



RETURN TO THE WORKPLACE:

A psychological toolkit for heading back to work



Canadian Mental Health Association
Ontario



mental health
WORKS



BounceBack®
reclaim your health

ABOUT THE CANADIAN MENTAL HEALTH ASSOCIATION, ONTARIO

The Canadian Mental Health Association (CMHA) operates at the local, provincial and national levels across Canada. The mission of CMHA Ontario, a not-for-profit, charitable organization, is to improve the lives of all Ontarians through leadership, collaboration and the continual pursuit of excellence in community-based mental health and addictions services. Our vision is a society that embraces and invests in the mental health of all people. We are a trusted advisor to government and actively contribute to health systems development through policy formulation and recommendations that promote positive mental health for all Ontarians. Our 28 local CMHA branches, together with other community-based mental health and addictions service providers, serve approximately 500,000 Ontarians each year.

ABOUT MENTAL HEALTH WORKS

Mental Health Works is a national social enterprise run by CMHA, with its head office at CMHA Ontario. It provides workplace mental health training to organizations nationwide. The program began in 2001 as a partnership research project. In 2004, Mental Health Works began selling products and services to the business community and the response from clients and media has been overwhelmingly positive. Today, the recognition and willingness to address issues related to workplace mental health is greater than ever. However, there is much more to be done. Mental Health Works is dedicated to advancing the field of workplace mental health through skills enhancement training, awareness education and stigma reduction efforts.

ABOUT BOUNCEBACK ONTARIO

BounceBack is a free skill-building program managed by CMHA. It is designed to help adults and youth 15+ manage low mood, mild-to-moderate depression and anxiety, stress and worry. Delivered over the phone with a coach and through online videos, participants get access to tools that support them on their path to mental wellness. BounceBack was first developed by Dr. Chris Williams, a medical doctor and psychiatrist, as well as a professor at the University of Glasgow. The program was first adopted by CMHA British Columbia in 2008 and piloted in Ontario in 2015. By October 2017, BounceBack was launched across the province as part of the Ontario government's investment in structured psychotherapy services. Since then, over 8,000 primary care providers have referred over 35,000 clients to BounceBack.

Disclaimer

This document is a toolkit, intended to act as a guide to define key terms and provide recommendations. It is not meant to be prescriptive and may not be applicable to everyone. CMHA Ontario recognizes the information in this document may be subject to change and each organization has specific needs. As a result, policies and procedures may vary. This document is not intended to provide legal or clinical advice.



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A NEW TOOLKIT TO HELP YOU GET BACK INTO THE WORKPLACE: AN INTRODUCTION

Return to the workplace: A psychological toolkit for heading back to work is a guide to support the mental health of individuals as they plan safe transitions back into their workplaces and to help employers as they develop policies and procedures for supporting staff returning to the workplace.

This toolkit is part of an effort to support the mental health needs of Ontarians and promotes principles of positive mental health and well-being while encouraging the use of additional supports. It has been reviewed and informed by diverse perspectives, including clinical leaders from the mental health and addictions community across Ontario.

This toolkit aims to serve employees and employers across a variety of sectors. Readers are encouraged to use this as a guide to understanding how their mental health and the mental health of their colleagues has been affected by the pandemic and explore strategies to support themselves and others as the transition to the workplace occurs.

This toolkit aims to take a meaningful approach in offering guidance on how to support mental health concerns with respect to the pandemic for a variety of organizations. The suggestions provided are meant to enhance the supports available to individuals during this challenging transition. The toolkit is not meant to be used in place of a mental health professional, but rather to provide psychoeducation on mental health concerns. Readers are encouraged to seek additional supports as they self-identify their needs.

WHAT TO EXPECT

As the economy re-opens and workplaces begin to consider what this means for them and their employees, anxiety about returning to our previous ways of working and engaging with others is natural and expected. In response, Canadian Mental Health Association (CMHA) Ontario, in partnership with Mental Health Works and BounceBack Ontario, created this toolkit to support employees currently working from home and struggling with thoughts about returning to the workplace. For employers, this toolkit asks them to consider the different elements that need to be addressed as part of return-to-work planning.

