SENSE MENTAL HEALTH

How Employers, Managers, HR professionals and others can identify and manage Mental Health issues in the workplace.
Sense Mental Health - How Employers, Managers, HR professionals and others can identify and manage mental health issues in the workplace.

Organizational Solutions Inc. 2011 / 2012

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LET’S TALK ABOUT MENTAL HEALTH……………… 4
There are more constant and immediate demands on our attention, the clock always
seems to be ticking, responsibilities are increasing and, in a consumer driven western
culture, there is always pressure to succeed, more things to buy, higher bills to afford.

THE TROUBLE WITH TENSION………………….9
Employment is not just about the job we go to, it is increasingly the community we belong
to. Like the best communities the best workplaces thrive as productive environments that
promote shared values, understand teamwork and support positive social interactions,
reward, motivate and celebrate productive employees who enjoy their jobs.

DEALING WITH DEPRESSION………………. 15
Depression is increasingly regarded as one of the most prevalent conditions causing
psychological disability.

WHAT ELSE EMPLOYERS SHOULD KNOW?……………….. 21
While tension and depression, and related illnesses, are the two most common forms of
psychological illness in a workplace there are other issues that employers and senior
managers may have experienced and should understand strategies to address.

HOW ORGANIZATIONAL SOLUTIONS INC. CAN HELP………………23
Organizational Solutions Inc. has extensive experience managing psychological illnesses
and has specialist expertise and insight to assist with building and maintaining a
physically and psychologically healthy work environment.

FIVE CHECKLISTS FOR EMPLOYERS AND EMPLOYEES - WORK TOWARDS A
MENTALLY HEALTHY LIFE AND WORKPLACE……… 25
These following five checklists have the aim of making your workplace a safe and healthy
environment for both managers and employees, improving productivity and protecting
your bottom line.

CONCLUSION………………… 29
The study of mental health is constantly changing and advances are being continually
made, both in understanding the human brain and psychology.

BIBLIOGRAPHY…………….. 30
Let’s talk about Mental Health

Imagine a tropical island beach. Crystal clear blue / green waves are splashing gently against perfect soft white sand. The sun is hot, the air clean, crisp and fresh. Palm trees hiss in a gentle breeze as the musical chirping of a tropical bird sings in the distance. Breathe deeply.

Now there’s a desk on the beach, the desk is cluttered, the shrill phone is ringing. It’s about the report you had to send yesterday, you haven’t done it yet so you don’t answer it. Walls rise up around you.

The computer screen shows your e-mails, one hundred and two messages need to be opened, most of them need replies. A low roof goes over your head. Your calendar pings with another overdue task.

You have an afternoon meeting in an hour so you can’t get through it all now. You haven’t had time to prepare for the meeting. Your work colleague walks by, annoyed because they’ve had to take on more responsibility for you, they ask if and when the work you had due will be done. The room is too hot.

There’s a house you own behind the beach, the mortgage is due next week. Your partner just lost their job so you don’t know how you’re going to be able to make the payment. Can you afford to keep the car? Your youngest child just got interested in hockey and wants the gear, the oldest wants to go on a school trip to Europe. Your savings are almost gone.

Last night your mother phoned to say your father has to go to the doctor later in the week, she thinks it’s serious. Your cell-phone buzzes, it’s a text from your depressed partner with scathing criticism about how little time you have for your family these days. You click your mouse, click it again, your computer screen has frozen.

This hypothetical situation visualizes a peaceful scene being intruded upon by work and life variables to induce a sense of what most of us already know, life and work can get hectic sometimes, even overwhelming. It is important to have strategies to ensure work is not the disposable variable. When it comes to mental health, life and work are what make up the collective consciousness of your employees.

The new millennium and the twenty-first century has connected civilization with an efficiency, ease and speed unprecedented in human history. Today, we have an immense library of knowledge at our fingertips, incredible inventions and devices that help us work and play, entertain us and put us in touch with each other, anywhere in the world, in ways previous generations could only have dreamed about.
The power of social communication and technological advancement can come at a price though. Many workers, especially office workers, are finding that the connectivity of today’s technologies are increasingly blurring the lines between work and home in ways not experienced before.

There are constant and immediate demands requiring our attention, the clock always seems to be ticking, responsibilities are increasing and, in a consumer driven western culture, there is always pressure to succeed, more things to buy, higher bills to afford.

“Rapid developments in technology and telecommunications have resulted in a temporal and spatial blurring of when, where and how workers are expected to perform their jobs.

As a consequence many white-collar workers take work home. The reasons for which vary from real-time communications with business partners or simply to work often unpaid overtime to complete the demands of the job which are in excess of the work week. ‘Overspill work or overtime performed at home in addition to full hours worked is common among salaried professionals (Pyöriä, 2003; Sullivan 2003).’"

Add to that uncertain global economic climates, international threats, pernicious scare stories in the media, increased relationship and family pressures and much more and it is probably not surprising, as all recent statistics show, that mental health issues (such as tensity / stress and depression) are on the rise.

Canadian businesses can no longer afford to ignore the personal and financial cost of how mental health issues affect their employees.

A recent study by the World Health Organization (WHO), stated that depression and associated mental health issues will rank second only to heart disease as the leading cause of disability worldwide by the year 2020.

Adding to that statistic the Global Business and Economic Round Table on Addiction and Mental Health estimates that the Canadian economy looses an estimated $33 billion dollars each year through lost productivity caused by mental health problems. This is equivalent to employing the entire population of Saskatchewan on an average wage for a full year.

“The Economic Round Table on Addiction and Mental Health estimates that the Canadian economy looses an estimated $33 billion dollars each year through lost productivity caused by Mental Health Problems. (2006)"
In Canada, almost half of all disability claims are now related to mental health. At Organizational Solutions Inc, as disability management claim specialists, we find mental health issues are second only to musculoskeletal injuries as the major contributing factor to time away from work.

**HOW DO YOU KNOW IF YOUR EMPLOYEE HAS A MENTAL HEALTH ISSUE?**

Is it your responsibility or role as a senior member of staff in your business to take action on concerns or observations about people you manage?

This is where things begin to get complicated. Because mental health is extremely subjective and individual in nature you will rarely have an employee phone in sick to work with the reason that they are feeling “overwhelmed,” “very down today” or “I just can’t be bothered coming in.”

