendix 10*.

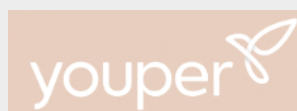
Mental Health Programmes and Training Providers:

- MHFA England – www.mhfaengland.org
- MHFA Wales - <https://mhfawales.org/>
- Mates in Mind - <https://www.matesinmind.org/>
- MIND – Mental Health Awareness Course and E-Learning
www.mind.org.uk/workplace/training-consultancy
- Sheilds NVQ level 2 Award MHFA – www.sheilds.org
- GBS Corporate ½ day course – www.GBScorporate.com
- Luminate - Creating awareness training - www.wearelumintae.co/service/mental-health-awareness-training
- IHASCO – Mental Health Awareness Course – www.ihasco.co.uk
- Rethink – Mental Health Awareness Course – www.rethink.org

Phone Applications (APPS)



Calm



Youper



Moodpath



Construction Industry Helpline

Bibliography

- Mental Health First Aid Wales
- Mental Health First Aid England
- Health and Safety Executive
- Network Rail Standards
- RSSB – Developing Health and Wellbeing Business Cases
- RSSB – Occupational Health The Wise Buyer
- RSSB - Cost Benefit Analysis Tool
- RSSB – Commissioning Mental Health Services in Rail
- RSSB - Guidance for responding to potentially traumatic incidents in rail
- RSSB – Promoting good mental health line managers resource

Appendices

- Appendix 1 - RSSB Cost Benefit Analysis Support Tool
- Appendix 2 - RSSB - Promoting Good Mental Health Line Managers Resource
- Appendix 3 - Wales & Western Managers Supporting Mental Health Delegate Guide
- Appendix 4 - Wales and Western Wellbeing Discussion Tool 2020
- Appendix 5 - Network Rail Traumatic Incident Management Standard
- Appendix 6 - Network Rail Trauma Screening Questionnaire
- Appendix 7 - RSSB Guidance for responding to potentially traumatic incidents in rail
- Appendix 8 - RSSB Trauma Management Toolbox
- Appendix 9 - Network Rail Stress Risk Assessment Form - NR_L2_OHS_053_F01
- Appendix 10 – Useful Websites