This toolkit contains information about the common symptoms individuals may experience as they think about returning to their workplace and guides readers through coping strategies. Several examples are provided throughout, and additional resources are hyperlinked where possible. The toolkit also provides employers with guidelines that may help them take their employees' mental health into consideration as they plan for a return to the workplace. Readers of this toolkit are encouraged to read both the employee and employer sections to fully understand the steps needed to create a psychologically safe return to the workplace.

RETURNING TO THE WORKPLACE AFTER A PANDEMIC: MENTAL HEALTH CONSIDERATIONS FOR EMPLOYEES

During March 2020, Ontarians experienced an unprecedented shift in their way of life. Due to the 2019 novel coronavirus (COVID-19), we have had to alter how we work with colleagues, communicate with loved ones, and enjoy activities of daily living. While this virus started having global impacts at the end of 2019, Ontario experienced the true weight of it once it was declared a pandemic in March 2020 and it is understandable that COVID-19 is taking a toll on our mental health.

In May 2020, a public opinion poll commissioned by CMHA Ontario showed that almost 70 per cent of Ontarians believe the province is headed for a “serious mental health crisis” as it emerges from this pandemic.¹ During this time, a quarter of respondents reported consuming more substances such as alcohol, tobacco or cannabis during the pandemic. This was in line with a poll commissioned by the Canadian Centre on Substance Use and Addiction, where 25 per cent of Canadians said they are drinking more while at home due to the pandemic.² Perhaps not surprisingly, the results of the CMHA Ontario poll also showed that almost 80 per cent of people in the province worry about what the future will look like once the outbreak is over, and a further 77 per cent of respondents said more mental health supports will be necessary to help society as we move forward.³

For some, our changing reality may be even more challenging than the pandemic itself. While news about the pandemic has been difficult to hear and cope with, it came with fairly clear guidance from public health authorities about how to physically distance, where our behaviours could be altered and where to go for more direction and information. Complicating these matters are a variety of mixed messages, from information about irregular spikes in COVID-19 cases, to news about re-opening the economy. Further complications include concerns of safety among schools and childcare centres, which impede parents’ abilities to return to the workplace. These complex challenges can create feelings of fear, anxiety and frustration, on top of the difficult emotions we have already been coping with while staying at home.

It is important to keep in mind that everyone responds differently to the effects of a pandemic and that feelings can be fluid. Our experiences may change over the course of time, and the guidance provided in this toolkit may be helpful for some at some points in time, and not others. If you are not able to relate to the content here or find it less helpful than you need, please work with a mental health professional to determine the supports that would be best suited for yourself.



ALMOST 70%
of Ontarians believe
the province is
headed for a “*serious
mental health crisis*”
as it emerges from
this pandemic.”

HOW HAS THE PANDEMIC AFFECTED US?

Our bodies are constantly in pursuit of balance, a state of homeostasis. When we feel hot, our bodies produce sweat to cool down. When we lack sleep, our bodies slow down to accommodate the lower energy we will be able to expend. And when we are stressed, our bodies find ways to respond to the stressors. COVID-19 is in itself a stressor and has created additional stressors in our lives. A stressor is anything in the outside world that can knock us out of balance, and a stress response is our body's attempt to re-create balance.⁴

A stressor can also be the anticipation of our body being shifted off balance. In certain cases, we are able to see things coming and our body – based on anticipation alone – can create an intense stress response.

