



Northern Ireland
Assembly

SECTION 11.03 MENTAL HEALTH

Introduction

1. The Northern Ireland Assembly Commission (the Commission) is committed to supporting and protecting the mental health of its staff.
2. The Commission is committed to providing a safe and healthy environment in which equality of opportunity is afforded to all staff and all staff are treated fairly and with dignity and respect. The Commission aims to support staff as far as reasonably practicable to achieve and maintain a positive state of mental health.

Background

3. Mental illness is a major public health issue in Northern Ireland and is the single largest cause of ill health and disability. The term 'mental health' describes a type of emotional resilience which enables people to enjoy life and cope with the challenges that life brings. Mental ill health is recognised as a psychological condition however, there are a lot of factors which can exacerbate a mental health condition.
4. Understanding and addressing the factors which can affect mental wellbeing is beneficial for both staff and the Commission. The Commission will not discriminate against those with mental ill health and will encourage their career progression and development. Good mental health is regarded by the Commission, as being as essential to a person's wellbeing as their physical health.

Definition

5. Mental health concerns a state of positive wellbeing with respect to how a person feels, and how they are able to cope with how they feel. The World Health Organisation (WHO) defines 'mental health' as:

'A state of wellbeing in which the individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her own community'.

Scope

6. The provisions of this policy apply to all Commission staff and should be read in conjunction with the accompanying guidance and relevant policies:

- Managing Attendance;
- Special Leave;
- Staff Hours at Work;
- Flexible Working & Partial Retirement;
- Managing Disability in the Workplace; and
- Line manager's guide – Supporting staff with mental ill health.

7. Key legislation which underpins the approach to mental health in the workplace is:

- The Disability Discrimination Act (DDA) 1995, which makes it unlawful to discriminate against disabled persons in connection with employment, recruitment and in the provision of goods, facilities and services. The DDA defines a disability as “a physical or mental impairment which has a substantial and long-term adverse effect on a person's ability to carry out normal day-to-day activities”. A “mental impairment” can include mental ill health or a learning disability. The DDA also places a duty on employers to make what are usually called “reasonable adjustments” to prevent substantial disadvantage being caused to disabled persons by workplace features or practices.
- The Northern Ireland Act 1998, which requires the Commission to have due regard to the need to promote equality of opportunity between, among others, persons with a disability and persons without.
- The Health and Safety at Work (NI) Order 1978 and the Management of Health and Safety at Work Regulations (NI) 1992: under these regulations it is the employer's duty to ensure as far as reasonably practicable the health, safety and welfare of employees, including putting in place effective measures for planning, organisation and control of occupational hazards. These regulations apply equally to persons with a disability and persons without, but may of particular relevance to persons with a disability.

Aims and objectives

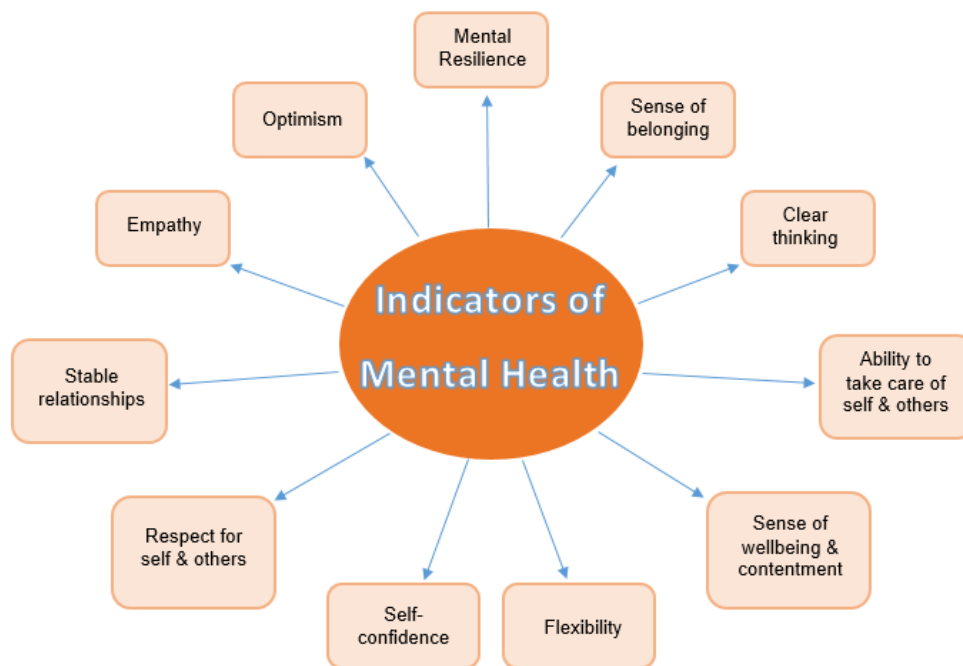
8. The aim of this policy is to:

- Create a workplace environment that promotes good mental health and wellbeing for all staff and provide support and/or assistance to staff suffering or affected by mental ill health.

9. Objectives:

- To address factors that may negatively affect mental health;
- To provide guidance to line managers to support staff with mental ill health;
- To develop an organisational culture which supports positive mental health;
- To reduce discrimination and stigma by increasing awareness and understanding; and
- To give staff information on and increase their awareness of maintaining and improving their mental health.

10. Indicators of good mental health:



Roles and responsibilities

11. Individual:

- Protect your own health and wellbeing;
- Attend training and awareness courses on mental wellbeing; and
- Treat their colleagues with dignity and respect and to help create and maintain a positive working environment.

12. Line manager:

- Assist and support staff experiencing mental ill health, using the accompanying guidance for managers;
- Review job roles regularly to ensure that workloads are appropriate and manageable, and that staff have a clear understanding of their responsibilities and are able to exercise an appropriate level of control over their work;
- Ensure good two-way communication between you and your team, to create a respectful and positive workplace for all;
- Monitor working hours and overtime (if grade applicable) to ensure that staff are not overworked, and monitor annual leave to ensure staff are taking their full entitlement;
- Ensure staff are provided with development opportunities; and
- Contact Human Resources Office for advice if necessary.

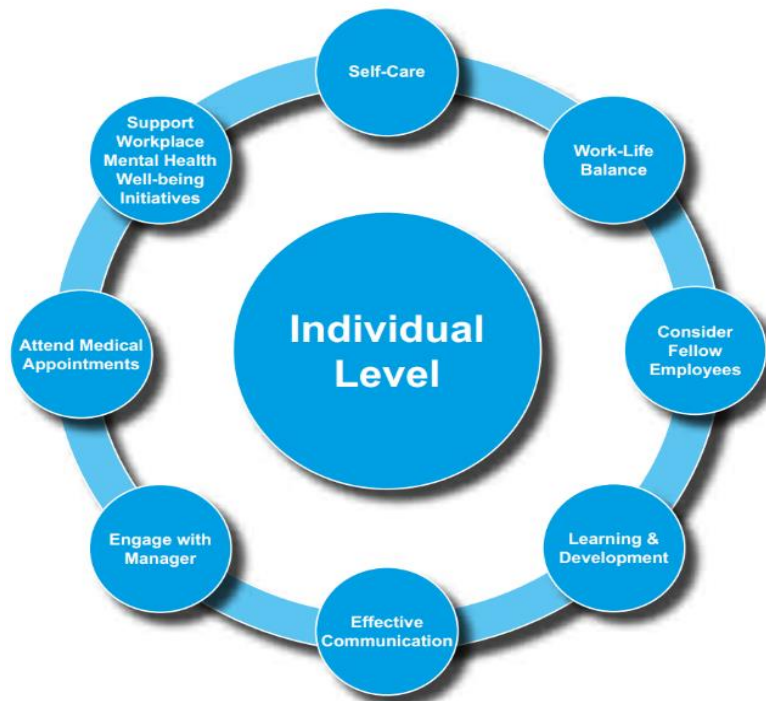
13. Human Resources Office:

- Monitor potential indicators of mental ill health, for example patterns of work, absence levels and reasons, staff turnover, grievances/disciplinary and exit interviews and take action to address any issues;
- Provide advice and support to staff and managers in relation to this policy;

- Monitor and report on levels of sickness absence which relate to mental health conditions; and
- Work with Learning and Development to organise training and awareness courses on mental wellbeing.