Social demands in the workplace expect, within reason, that our negative emotions are something we can and should keep controlled, problems should be set aside for a work day or properly rationalized in their own time. After all most people would be expected to act “professional” in the workplace even if a long term partner had recently walked out of their relationship, debt worries at home were becoming increasingly overwhelming or a favorite pet had just passed away. For the most part this is actually the case as social norms are respected and the persona presented to the world often disguises what is really going on inside a person’s thoughts.

There are also many reasons why an employer may not even know an employee has a mental health issue or a personal history of illness.

For example, approximately 54% of a 1000 respondents to a survey conducted by the Conference Board of Canada (2011) worried that they would be passed over for a promotion if they made their bosses aware of their mental health issues. 38% thought that any disclosure would jeopardize any leaps ahead at work.

Tellingly, the same report also identified the huge disconnect between how well managers feel mental health issues are addressed versus the way employees see it. 82% of managers and executives said their workplaces promoted mental health, but only 30% of their employees agreed.

This publication aims to discuss common mental health complaints and conditions, such as tension and depression, and their symptoms. It should be clearly pointed out though that Employers, Managers and Supervisors should never attempt to diagnose any type of illness in an employee or ever attempt to make assumptions about the health status of an ill employee.

This is not their responsibility and there could be serious consequences to making the wrong call or showing improper judgment in lieu of all the facts. Responsibility for diagnosis or treatment always rests with the physician or other similarly qualified health care professionals.

A general understanding of common mental health problems though could help senior members of staff provide employees with assistance where necessary and accommodation if required, contributing to the overall health and well-being of a productive organization.

Employers should also be aware if adjustable workplace stressors, conditions or relationships are affecting their employees’ ability to function as productively as their
role and job demands. Overall workplace culture can also have a profound affect on the tensity, satisfaction or dissatisfaction of staff and their commitment to attendance and productive effort.

Mental illness can come in many degrees of severity and affect individuals in different ways. It can range from mild unbalance to more serious ailments / conditions.

According to the World Health Organization five of the ten leading causes of disability worldwide are mental conditions, they are: Major Depression, Schizophrenia, Bipolar Disorder, Alcohol or Substance Abuse and Obsessive Compulsive Disorder.

When dealing with mental health conditions, the right approach is important for employers.

It is important as an employer or manager when meeting with an affected employee that you:

1. Do not probe or try to diagnose an illness.
2. Do not medicalize performance issues or expected emotional responses.
3. Do raise the possibility of providing accommodations, if needed.
4. Ensure a prompt and appropriate intervention to health care
5. Provide access and adequate pointers to an Employee Assistance Program or a referral to community services.
6. Assure confidentiality with the employee, the EAP provider and all other personnel.
7. Set a time to meet to review the employee's performance.

Some additional facts:

Persons suffering mental health conditions use the health care system 3-5 times more frequently than others.

Currently stress and mental health complaints represent half of all visits to family Physicians in Ontario.

A report by Bill Wilkerson, co-founder and Chief Executive of the Global Business and Economic Roundtable on Addiction and Mental Health revealed that those who suffer from a mental illness are 300%-400% more likely to take time off work. (2004) Definitions of mental health conditions continue to evolve and the media plays a part in the definition of 'stress'.

The European Agency for Safety and Health at Work (EASHW) has identified 10 emerging psycho-social risk factors exacerbating mental health problems in workplaces:

1. Precarious contracts in the context of unstable labour markets.
2. Increased worker vulnerability due to globalization.
3. New forms of Employment contracts.
4. Feelings of job insecurity.
5. Aging workforce issues.
6. Long working hours.
7. Work intensification.
8. Lean production.
9. High emotional demands at work.
Here are some reasons why you may not know about an employee’s mental health issue:

1. Many people assume a stigma could be attached to mental illness and therefore are hesitant to disclose a mental health condition for fear of how their managers, co-workers etc. may react to them.

2. Some workers believe that mental illness could lead to discrimination or might limit their opportunity for advancement.

3. Many people do not know who to talk to, or what exactly they could or should say.

4. Employees may not know whether or not their workplace has an accommodation policy for mental health problems or how the policy might help them.

5. Sometimes people may not even be aware they have a condition, or see symptoms as something that may pass soon, or something to be dealt with on their own.

People are more likely to disclose if:

1. There is absolute confidence in privacy and confidentiality.

2. Their organization has a proper process to accommodate them (support programs, solutions to their concerns.)

3. There are clear policies communicated to reassure all employees that harassment, discrimination or other negative reactions will not be tolerated at any level.

The purpose of this publication is to give senior managers more of an understanding of the impact of mental illness in the workplace, and what can be done about it.
The Trouble with Tensity

WHY TENSITY?

In this publication we will be using the word ‘tensity’ as an alternate descriptive word for ‘Stress’. Tensity describes the act of being stretched or strained, being wound up or feeling too much on edge.

Stress can arrive into a written publication with bags of unhelpful connotations. Depictions in the media and preconceived ideas about what stress is distort the word beyond what it’s actual descriptive capacity should be.

Stress can be a motivator, good stress is vital in most cases to a productive life, especially in work, enabling deadlines to be met and solid momentum forward to be maintained. To much stress though can be negative, impacting on mental health and physical health. And it is a highly subjective term, stress and stressors can be as individual and preconceived as the person, day, situation or mood dictates.

Tensity throughout this publication describes the negative feeling of what most people would pessimistically describe as being ‘stressed out!’, the implication being that are stressors are consistently and negatively affecting an individual.

In this section, and throughout this paper, each term is used where its descriptive presence is deemed to be most appropriate.

LIFE AND WORK

Employment is not just about the job we go to, it is increasingly the community we belong to. Like the best communities the best workplaces thrive as productive environments that promote shared values, understand teamwork and support positive social interactions, reward, motivate and celebrate productive employees who enjoy their jobs.

Employees who have access to a wider network of support, interaction, contribution and share in the success of the company as a whole are less likely to experience negative psychological symptoms. When individual concerns around mental health do arise employers and employees have a strong incentive to understand these matters as they can have a substantial impact on the individual employee and sometimes a knock on effect on the wider workforce.

Feedback and surveys show that many employers lack the knowledge, comfort levels and tools to deal with mental illness in the workplace and research states that currently there is very little guidance available to help workplaces sustain or restore mental health if and when it becomes a problem.

A good starting point is tensity. Although this is not an overtly serious condition (such as depression,
THE NEGATIVE SIDE OF STRESS...