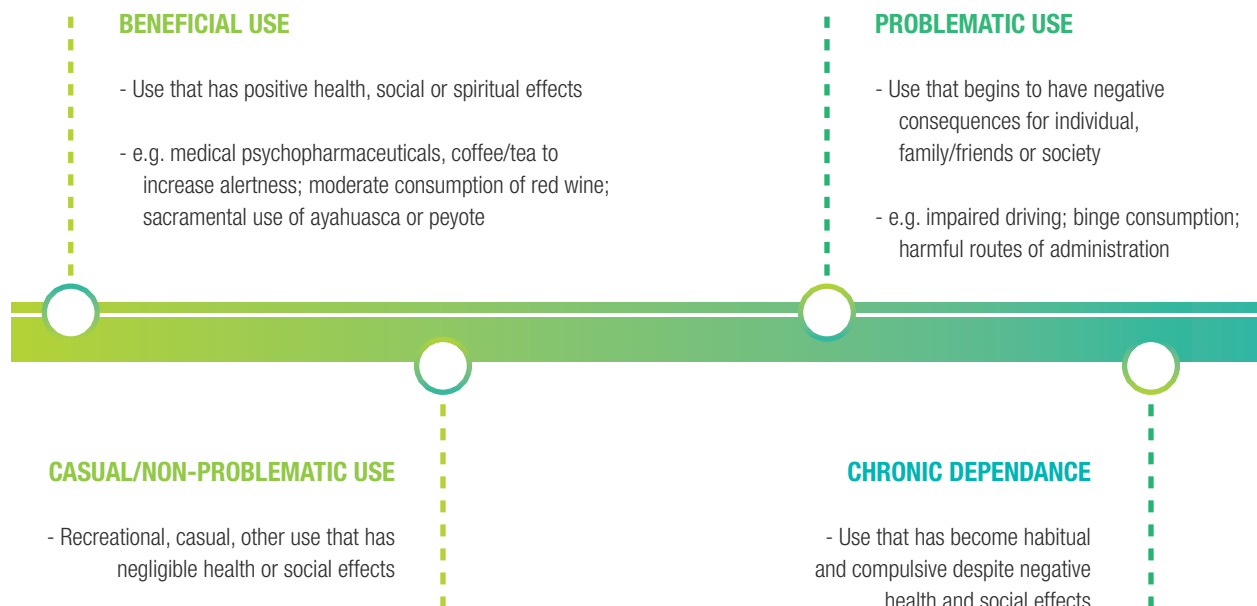
Adjusting to working from home is an example of a stressor, while thinking about returning to our workplaces during the pandemic is an example of an anticipated stressor.

Stress responses look different for everyone. For example, one common stress response is substance use. As noted earlier, a quarter of Ontarians spoke about increasing their use of substances during the pandemic, and while some may be consuming without it resulting in any significant harms, using substances to cope may create challenges for others.⁵ Consider the spectrum of substance use pictured below.⁶

RESPONSE BREAKDOWN

Responses such as those in the right end of the spectrum (see below) can perpetuate feelings of stress, sadness and worry, causing a spike in the hormone cortisol.⁷ Cortisol suppresses our immune systems and impacts how we feel mentally and physically. This impact depends on whether the stressor is acute, like making a trip to the grocery store, or chronic, such as taking care of an elderly parent. COVID-19 has become a chronic stressor.

SPECTRUM OF SUBSTANCE USE



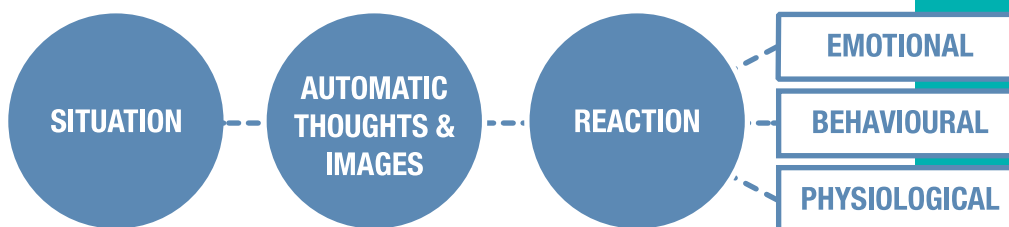
We face stressful events daily and our body's response mechanisms come naturally. Consider the example of walking through the woods and coming across a bear. We are wired to either fight, flee or freeze in the face of this acute stressor. When faced with chronic stressors however, where we create worry about stressful events for a prolonged time, we are using the same response mechanisms in our body. This is because:

- The body uses a surprisingly similar set of responses to a broad array of stressors.
- If stressors go on for too long, (i.e. chronic), they can make you physically sick.⁸

When we activate the stress response out of fear of something that turns out to be real, we appreciate this skill that has allowed us to prepare our defenses early, which can be quite protective.⁹ However, turning on these responses for a prolonged period impacts our mental health significantly. During COVID-19, we have already had these stress responses turned on for some time. Now, we are shifting from surviving while at home during the pandemic, to thinking about surviving while returning to the workplace during the pandemic.

As the conversations about returning to the workplace emerge in each of our spaces, you may experience symptoms of anxiety, stress, panic and worry. You may also experience trouble with sleep, your appetite and your interactions with colleagues and friends. These reactions are normal and expected. In this toolkit, we explore ways to understand these reactions, how to cope as our workplaces continue to evolve, and suggest ways to express your concerns.

The toolkit is informed by principles of cognitive behavioural therapy (CBT), a structured, time-limited, problem-focused and goal-oriented form of psychotherapy. First developed in the 1960s by Dr. Aaron Beck, CBT has been shown to be effective in over a thousand research studies. CBT helps people identify their thoughts, challenge those thoughts and learn skills to achieve improvements in mood, functioning and well-being.¹⁰ CBT is based on the cognitive model, which states that, "the way that individuals perceive a situation is more closely connected to their reaction than the situation itself."¹¹ This suggests the thoughts that enter our mind during a situation influence our emotional, behavioural and physiological reactions.



GRAPH¹²

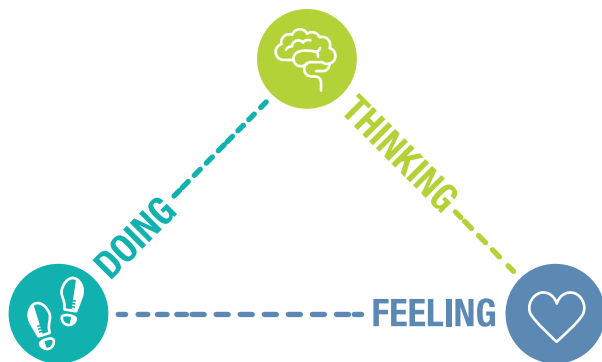
KEY POINTS:

- COVID-19 is experienced by our bodies as a stressor and has created multiple other stressors in our daily lives.
- Returning to the workplace is an anticipated stressor.
- Our bodies use the same mechanisms to respond to acute and chronic stressors.
- Chronic stressors can make us physically sick.

THE COGNITIVE TRIAD

This triad is informed by the cognitive model and acts as the foundation of CBT, which demonstrates the connection between our thoughts, feelings and actions.¹³ Specifically, it shows how our thoughts impact our feelings, which influence how we behave/what we do. This creates a cyclical effect, where our actions then further impact our thoughts, leading to other feelings or emotions and creating more behaviours.

In the image below, arrows display the direction in which these flow. You may notice this process does not have an end point. This means our thoughts impact our feelings, resulting in actions which then create more thoughts, once again impacting our feelings, creating more actions, and so on. This process is also sometimes referred to as a “vicious cycle.”



Consider the following example: Your workplace announces they are creating plans on how staff will start returning to the workplace.

Thought: “I’m going to be infected by COVID-19 when I go back to the workplace.”

Feeling: Your heart might start racing; palms might get sweaty. You may be feeling anxious, stressed, worried or sad.

Behaviour: You might cope by connecting with your colleagues, expressing your concerns to your loved ones, turning to the news for more information, or having a drink later that evening.