Create a protective workplace environment

14. If you feel that working conditions, or other workplace factors, are contributing to your mental ill health, you should raise it in the first instance with your line manager who will seek to address your concerns. If you feel that your relationship with your line manager is contributing to the problem, you can speak to another person in the management chain or contact a manager from Human Resources Office.
15. There are a number of steps that you can take and resources available within the workplace to support your mental health as the diagram below shows:



16. Looking after your mental health:

- Recognise that you have a responsibility to protect your own mental health by building your personal resources and individual resilience - take action to protect against mental health problems;
- Take care of your general health through exercise, eating a healthy diet, engaging in relaxing activities and not smoking or abusing alcohol, prescription medicine or illegal drugs;
- Maintain a healthy balance between work and other aspects of your life by engaging in self-care initiatives (See the 'Self-Care' Hints and Tips box in paragraph 15 below) and social engagement with family and friends;
- Ask for help with your workload if you perceive it to be excessive or very difficult;

- Avail of learning and development opportunities designed to enhance your ability to undertake your role; and
- Avail of any mental health initiatives arranged to support your mental health.

17. **Be respectful to colleagues:**

- Be considerate in your dealings with colleagues as well as with stakeholders, customers and the public;
- Value differences in others and the contribution each individual can make;
- Do not disclose personal information that has been shared by a work colleague unless you are concerned that the work colleague is a threat to him/herself or could harm others;
- Provide support to work colleagues, where possible, to help them cope with mental health issues when they arise; and
- Be mindful when talking about mental health problems and don't use negative terms.

18. **Self-care hints and tips:**

Healthy diet - this is important for both physical and mental health. Be balanced in what you eat and drink.

Regular exercise - being active can help reduce stress. Any amount of physical activity will have a positive effect on your mood and boost your energy levels.

Stress - being aware of the signs and symptoms of stress in your body and mind is the first step to finding ways to manage it.

Sleep - a good night's rest enables the body and mind to refresh and renew itself. Try to develop good sleeping habits and engage in techniques to aid relaxation.

Relaxation - give yourself permission to unwind. Listening to music, practicing yoga and/or meditation, massage and particular breathing techniques can all be beneficial.

Have fun – it is important, at least every once in a while, to do something that you enjoy and that is just for fun and for no other reason.

Time management - endeavour to strike a balance between the time you invest in your job, family, friends, hobbies, yourself, etc. Allow time for your individual needs.