Stress comes in many variations and a degree of ‘good’ stress is needed for most people to live useful, productive lives. There are though three broad types of negative documented stress and tension:

1. **Acute stress**
   Short term or incidental stress (example, a rushed deadline, a pending examination or a car accident,) generally the stress goes away when the stressor is removed or abates. Symptoms of this type of tension include a racing heartbeat, heightened awareness of surroundings and sweating. Acute tension is normal biological response to a stressor in the environment, our “Fight or flight” instinct.

2. **Episodic Acute Stress**
   Associated with the “Chronic Worrier” or the individual who seems always to be under pressure. Symptoms last longer than acute stress and may include tension, headaches or migraines, high blood pressure, chest pain or heart disease.

3. **Chronic Stress**
   Caused by a sense of being trapped in a life situation (E.g. a hated job or unhappy relationship) Chronic stress may gradually suppress the immune system resulting in more colds, infections or constant fatigue. It can eventually result in a sense of hopelessness or depression.

“**How people react to stressors (incidences, people, situations or tasks that cause the stress) is highly individual.**

**TAKING ACTION.**

One of the purposes of this paper is to raise awareness and inspire action concerning the very real risks to health and safety posed by certain types of tension in the workplace.

So just how serious is it? A degree of stress, as most people will admit, is a normal part of most peoples’ lives and many jobs can induce feelings of tension from time to time, e.g. when deadlines or targets need to be met.

Stress can be ‘positive’ or ‘negative’ and how people react to stressors (incidences, people, situations or tasks that cause the stress) is highly individual.

Something that may act a stressor one day may not be the same stressor on the next, for instance, getting stuck in a traffic jam might make us feel stressed one day (for example, you didn’t sleep properly the night before, you had a bad morning, you’re late etc.) but not on the next.
Also personality and/or general contentment or dissatisfaction with life and work can have a profound effect on how different individuals deal with the same potential stressors. In the workplace a high percentage of workers cite too many demands and too many hours as the main trigger of workplace stress. Additional reasons include poor interpersonal relationships and perceived risk of accident or injury.

While occasional bouts of tension are not likely to have lasting adverse health effects, regular or constant tension is more likely to have negative health implications. More recent research shows that excessive negative tension can contribute to or even directly cause serious health problems among employees.

Generally, excessive tension in employees is said to be produced when work is organized and designed in ways that ignore or devalue certain basic human needs, particularly those that are related to our mental or emotional health and well-being. For example, research over the past fifteen years (based on Karasek’s Job Demand-Control Model (1979)) shows that some stressors in the workplace are worse than others, but can be categorized into several broad areas:

1. Jobs that are highly demanding because they impose constant imposed deadlines over prolonged periods and provide the individual with very little control over the day-to-day organization of their work.

These are known as high demand – low control jobs. They can lead to significantly higher rates of anxiety, depression and demoralization. They can also lead to significantly higher alcohol, prescription, and over-the-counter drug use and a higher susceptibility to infectious diseases.

2. Jobs that require high physical or mental effort but offer little reward in the way of compensation, status, financial gain or career enhancements.

These are known as high effort, low reward jobs. These jobs are associated with triple the rate of cardiovascular problems and significantly higher rates of depression, anxiety and conflict related problems.

3. Accumulation of home tension and job tension.

4. A combination of both 1 & 2.

10 FACTORS THAT CAN CONTRIBUTE TO WORKPLACE TENSION.

As an employer or senior manager these following managerial practices have been identified as being likely to precipitate or aggravate an individual’s potential for developing a stress-related condition:

1. Imposing unreasonable demands on subordinates and withholding information important to carrying out their job.
2. Refusing to give employees reasonable discretion over the daily means and methods of their work.
3. Failing to credit or acknowledge the workers’ contributions and achievements.
4. Creating an environment where workers have too much to do all of the time.
5. Maintaining an environment where workers are never sure what is happening around them.
6. Creating an environment where mistrust and office politics are rife.
7. Tolerating or fostering unclear company direction and policies, job ambiguity and unclear expectations.
8. Poor performance and management practices (e.g. bullying or aggressive management).
9. Lack of two way communication.
10. Refusing to deal with workers’ concerns about workload.
Employees in these types of jobs have recorded higher incidences of back pain (up to three times the incidents) and repetitive stress injuries. The risk of death from heart disease doubled in these circumstances.

Other work stressors include the physical environment (such as excessive noise, extreme temperature, poor air quality, etc.) scheduling of work hours, shift work and isolation. Workplaces with characteristics listed above, that are not controlled can deteriorate into toxic workplaces, especially when the workplace falls within the two broad groups listed above, i.e. those that place high demand on productivity and low control over means and methods of work, or require high effort with low reward recognition.

In addition toxic workplaces can be associated with the following problems:

1. Significantly higher rates of anxiety, depression and demoralization.
2. Up to triple the rate of cardiovascular disease.
3. Increased potential for sprains and strains and other workplace injuries, up to triple the rate of incidents of back pain.
4. Increased conflict in the workplace.
5. Significantly higher levels of chemical dependency.
6. Increased turnover / Increased number of grievances.
7. Poor attendance, higher absenteeism and benefit payouts.
8. Lower creativity, efficiency and productivity.
9. Significantly higher rates of infectious diseases and colorectal cancer.
10. Poor outcome for successful return to work after an absence.

(Health Canada, 2000)

There are warning signs for employers and management that an employee may be dealing with higher than normal levels of tensity or possible depression. Remember that it is not a manager’s job to diagnose a worker, but there should be an awareness if some level of concern is emerging. TEN early warning signs include:

1. Consistent late arrivals or frequent absences.
2. Lack of cooperation or general inability to work with others.
3. Decreased productivity.
4. Increased accidents or safety problems.
5. Frequent complaints of tiredness or unexplained pains.
6. Difficulty concentrating, making decisions or remembering things.
7. Making excuses for missed deadlines or poor work, less interest or involvement in one’s work.
8. Working excessive overtime over a prolonged period.
9. Strange or grandiose ideas.
10. Displays of anger or blaming of others.

A person displaying these signs may be having a bad day or week or have personal problems that will resolve themselves. But a pattern of behaviour changes or sudden change in behaviour may indicate that the employee is dealing with an underlying mental health problem that could require attention and support.
HOW TENSIETY AFFECTS EMPLOYEES.

Workplace tensiety with relation to certain personal factors can pose a clear risk to mental health and physical safety.

According to physiological research tensiety that is generated internally or externally can lead to changes in brain chemistry which then affects the body’s ability to defend itself against infections and other diseases.