Next thought: “I can’t believe they are calling us back into work so soon.” This will then lead to more feelings and behaviours, contributing toward that vicious cycle we referred to above.

Notice the very first step was the thought. If we had started with a different thought, such as “I hope my workplace will take measures to increase safety,” then our feelings and behaviours may have looked very different.

The world is a series of positive, neutral or negative events. We interpret these events with a series of thoughts that continually flow through our minds, our “internal dialogue.” Our feelings are created by these thoughts and not the actual events. All experiences must be processed through our brain and given a conscious meaning before we experience an emotional response. The premise underlying the cognitive triad is that once you develop awareness of these connections within yourself, you can start addressing this cycle.

KEY POINTS:

- Our thoughts impact our feelings and behaviours.
- Our thoughts can create a vicious cycle, making it hard to create change.
- It is possible to break this cycle.

Our thoughts are informed by years of experience and observation, and with time and practice, become automatic responses to the external environment. These automatic responses are experienced by everyone and are informed by the thinking styles we identify with most.

DIFFERENT THINKING STYLES THAT CAN BE UNHELPFUL

Also known as “cognitive distortions,” the thinking styles below show how the thoughts that can lead us to experience negative emotions most often contain distortions. The premise for these thinking styles is our emotions and behaviours are often not based on accurate perceptions of reality but are often the products of how we have processed our environment and thoughts about it.

UNHELPFUL THINKING STYLES¹⁴

Black and white thinking

Evaluating our environment and experiences in extremes – things are either good or bad, a success or a failure. Most events call for explanation somewhere in between.

Overgeneralization

Using words like “always” or “never” to describe situations or events. We overgeneralize when we are not taking all aspects of a situation or event into consideration.

Mental filter

Paying attention to only the unpleasant things that happen and ignoring the good ones. Filtering prevents us from looking at all aspects of a situation and drawing on more balanced conclusions.

Disqualifying the positive

Transforming our neutral or positive experiences into negative ones. This is not about ignoring positive events and focusing on the negative ones. Rather, it is about our ability to cleverly switch anything good into bad.

Mind reading

Believing we know what others are thinking – we will assume they are thinking the worst of us.

Fortune-telling

Predicting that things will turn out badly when in reality we cannot predict the future.

Catastrophizing

Imagining the worst possible thing is about to happen and predicting we will not be able to cope with the outcome.

Emotional reasoning

Taking our emotions as evidence for the truth. Because things feel negative, we assume they really are.

“Should” statements

Telling ourselves how we “should,” “must,” or “ought” to feel and behave. However, telling ourselves this does not mean this is actually how we feel and behave, resulting in our feeling anxious and disappointed with ourselves and/or others around us.

Labelling

Talking to ourselves in mean ways and using a single negative word to describe ourselves. This is unhelpful and unfair and does not consider that we are too complex to be summed up in one label.

Personalization

A tendency to assume responsibility for a negative event when there is no basis for doing so.

The negative emotions we feel are a direct result of negative thoughts. Sometimes, the emotions can feel so instant and overpowering that we have trouble identifying what caused them or how we got there. In these cases, the negative thoughts have become automatic, or ANTs – automatic negative thoughts.

Stepping back and teasing apart the thoughts that have been entering our minds most recently, which thinking style(s) do you think you may have been using?

KEY POINTS:

- Our thoughts are influenced by the thinking styles we have already been practicing – these are often learned and can be unlearned.
- Our emotions and behaviours are often not based on accurate perceptions of reality – they are the products of how we have processed our environment and thoughts about it.

Now that we have some understanding of how we are feeling and what influenced these feelings, let’s work through some questions that can help us challenge our unhelpful thoughts.