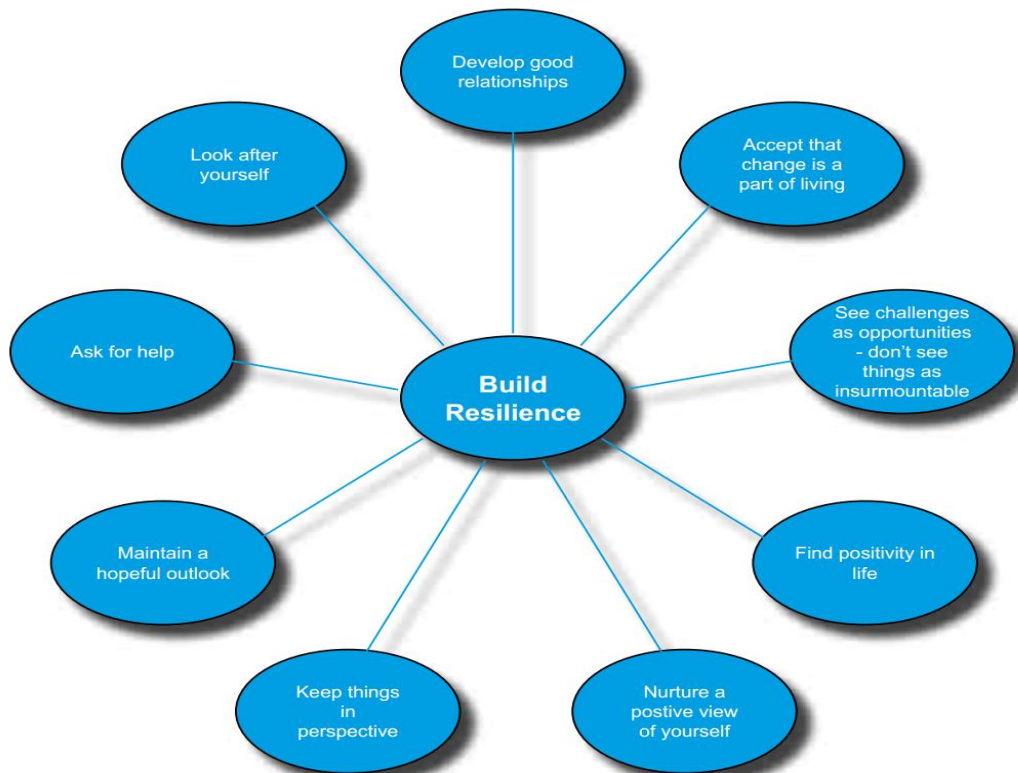
Positive thinking - this can be easier said than done, but try not dwell on the negatives of a situation. You have coped with difficulties before and will do so again.

Change - in so far as is possible, embrace change. If you can be open to it, change is a lot less likely to provoke stress and anxiety and it can bring many benefits.

Ask for help - to avoid feeling overwhelmed, enlist the help of others. Seek out resources and potential sources of support.

Building Resilience

19. Building resilience does not prevent difficult or stressful events occurring. It helps us to respond to life events and recover more quickly from the impact they can have on us.
20. Resilience is the process of adapting well in the face of adversity, trauma, tragedy, threats or significant sources of stress – such as family and relationship problems, serious health problems, or workplace and financial stressors. Resilience is not a trait that people either have or do not have. It involves behaviours, thoughts and actions that anyone can learn and develop.



Common Mental Health Illnesses

21. Below is a short description of some common mental health illnesses that you may come across in the workplace:

Depression

22. The term 'depression' is used to describe a range of moods, ranging from low spirits to more severe mood problems that interfere with everyday life. Symptoms may include a loss of interest and pleasure, excessive feelings of worthlessness and guilt, hopelessness, morbid and suicidal thoughts, and weight loss or weight gain. These core symptoms are:

- Low mood;
- Fatigue or lack of energy; and
- Lack of interest or enjoyment in life.

Anxiety

23. Anxiety is a normal response to threat or danger and part of the usual human experience, but it can lead to mental ill health if the response is exaggerated, lasts more than three weeks and interferes with daily life. Anxiety is characterised by worry and agitation, often accompanied by physical symptoms such as rapid breathing and a fast heartbeat or hot and cold sweats and problems sleeping. 'Stress' is not considered a mental health condition in its own right, but long-term stress may be associated with anxiety or depression.
24. Post-traumatic stress disorder (PTSD) is anxiety disorder caused by very stressful, frightening or distressing events. Someone with PTSD often relives the traumatic event through nightmares and flashbacks, and may experience feelings of isolation, irritability and guilt.

Postnatal Depression

25. Postnatal depression, also known as post-partum depression, is believed to affect 1 in every 10 women within a year of giving birth. Post-natal depression is not the same as the 'baby blues' which are very common, but last only a few days.