This is a recent area of health care research and the effects of psychological influences on the physical body are only beginning to be fully understood.

Excessive tensiety can also result in people feeling overtired, having to use medications and feeling distracted so that they are more prone to accidents or errors in judgment.

WHAT EMPLOYERS CAN DO TO REDUCE WORKPLACE TENSIETY.

Rather than trying to eliminate all sources of tensiety and pressure in the workplace, which very few employers would find feasible or viable to do, current research suggests that a level of training in handling tensiety can have a very positive effect for workers.

Not surprisingly people who have had the right training in tensiety management are better at managing daily stressors than people who don’t have any training. Research also shows the greater the number of training hours, the better the skills.

This suggests no matter what our natural reactions are to tensiety, learning tensiety management skills is likely to be beneficial. At present though, research estimates that less than 20% of us have any level of tensiety management training.

TACKLING TENSIETY!

The most recent research suggests that there are at least four broad trainable skill sets or competencies that people can use to manage tensiety:

1. **Source Management:**
   Reducing or eliminating the source of negative stress. Includes practices such as: delegating tasks, organizing your space and scheduling your time well.

2. **Relaxation:**
   Employers can encourage employees to use good relaxation techniques in the day to day schedule of work, such as: encouraging the taking of proper breaks and lunch away from the desk, breathing techniques, stretching exercises or even meditation.

3. **Thought management:**
   Correcting irrational thinking and interpreting events in ways that don’t harm you. Thinking all positive instead of all negative.

4. **Prevention:**
   Planning ahead and conducting your life so that you recognize, control, bypass and avoid excessive stressors.
If morale is a concern there are also workplace factors employers and managers can pay attention to with the goal of reducing the potential for excessive tension among their employees. Ten examples are:

1. Encourage workers to participate in decision making

2. Encourage workers to bring concerns forward and make suggestions to address stressors and follow through on valid concerns for improvement.

3. Improving workers trust in the company and developing a culture of managers who trust workers. Train managers on spotting the early warning signs of a mental illness.

4. Demonstrate fairness in management style and application of policies.

5. Improve managers’ effectiveness in two way communication and people skills.

6. Train and evaluate managers in giving rewards and appreciation appropriately.

7. Institute 360 degree feedback for performance of managers and their employees.

8. Promoting health and wellness: exercise, good nutrition, smoking cessation and other good health practices that are linked with a better ability to deal with tension.

9. Support work / life / family balance with policies and practices, e.g. Flexible work options.

10. Seek and measure employee feedback on perceived stressors and satisfaction regularly and act on the results in consultation with your all team members.

Tension can also be linked to what is sometimes regarded as a more serious cause of disability at home and in the workplace - depression. In the next section we will examine depression and how it can be recognized and managed.
Dealing with Depression

When the Clouds Come In.

Depression is increasingly regarded as one of the most prevalent conditions causing psychological disability.

Depression should not be confused with sadness, most people feel sad or blue from time to time for a short time, especially if something unexpected and negative happens but that “mood” is usually limited to a set period of time. Clinical Depression means that the symptoms associated with depression are so severe and persistent that they interfere with work, relationships, activities of daily living and physical health.

Clinical depression is the greatest source of disability in Canada and the world today. It represents about 14 per cent of all disability in this country, slightly higher than the world average. Depression will rank as second only to heart disease as the leading cause of disability worldwide by the year 2020. (Global Business and Economic Roundtable on Addiction and Mental Health, 2001 & 2010)

This is not an issue firms can avoid, it directly affects management, employee productivity, interpersonal relationships and the bottom line of your organization.

Disability itself represents anywhere from 4 – 12% of payroll costs in Canada; mental health claims (especially depression) have overtaken cardiovascular disease as the fastest growing category of disability costs in Canada (Wilson, Joffe & Wilkerson, 2002).

The average age of onset for depression is 27 years but in 40 per cent of the cases, it is 20. Depression is getting younger.

<table>
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<th>MAJOR DEPRESSIVE SYMPTOMS</th>
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<tr>
<td>1. Depressed mood most of the day</td>
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<td>2. Marked diminished interest or pleasure</td>
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<tr>
<td>3. Significant weight loss or gain</td>
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<tr>
<td>4. Significant decrease or increase of appetite</td>
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<tr>
<td>5. Insomnia or hypersomnia</td>
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<tr>
<td>6. Feeling of restlessness or being slowed down</td>
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<td>7. Fatigue / Loss of energy</td>
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<td>8. Feelings of worthlessness. Excessive or inappropriate guilt</td>
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<tr>
<td>9. Diminished concentration or indecisiveness</td>
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<td>10. Recurrent thoughts of death or suicide</td>
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Ensure the symptoms are not caused by the direct physiological effects of a substance, drug abuse or prescribed medication or a general medical condition or grievous situation in a person’s life, i.e, bereavement.

If these symptoms can be accounted for by grievous situations in a person’s life such as bereavement or excessive tensity, these may not necessarily mean a person is clinically depressed.
THE HIDDEN DISABILITY:

Often as an employer or senior manager you may not even be aware that depression or other mental health problems are affecting an employee. There is a very good reason for this.

In June 2011, the Conference Board of Canada released a report “Building Mentally Healthy Workplaces: Perspectives of Canadian Workers and Front-Line Managers.” The report was based on an extensive survey and interviews with just over a thousand individuals, almost half of whom were front-line managers. 44 percent reported that they where currently or previously had experienced a mental health issue in the workplace (the definition included stress, anxiety, depression, addictions, bipolar disorder, and schizophrenia.)

Not surprisingly employees stated that they would be uncomfortable disclosing a mental health issue in the workplace for fear that it could negatively affect their career opportunities in the organization. This fear was not unfounded, over a quarter of employees who discussed an issue with their employer perceived that the disclosure “negatively affected their career advancement.” (CBC, 2011)

Managers are in a key position to create and sustain a workplace that supports the mental health of their employees, and are in an ideal situation to spot early warning signs and direct employees to appropriate resources for help.

A Conference Board of Canada survey found that despite 80% of managers being comfortable discussing mental health issues with their employees, only 44% had been correctly trained in how to do so.

It also identified the challenge in trust and communication towards employees. Only a quarter of employees in this survey felt their supervisor could manage mental health issues effectively and only 29% felt their direct manager was knowledgeable on the subject.

Some key areas of training for management would be:

1. Recognizing the Warning Signs of Mental Illness
2. Talking with a staff member about his or her mental health, and
3. Meeting legal obligations when it comes to managing employees with mental health issues.