Consider the following example:

During an all-staff meeting being held virtually, Sarita hears a member of the management team say they have started discussing how employees will return to the workplace. Upon hearing this, Sarita immediately thinks, “How can they consider bringing us back so soon?” These thoughts lead into emotions of worry, panic and confusion. Sarita then starts messaging her colleagues and confidantes to ask if they heard this as well and if they have more information. As expected, most of the colleagues she messages are in the same position as they have all heard this news for the first time together. This results in a mass feeling of panic, anger and animosity toward the management team, and specifically, the individual who brought this news up in the first place. Sarita may feel distracted from her work the rest of the day, spend more time discussing this topic with her colleagues, or do something to make herself feel better in the short term. Sarita may also experience presenteeism, which is when an employee is physically present at work but not fully present mentally.¹⁵ These are normal reactions to a situation such as this. However, are they helpful for Sarita?

In this scenario, some of the unhelpful thinking styles that may be underlying Sarita’s self-talk include black and white thinking, catastrophizing and fortune telling.

In order to challenge the thoughts that are emerging from these thinking styles, Sarita will want to ask herself the following questions:

Is it reasonable to think that the management team will make plans that could put the staff’s health and safety at risk?

What is the evidence for thinking that the staff will be brought back into the office “soon?”

What is the evidence against management creating a safe transition plan?

What are the chances that all staff will be asked to come in at the same time and in a very short time frame?

What is the worst thing that would happen if the management team has begun discussing this transition?

How is worrying about this helping me?

Thinking through these questions can help Sarita step back and consider whether her thoughts are based on facts or feelings. Feelings are not facts, and should not be the basis for our reactions, especially during such challenging circumstances. We encourage everyone to use these questions to reflect on their thoughts, feelings and behaviours. This exercise is helpful to walk through as it can help you better organize your inner thoughts and create opportunities to mobilize into action with a different frame of mind.

QUESTIONS

What is the evidence for...?

What is the evidence against...?

What are the chances that ... will become true?

What is the worst thing if ... does become true?

Is it reasonable to think...?

How is worrying about this helping me?

Ideally, you would like to be in a space where you feel comfortable and ready to speak with your employer about your concerns. This can be difficult to do, even if they have articulated what the workplace accommodation policies are. Some tips you can use in your conversation are found below.¹⁶

Remember: while an employer has a requirement to provide you with accommodations, they cannot do so if employees are not honest about their needs.

KEY POINTS:

- Take pauses and ask yourself:

1. *Is the information you have complete?*
2. *Is the information you have accurate?*
3. *Is the thought you are having about X true? Is it based on the evidence or based on previous thoughts and/or feelings?*

- Your employer is required to provide accommodations to support you. However, they cannot do so if you are not honest about your needs.

TIPS FOR SPEAKING WITH YOUR EMPLOYER

Start the conversation: Sometimes, even the most astute manager will not notice when something is wrong. Start the conversation by asking for a meeting in private. Do not feel like you need to disclose everything but let them know you may need some additional support as plans for returning to the workplace get outlined.

Focus on effects: Accommodations should be effects-based. Focus on what would make your workplace more conducive to your well-being. For example, you might consider a graduated re-entry into the workplace with shorter hours and days and gradual increases over time.

Make an appointment with your health care professional: After the initial conversation with your manager, make an appointment with your care provider to ask for their input on what an effective accommodation might be. Be sure to request documentation that states the limitations.

Be honest: If it is safe to do so, give as much context as possible to your supervisor so they can aid you in crafting an appropriate accommodation plan. Sometimes it takes a few attempts. It is important to let your supervisor know if the plan needs to be updated.

Participate in check-ins: Let your manager know on a regular basis how things are going. Participating in check-ins, even if informal, is a great way to manage the accommodation plan.

Take care: Take care of yourself. Sometimes the best thing is taking some time away in order to focus on your care or use the time to assess your path forward. Speak with your supervisor about sick-leave policies and supports outside the workplace, such as benefit plans and employee assistance programs.

In addition to practicing these strategies for returning to the workplace, it is also important we take time to actively practice self-care. Self-care strategies may include finding ways to be active or to self-soothe so we have ways to improve our emotional experience when we are feeling distressed. Some activities listed below can help reduce the intensity of any distress you may be feeling and can increase feelings of mindfulness. If you want more information about how to navigate these types of difficult conversations, we encourage accessing the [Mental Health Works' Accommodation Guide](#).