Bipolar disorder

26. Bipolar disorder, formerly known as manic depression, is associated with severe mood changes that fluctuate from elation, over activity and sometimes psychosis (together known as mania or hypomania) to a lowering of mood and decreased energy and activity (depression). It is diagnosed after at least two episodes in which a person's mood and activity levels are significantly disturbed, including on some occasions mania or hypomania and, on others, depression. A person usually recovers completely between episodes.
27. During a phase of 'mania', people may exhibit grandiose ideas (an inflated belief in their own power, knowledge or relationship to important people or deities), an inflated sense of self-esteem, a reduced need for sleep and impaired concentration and judgement.

Schizophrenia

28. The diagnosis of schizophrenia refers to a group of symptoms, typically the presence of hallucinations, delusions, disordered thought, and problems with feelings, behaviour, motivation and speech. When they occur together they represent a severe mental illness.
29. After a first episode, approximately 25% of people with schizophrenia make a full recovery and experience no further episodes. Between 10 and 15% will experience severe long-term difficulties and the remainder will experience recurrent acute episodes with periods of remission or with only residual symptoms in between.

Individuals experiencing mental ill health

30. Individual staff play a key role in caring for their own mental health and have a responsibility to contribute to a positive ethos of mental health in the workplace.
31. If you are experiencing mental ill health, you should seek help at the earliest stage possible. Help can be found from the following:

- Your line manager
- Human Resources Office
- Your TUS representative
- [Assembly's Mental Wellbeing First Aider](#)
- Employee Assistance Programme (Inspire Workplaces) provides free independent and confidential counselling, advice and support for you for any personal or work-related difficulty. You can call anytime (24/7, 365 days a year).

Online: [Inspire Workplace Services](#)

Email: workandstudy@inspirewellbeing.org

Helpline: 0800 389 5362

- Welfare Support Service provides an independent and confidential service to you to help you cope with and work through personal and work related issues which may affect your ability to work effectively. Welfare visits can be arranged in Royston House, Upper Queen Street, Belfast, BT1 6FD, at work or at home. **Confidential Mailbox:** welfare@nics.gov.uk
Helpline: 028 9054 7427 (Network ext.: 47427)
- [Any other source listed at Appendix A](#)

Mediation

32. Relationship difficulties within the workplace may be a cause of poor mental health. Mediation is a way of solving problems so that you can come to a workable agreement with someone else. The advantage of mediation is that you work out the solution to the problem; it is not imposed.
33. The Assembly Secretariat has staff trained in mediation skills who will help you work through your concerns, will not take sides or make judgements, and will not tell you what to do. Their role is to help those involved come to an agreement.
34. The main aim of the mediation process is to look forward to a future settlement rather than be concerned with a retrospective apportionment of blame. Mediation is problem solving, it encourages accountability and achieves effective and workable outcomes. Mediation can be a helpful and effective approach where there is room for maneuver and accommodation.
35. The principles of mediation are as follows:
 - Both parties are committed to using mediation;
 - Any agreements have to be acceptable to the parties concerned;
 - The parties agree a resolution is needed;
 - The content of the mediation is confidential;

- The mediator is neutral and impartial and has to be seen as such throughout the proceedings;
- Mediation is without prejudice; and
- The parties have the authority to settle.

How can I use Mediation?

36. If you wish to use mediation to resolve relationship issues in the workplace which may be affecting your mental health, you should contact the Equal Opportunities Officer who will explain how the process works and establish if the other party(ies) involved are also prepared to consider this option.

Wellness Recovery Action Plan (WRAP)

37. You may find it useful to draw up a Wellness Recovery Action Plan (WRAP) which explains how you wish to be treated if you become unwell at work. The WRAP can include information on signs that indicate you are becoming unwell, who should be contacted or provided with information (perhaps a relative or GP), what sort of support would be helpful and what is not. If a WRAP is developed, it is important to put it into practice if you become unwell. The information contained in the WRAP will be treated confidentially and will only be shared with your consent. For assistance in creating a WRAP, please contact Human Resources Office.