SO, WHAT EXACTLY IS DEPRESSION?:

The Ontario Ministry of Health and Long Term Care states:

“Depressions are among the most common psychological disorders - and the most treatable. An estimated 1 in 4 Canadians has a degree of depression serious enough to need treatment at some time in his or her life.” (Ministry of Health and Long-Term Care, 2002)

It is important to distinguish between mental illness and sadness and grief, which are normal reactions to life’s negative stresses and losses. In these circumstances, usually time heals and mood improves without requiring therapeutic intervention.

Depressive illnesses are different. There is a change in the person - perhaps a loss of interest in food or intimacy with a partner, or waking early in the morning, or not wanting to get out of bed at all. Without treatment the symptoms may stay for months, even years.

Depression may come once, twice or many times in a person’s life. Or it may be chronic, lasting or it may be periodic.
Another definition from a psychologist defines depression as:

“A ‘whole-body’ illness, involving your body, mood, and thoughts. It affects the way you eat and sleep, the way you feel about yourself, and the way you think about things. A depressive disorder is not the same as a passing blue mood. It is not a sign of personal weakness or a condition that can be willed or wished away. People with a depressive illness cannot merely ‘pull themselves together’ and get better. Without treatment, symptoms can last for weeks, months, or years. Appropriate treatment, however, can help most people who suffer from depression.”

EVIDENCE BASED TREATMENT FOR DEPRESSION.

Depending on the nature and severity of the condition, treatment may include:

1. Prescribed medications such as antidepressants, anti-anxiety medications, and / or beta-blockers.
2. Counselling, psychotherapy, or cognitive / behavioural therapy.
3. Education on stress management, relaxation, meditation and other helpful techniques.

In addition, many people with depression find participating in self-help groups, exercise and social interaction to be helpful.

WHAT EMPLOYERS COULD NOTICE.

Detection is the most challenging aspect of depression. As outlined at the beginning of this chapter, detection is probably the most challenging aspect of assisting with and managing a mental health issue in the workplace.

According to the World Health Organization there are four broad areas that can be used to indicate that an employee or a workplace may have issues with mental health problems:

1. **Absenteeism:**
   - Increase in overall sickness absence; particularly short periods of absence.
   - Poor health is often associated with depression, tension or burnout.
   - Physical conditions can include high blood pressure, heart disease, ulcers, sleeping disorders, skin rashes, headache, neck and backache, with a low resistance to infections.

2. **Work Performance:**
   - Reduction in productivity and output
   - Increase in error rates
   - Increased number of accidents
   - Poor decision making
   - Deterioration in planning and loss of control over work.

3. **Staff Member’s Attitude and Behaviour:**
   - Loss of motivation and commitment
   - Burnout
   - Staff working increasingly long hours but for diminishing returns
   - Poor timekeeping, consistently starting late or leaving early
   - Late for meetings
   - Labour turnover (particularly expensive for companies at top levels of management)

4. **Relationships at Work**
   - Tension and conflicts between colleagues
   - Poor relationships with clients.
   - Increase in disciplinary problems.
DEVELOPING A RETURN TO WORK STRATEGY FOR SOMEONE WITH AN ILLNESS SUCH AS DEPRESSION.

Often HR Professionals, managers and return to work practitioners are uncertain of their role and feel helpless in assisting in the return to work of a worker who has been diagnosed with a mental health condition.

It is important to recognize that many of the techniques, processes, and procedures that work with a physical injury may be of assistance when working with an individual who has a mental health problem.

Often role uncertainty and feeling helpless to assist in the return to work of a worker who has been diagnosed with a mental health condition can delay or prevent the timely return to work. At Organizational Solutions Inc., with our extensive experience in Disability Management, we know it is important to recognize many techniques, processes, and procedures can be built into transitional return to work plans that an employee would recognize from a physically or symptomatic illness.

Using expertise and experience, the Disability Management Specialists at Organizational Solutions Inc. work with treatment providers (e.g. attending physicians, psychologists and/or psychiatrists) as the primary, but not the only, source of information regarding the worker’s situation and needs. With permission of the worker, the practitioner may also find family, friends and supervisors useful sources.

QUESTIONS TO CONSIDER IN DEVELOPING A RETURN TO WORK PLAN:

1. Does the mental health disorder have work related triggers?
2. What symptoms or limitations is the individual experiencing?
3. How many symptoms or limitation affect the person and the person’s job performance?
4. What specific job tasks are impacted as a result of these symptoms and limitations?
5. What accommodations are available to reduce or eliminate these barriers in return to work?
6. Are all possible resources being used to determine all possible accommodations?
7. Do supervisory personnel and employees need awareness training and education regarding mental health issues?
8. Is the individual taking medication that could affect the ability to perform certain tasks or operate certain equipment safely?

As in the case of a physical injury ensure the plan is in place before implementation and is communicated to all involved stakeholders.

Provide the employee with training for any new tasks, that might form part of a modified job, taking into consideration any limitations created by the mental health condition.

Encourage the employee to continue with treatment plans and the use of any coping strategies at work. Check to see if they are improving or if symptoms of distress have returned and intervene if the latter is true.
THESE FOLLOWING ACCOMMODATIONS COULD BE USED:

1. If the psychological condition is exacerbated by work related triggers apply appropriate, structured solutions to the problem.

2. Returning an employee to work on a transitional basis for example could help, part time with a gradual increase of hours. Allow some fluctuations in the number of hours worked.

3. Determine the source of the job or job task that is creating the reaction.

4. Determine the psychological / cognitive capabilities and match the job. Have a plan in place to reintroduce the previous job tasks as tolerated and as the worker develops a sense of achievement and mastery.

5. Encourage the Supervisor to acknowledge progress and satisfactory completion of tasks.

6. Define the job and ensure predictability in the daily tasks if any of the barriers are the lack of ability to multi-task and focus.

7. If cognition is an issue, provide clear guidelines and instructions, possibly in writing.

8. Consider providing social support in situations where the limitations include social difficulties and focus, e.g. Job Coaches.

9. Provide a review of previously learned skills, ensure notes are taken.

10. Provide more time to complete job tasks.

11. Remove tasks that may be unsafe as a result of medications being taken by the employee.

12. Design a transitional return to work plan that provides for working flexible hours (e.g. to come to work in the evenings, early morning or weekend when the workplace is not as active). Ensure the individual is working back to full function.

13. If the limitations and capabilities necessitate, allow the employee to complete some work at home.

14. Design a transitional return to work plan that provides for working flexible hours.

15. Educate all employees on the transitional modified work / permanent accommodation practices. Provide sensitivity training to coworkers and supervisors. Encourage a no gossip environment – zero tolerance. Move non-work related conversations out of work areas.

16. A Return to Work plan should include: Goals, Expectations for employers and employees, Time frames for work re-integration and plans for updates / monitoring.

Ensure the individual is progressing back to full function.
TRANSITIONAL RETURN TO WORK MAKES GOOD BUSINESS SENSE.

1. The costs of providing transitional return to work are fairly low, most cost well under $500.

2. For those who get access to appropriate treatment and care the employer will save between $5,000-$10,000 per employee per year in the cost of prescription drugs, sick leave, and average wage replacement alone (Wilson, Joffe & Wilkerson, 2002).

3. Employees who are diagnosed with depression and take appropriate medication and treatment will save their employer an average 11 days a year in prevented absenteeism.

4. You can speak to a specialist in Organizational Solutions Inc. about the return to work process, we are a company with a proven record and expertise managing disabilities, including mental health disabilities.

THE IMPORTANCE OF WORK IN A PRODUCTIVE LIFE.

Employers and senior managers should be aware of the wider social influences that may be affecting the mental health of their employees.

The magnitude of mental health problems means that employers can no longer ignore its effect in their organization. According to the National Alliance for Mental Illness (NAMI): “Work is at the very core of contemporary life for most people, providing financial security, personal identity, and an opportunity to make a meaningful contribution to community life.”

The World Health Organization states that globally the vast majority of the adult population cite being successfully and happily employed as one of the key goals in life.

Due to modern advances in understanding and treating psychological illnesses such as depression it makes eminent sense now for employers to participate in efforts and address the mental health of their employees and strive to make workplaces as productive and safe as possible.

If professional assistance is needed use it to ensure the identification of an appropriate assessment and transitional return to work strategy. Organizational Solutions Inc. has the experience and expertise to facilitate the proper care management of employees with psychological illnesses.
What else Employers should know?

While tension and depression, and related illnesses, are the two most common forms of psychological illness in a workplace there are other issues that employers and senior managers may have experienced and should understand strategies to address.

MEDICALLY UNEXPLAINED ILLNESSES (MUI).

Medically unexplained illnesses usually refers to illnesses where the patient experiences feelings of physical symptoms but which the physician and other medical practitioners find hard to directly diagnose.

This is due to a lack of observable symptoms and/or psychological causes of the symptoms. The most common are lower back pain and fibromyalgia (a feeling of pain in areas or all over the body).

These can be expensive for employers, with reimbursement rates in the same range as explained illnesses and with a strong chance of being approved for Long Term Disability benefits.

LOWER BACK PAIN

A study conducted examined whether backache was influenced more by distress than actual physical symptoms (Waddell, 1984). This was conducted after experience in Britain and North America found that treatment of chronic pain in back clinics was often determined more by the patient’s distress and demands for help than by severity of any physical disease. Distress was defined as an emotional disturbance caused by stress, anxiety, increased bodily awareness and depression.

Waddel’s five signs and symptoms are identified by:

- Tenderness tests: superficial and diffuse tenderness and/or nonanatomic tenderness
- Simulation tests: these are based on movements which produce pain, without actually causing that movement, such as axial loading and pain on simulated rotation
- Distraction tests: positive tests are rechecked when the patient’s attention is distracted, such as a straight leg raise test
- Regional disturbances: regional weakness or sensory changes which deviate from accepted neuroanatomy
- Overreaction: subjective signs regarding the patient’s demeanour and reaction to testing

Further attempts at examining what are known as “Waddell’s signs and symptoms” show that patients may benefit from more thorough psychological assessments. Displaying two or more of these signs can affect the likelihood of a employee not returning to work in a timely manner.

Also patients displaying positive symptoms had higher than normal levels of perceived disability and more intense perceptions of pain.

Displaying the symptoms though should not be automatically taken as indications that the employee is fraudulently absent as even factors outside physical observance could warrant further clinical or psychological assessment.
Fibromyalgia is a common syndrome in which a person has long-term, body-wide pain and tenderness in the joints, muscles, tendons, and other soft tissues.

Fibromyalgia has also been linked to fatigue, sleep problems, headaches, depression, and anxiety. Pain is the main symptom of fibromyalgia. It may be mild to severe.

- Painful areas are called tender points. Tender points are found in the soft tissue on the back of the neck, shoulders, chest, lower back, hips, shins, elbows, and knees. The pain then spreads out from these areas.
- The pain may feel like a deep ache, or a shooting, burning pain.
- The joints are not affected, although the pain may feel like it is coming from the joints.

People with fibromyalgia tend to wake up with body aches and stiffness. For some patients, pain improves during the day and gets worse at night. Some patients have pain all day long. Pain may get worse with activity, cold or damp weather, anxiety, and / or tensity.

Fatigue, depressed mood, and sleep problems are seen in almost all patients with fibromyalgia. Many say that they can’t get to sleep or stay asleep, and they feel tired when they wake up.

This usually has a direct and observable effect on mood, relationships and functioning in the workplace. It is something that employers and the senior management should be aware of and be ready to address.

SOME  MYTHS ABOUT MENTAL ILLNESS AND THE WORKPLACE.

The World Health Organizations identifies some myths employers should be aware of when approaching mental health issues in the workplace.

**Myth 1: Recovery from Mental Illness isn’t possible.**

Long-term studies show the majority of people improve over time and lead stable and productive lives. Many illnesses are treatable with medication and / or psychological support.

**Myth 2: People with psychiatric disabilities are unable to tolerate stress on the job.**

A person’s ability to cope with stressors in a job is highly subjective and individual, whether they have a preexisting mental illness or not and most jobs contain a certain amount of stress. Reaction to stressors can change, even varying by hour, day, time of year, channelling in negative workplace and / or home issues and countless other factors. Working conditions should be matched to employee ability and workplaces should be constructive and supportive of the mental health of employees.

**Myth 3: Mentally ill or recovered patients are unpredictable, violent and dangerous.**

The vast majority of people with mental illnesses are no more unpredictable, dangerous or violent than the rest of the general population. Perceptions are improving, and the legal system supports fairness and a greater openness of mental illness. These help the distorted perception of mental illness sensationalized in the media and often exaggerated in the fictional settings of movies, television and literature.
Organizational Solutions Inc. has extensive experience managing psychological illnesses and has specialist expertise and insight to assist with building and maintaining a physically and psychologically healthy work environment.