Requesting temporary changes to work

38. If you feel that you require some temporary changes at work due to mental ill health, you should arrange to meet with your line manager to discuss this and if it is possible for your line manager to accommodate your request locally without further advice, the temporary changes can be put in place. Examples of temporary changes may be a change to your start / finish time using the flexi time system or a review of your workload to help you manage this.

Requesting a permanent change to work - Reasonable Adjustment

39. If you think you require some form of adjustment at work because of a disability due to mental ill health, you should arrange to meet with your line manager to discuss this and if it is possible for your line manager to accommodate locally without further advice, adjustments can be put in place. Human Resources Office can attend this meeting at your request or your line manager's request.

OHS5 Disability Assessment

40. In the event that medical advice is required, you can complete Parts 1-4 of the application form [OHS5](#) and submit this to your line manager. Please ensure that you provide as much information as possible. You should also clearly specify what adjustment you are seeking.
41. Your line manager will then discuss your application with you. It may be possible that your line manager can accommodate adjustments without additional medical advice. If so, your line manager will explain this in Part 5 and return the application to you. A copy of the form should be forwarded to Human Resources Office for inclusion in your personal file.
42. If your line manager requires OHS to carry out an assessment before they can decide whether they can or cannot accommodate an adjustment, they will complete Part 5 and return to you so

that you can obtain a medical report at your own expense from your GP or specialist. You should then forward your application and medical report to Human Resources Office, who will forward it to OHS.

43. Once OHS return your application to Human Resources Office, Human Resources Office will contact you and your line manager and a final decision about whether adjustment is reasonable and can be accommodated will be made by the organisation.

44. Any proposed adjustment will be discussed and agreed with you before it is made.

45. Human Resources Office is available to provide advice on any aspect of this guidance.

Managing Attendance

46. All absences will be managed in accordance with the Assembly's [Managing Attendance policy](#).

47. It is important that regular [contact](#) between you and your line manager is maintained throughout the absence, particularly where this is long term. This is a shared responsibility between you and your line manager. Once you have been absent for 2 weeks, your line manager should contact you to discuss and agree the regularity and form of contact (normally this would be every two weeks), however it may depend on the nature of the absence and your wishes. This contact should be by the most appropriate means, including telephone, e-mail, letter or home visits and you should provide your line manager with your contact details. The purpose of this contact is to enable your line manager to:

- Check on how you are;
- Assess any support they can provide;
- Discuss with you a likely return to work date;
- Get information to help them plan to cover your absence;
- Ensure that you understand your responsibilities under the Managing Attendance policy; and
- Keep you abreast of developments at work.

When a member of staff is ready to return

48. When you are ready to return to work, your line manager will engage with you to facilitate a smooth re-entry to the workplace, taking into consideration any advice from OHS and/or Welfare Support Services.

Return to work following an absence

49. Your line manager will conduct a [Return to Work](#) meeting following each absence to welcome you back to work and update you on any changes within the team or organisation. This meeting should be held in private and in a sympathetic and helpful manner and provides an opportunity for your line manager to:

- Establish that you are well and fit to return to work;

- Acknowledge your absence and confirm that your contribution has been missed;
- Determine whether there is any underlying medical condition or other contributory factor to your absence, including work-related factors;
- Review your attendance record and highlight if your absences are approaching levels which give concern under the formal inefficiency procedures and will make you aware of the implications of unsatisfactory attendance;
- Consider what support is appropriate including any reasonable adjustments; and
- Agree a return to work plan if appropriate.

Review and monitoring

50. The Human Resources Office will be responsible for reviewing the Mental Health policy and monitoring how effectively the policy meets its aims and objectives.

Further information

51. [Line Manager's Guide – Supporting Staff with Mental Ill Health](#)
52. [Wellness Recovery Action Plan](#)
53. [Managing Attendance policy](#)
54. [Managing Disability in the Workplace](#)