We can clearly distinguish psychological illness from other factors and our disability / ability management approach focuses on our mission statement of “The RIGHT care, at the RIGHT time, for the RIGHT outcome.”

**VISION STATEMENT:**

“OSI is one of Canada’s leading Disability Management and Workers’ Compensation Claims Management companies with a rich heritage in delivering customized solutions that allow our clients to achieve their strategic objectives.

Our vision is to be the leader in ethical, professional disability management solutions for employers by committing to deliver high-touch, top quality management of occupational and non-occupational claims. We will provide support to injured or ill employees, facilitate appropriate treatment, ensure safe and timely return to work, while effectively administering the claim to reduce the financial impact to the employer.

Our team of experienced and specialized staff pledge to approach every claim with care, respect and sensitivity. We commit to impeccable service and real results.”
Organizational Solutions Inc. was founded in 2003 by Liz R. Scott, Phd. and is a 100% Canadian owned company. Organizational Solutions Inc. (OSI) was formed with the intent of assisting employers by implementing proven techniques in health, workers’ compensation and disability management. OSI has been successful in consistently implementing duration control strategies, assisting employees to achieve optimal function, and reducing / controlling clients’ occupational and non occupational disability costs.

Organizational Solutions Inc. employs a full complement of qualified health care and paralegal professional staff, capable of all aspects of this project. OSI staff are all considered leaders in their areas of expertise and have gained a high level of knowledge and credibility in the area of disability management, including issues of mental illness. Their combined work experience and application of an evidence based best practice model form the pillars on which we excel.

CORPORATE PHILOSOPHY AND VISION

We take an ‘organizational health’ perspective when managing employee absence from work due to injury, illness or disease. With the highest level of respect and caring, all claims are managed while maintaining an objective evidence-based approach. We firmly believe that employees must have sufficient objective medical support for their absence and be involved in active treatment to resolve their disability. Getting well is the employee’s primary job while they are off work.

Our belief is that healthy employees collectively contribute to a healthy organization, especially when the culture of the organization supports individual employee health, wellness and productivity. This belief underlies all of our services and their delivery.

Our program focuses on no lost time and early intervention, the earlier the better! The sooner we can intervene with employees the more likely it is they will gain the appropriate care, recover and return to work. The Key Factors to our process are:

- We believe work is integral to well-being.
- *We have a “No Lost Time” philosophy.*
- We recognize the critical importance of ensuring employees are in receipt of appropriate treatment in order to achieve the right outcome for the employee and the employer.
- *We believe in open and consistent communication with all parties involved – the employee, the employer, the Provincial Workers’ Compensation Boards, treating physician(s) / health care providers, return-to-work specialists, etc.*
- We maintain a solid and professional relationship with our Preferred Network of Providers (PNP) that supports our care management, to expedite tests and treatments and assist with our Return to Work outcome philosophy.
- *We believe that our evidence based Standard Operating Procedures and Data analysis reduce the financial impact of disability.*
- We work with all parties to discover and address underlying factors that may influence outcomes.
- *We live and breathe our guiding principle by facilitating:*

  “*the RIGHT care, at the RIGHT time, for the RIGHT outcome ©.*”
Look at the following five checklists with the aim of making your workplace a safe and healthy environment for both managers and employees, improving productivity and protecting your bottom line.

The advice here for employees can be communicated via internal communication channels, staff areas, work policies, appraisals, training etc.

This paper is presented as an introduction to the challenges of mental health issues in the workplace and how employers can deal with them. Remember, do not try to diagnose or discriminate against an employee with a mental health issue.

Most often, it should be treated in the same way as a physical illness. Often issues of mental illness, just like physical illness, need to be referred to a medical specialist, whether that is a psychiatrist or physician.

Looking at how you or the employee can identify the warning signs of issues and positively supporting a healthy and productive work environment can have a significant impact on your bottom line.

If you are an employer or manager know that support and training can give you skills necessary to effectively talk about and deal with issues around mental health in your workplace.

**WHY MANAGING MENTAL HEALTH IS SO IMPORTANT**

The issues surrounding Mental Illness can have a personal and financial impact for an employer.

Not only does lost time, illness and an unproductive worker affect the bottom line but increasingly where an employee alleges that her or his workplace has led to a mental injury—either by directly causing an illness or by exacerbating an existing one—courts and tribunals are finding in the employee’s favour and awarding significant awards and damages.

A recent report entitled, “Tracking the Perfect Legal Storm: Converging systems create mounting pressure to create the psychologically safe workplace.” by Dr. Martin Shain (2010), stated that psychological claims are not only appearing under occupational health and safety or human rights laws, but across a broad legal spectrum that includes labour relations, employment standards, contract/common law, tort law (negligence), and workers’ compensation.

Each of these areas imposes on employers a duty to provide a psychologically safe workplace, and employees and their counsel are taking advantage of them to present their complaints.

The report defines a psychologically safe workplace as “one in which every practical effort is made to avoid reasonably foreseeable injury to the mental health of employees.”

Recent policy changes and redefinitions of issues such as ‘stress’ by the Workers’ Compensation boards across Canada make the issue an extremely topical and relevant one for Employers and their managers.
For more information on providing an experienced and expert disability management program (including management of mental illness) for your employees, contact Organizational Solutions Inc. to discuss the extensive suite of services we can offer your firm.

Tackling Tensity – Taking the initial steps. These following skills and techniques put forward by psychologist Robert Epstein may reduce incidences of negative stress among employees:

**CHECKLIST: REDUCING THE SOURCES OF EXCESSIVE TENSITY.**

**Promote the skills for prioritizing, e.g.: “to do lists”**
Assign time to top priority items
Structure telephone use and schedule email response.

Practice Relaxation techniques
Take breaks and lunch.
Take short “time outs” if pressure if building too much.
Practice breathing and stretching techniques

**Thought management.**
Correcting irrational thinking
Rephrase negative thoughts as positive affirmations,

**Prevention** – planning your life to avoid excessive stressors. There are many individual techniques that can be used to reduce the risk of stress:

a) Identify stressors and handle them. If you are procrastinating about something do it. e.g. Putting off a call to the doctors, returning a bank’s call about a missed loan payment, getting a new battery for your cell phone, tidying that closet so you can quickly find clothes or shoes etc.

b) Commit to positive activities and thinking. In our culture a common response to tensity is increasing destructive behaviours: use of alcohol, drugs, smoking, eating excessively etc.

c) Be your own Personal Assistant. Keeping “To do” lists can really help with prioritizing tasks, not forgetting important things and reducing stressors. From work-tasks, to chores at home to supermarket shopping, doing it right the first time means more gets done and less things have a chance to get overwhelming.

d) Immunize yourself. With the right training, relaxation priorities and positive thinking techniques you can put yourself in a position to face stressors without feeling tensity.

e) Plan your day. Using some time in the morning to plan your day at both work and home will mean you will waste less time and get more done.

f) Have a bigger plan. Set goals, aim for achievements and work to make your life, relationships and career happier and more successful. And remember, as Dr. Nathaniel Branden says: “A goal without an action plan is a daydream!”
2) CHECKLIST: SOME SKILLS AND PRACTICES THAT
COULD REDUCE TENSION LEVELS

a) Assertiveness training. The most valued form of
communication for individual self-worth and social
respect. Assertiveness lies between passive on one end
and aggressive on the other. Assertive
statements are open honest and direct, may start with:
“I want…”, “I feel…”, “I think…” etc.

b) Cognitive restructuring. Identifying and limiting negative
thoughts and beliefs, ‘startling’ negative
thoughts into positive ones.

c) Challenging negative beliefs. Whether it is poor self
esteem, feelings of worthlessness or passive
acceptance of negative criticism at home or in work individuals should look at techniques and ways to
challenge and rebuild belief and self-worth.

d) Goal Setting. Having aims and goals in life and work creates a sense of purpose, promotes positive
thinking and can give direction and focus.

e) Improving sleep. Many techniques exist to improve sleep, including establishing routines, relaxation
techniques and identifying the right amount of sleep. Proper sleep patterns promote positive mental
health.

3) CHECKLIST: TWELVE QUESTIONS AN INDIVIDUAL COULD ASK
THEMSELVES TO WARN OF THE SIGNS OF A DISABILITY
INDUCING DEPRESSION.

a) Have you lost interest in activities you used to enjoy, especially those related to work?
b) Does it take a long time to respond in conversations, activities or waking up in the morning because of
fatigue or irritability?
c) Has your physical health really taken a nose-dive lately?
d) Do you worry a lot about your health or appearance?
e) Have you lost interest in intimacy with your partner?
f) Do you feel sometimes that it’s really not worth the effort including yourself in activities or planning for
the future?
g) Do you sometimes cry for no reason?
h) Do you feel “down” or “blue” for a large portion of the day?
i) Do you ever experience such feelings of sadness, guilt or self disgust that you wish yourself dead?
j) Has there been a change in your weight and / or sleeping patterns?
k) Do you feel unable to focus, concentrate or make decisions?
l) Do you sometimes feel anxious or agitated, even though there appears to be no reason to feel so?

Affirmative answers, especially multiple affirmative answers, could indicate symptoms of clinical depression
and further help may be needed. Remember that depression is treatable for the majority of people.
This chart based on the studies of DB Baker (1985) gives a good summary of work environments most likely to cause tension. Where would your employees feel that they are? Most jobs contain a degree of the two green and amber squares, and some tension is usually a necessary part of working life, but if any of your employees fall into the red square more serious problems could have the potential to exist. Could workload distribution, training, policies, practices, rewards and recognition be improved?

The following advice based on the recommendations from Health Canada can lead to a more positive, less tense life.

1. Get into the habit of making decisions promptly. Worrying about making a decision and procrastinating can often cause undue tension.

2. Avoid putting things off. Make a scheduled list of things that you need and want to do and stick to the schedule. This includes leisure activities as well as work, life and chores.

3. Don’t be afraid to delegate or share tasks. Trying to do everything yourself can lead to unnecessary pressure, stress and feelings of being overwhelmed. Let others help you take on tasks.

4. Keep thinking positively and realistically. Affirm the positives in life and try to avoid negative and self-debasing thoughts. Plan for the future, work towards positive and achievable goals in work, life and relationships.
CONCLUSION

The Mental Health Commission of Canada (MHCC) has launched a collaborative project with the Bureau de normalisation du Québec (BNQ) and the standards division of the Canadian Standards Association (CSA Standards) to create a voluntary national standard for mentally healthy workplaces.

The standard aims to help Canadian employers support the psychological health and safety of their employees. It should be released sometime in 2012. According to the Government, Canada is the first country in the world to develop such a standard.

The information presented in this book is compiled from a variety of research papers, advice sources and publications (see bibliography) including the World Health Organization, The Global Business and Economic Roundtable on Addiction and Mental Health, psychiatric and psychological studies, the National Institute of Disability Management and Research and many others.

The study of mental health is constantly changing and advances are being continually made, both in understanding the human brain and psychology. Statistical figures also vary across publications on similar themes.

The advice presented in this book is presented as a guide for Employers, HR professionals and managers to recognize, evaluate and possibly take the initial steps to adapting to provide positive, productive and mentally healthy work environments. You should always rely on your own discretion and comfort level of training in tackling mental health issues in your workplace.

Remember, as pointed out in this book, that it is not the role of any employer or manager to diagnose or negatively speculate about a possible mental illness. This should be left in the care of a medical practitioner.

It should be the goal of an employer or manager to promote a sustainable work environment productive to mental well-being. Also to recognize, support and help a person with a mental illness to seek help when required and do the best job possible.

Organizational Solutions Inc’s highly-trained team includes Disability Management specialists, Workers’ Compensation Specialists, Paralegals, Kinesiologists, Registered and Occupational Health Nurses, Registered Ergonomists and Physicians. We bring technical expertise, innovation and enthusiasm to every case and our client results are consistently outstanding.

We have a documented track record of reducing absences, lowering disability durations, decreasing costs and promoting sustainable return to work. We have a diverse clientele incorporating all industries, national and local, unionized and non-unionized environments.

Because we find Mental Health Issues are the second most common cause of disability (next to Musculoskeletal) we ensure we take the steps to continue to be thought leaders and experts in managing these type of cases.

We look forward to discussing in more detail the needs of your company and how our expertise can assist you in achieving your desired results. Organizational Solutions Inc. firmly believes a partnership with our clients is the approach that reaps the best results. We base our business on the core vision of: “the RIGHT care, at the RIGHT time, for the RIGHT outcome “.
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