WHEN TO SEEK ADDITIONAL SUPPORT FROM A MENTAL HEALTH PROFESSIONAL

As previously stated, experiencing symptoms of poor mental health and struggling with how to manage these symptoms is a normal and expected response when thinking about returning to your workplace. Several resources are available to help as you process your feelings during this time.

Sometimes, even after trying to reduce our stress and anxiety, we continue to struggle. In these cases, you may wish to reach out for more support from a mental health professional. Some signs to notice include:

- Continued changes in sleep
- Changes in appetite
- Negative impacts on personal relationships
- Increased feelings of sadness
- Excessive worrying
- Hesitation to connect with existing support networks/systems
- If using substances:
 - Experiencing a loss of control over the amount or frequency of use
 - Continuing to use substances despite negative consequences
 - Craving and feeling a compulsion to use

It is important to note the timeframe of these feelings and symptoms. If they persist for weeks at a time, it may be helpful to seek additional support from a mental health professional.¹⁷ Your organization may already have an Employee Assistance Program (EAP) that you can access for additional support, inquire with your employer.

ACTIVITIES THAT CAN HELP TO REDUCE STRESS

- Practice mindful movements or yoga
- Read a book
- Go for a long walk
- Listen to a podcast
- Pet and play with an animal
- Watch a favourite movie or a funny show
- De-clutter a space within your home, such as your room, closet or kitchen
- Spend time with your favourite people - in person, by phone or through virtual means
- Make something for someone
- Unplug from electronic devices for an hour
- Wash dishes
- Work on a puzzle
- Light a candle
- Get creative: draw, colour or paint
- Take a long bath or shower
- Do some gardening
- Listen to soothing music
- Put on your favourite scent
- Focus on what is going well in your life right now
- Cook or bake something you have not tried before
- Meditate
- Enjoy sounds of nature
- Breathe slowly
- Write in a journal

RETURNING TO THE WORKPLACE AFTER A PANDEMIC: THE EMPLOYER PERSPECTIVE

Just as members of your staff are experiencing anxiety in relation to the pandemic and returning to workplaces, so too might employers as they consider how to prepare their workplaces for the foreseeable future. For many of our workplaces, the shift from virtual to in-person may be inevitable. While some workplaces may have flexibility on when this has to be implemented, others may not have a choice and have to act fairly quickly to both prepare their workplaces as safe spaces and provide staff the reassurance they need to feel comfortable with this transition.

Although employee well-being is everyone's responsibility, there is an important role for the leadership within an organization. Proper leadership practices can make employees more comfortable with disclosing mental health and/or addictions-related difficulties. Maintaining a workplace culture built on trust, honesty and fairness creates an environment conducive to positive mental health and enables staff to raise concerns with management.¹⁸

Remember, just as no two people are the same, an adequate response to a mental health concern in light of COVID-19 will not be identical for any two people. We advocate for adopting a person-centred approach to addressing these concerns with staff and encourage workplaces to build a focus on psychological health and safety into their business plans. This means considering the impact of workplace processes, policies and interactions on the psychological health and safety of all employees.

This is about meeting employees where they are, rather than imposing a solution or prescriptive plan. You are working with staff to develop a solution that is appropriate for their needs and the workplace.

As you have thought about the return to workplace process, have you:

- | | | |
|---|---|--|
| <ul style="list-style-type: none">■ Strived to create an atmosphere in which employees are comfortable discussing the issues that are on their mind with respect to returning to the workplace?■ Created opportunities to collaborate with members of the staff on the proposed return to work plans?■ Created a system for recording requests by employees, and the steps you have taken to start addressing them? | <ul style="list-style-type: none">■ Required employees to provide the information reasonably required to execute a request for accommodation?■ Informed employees that any costs associated with workplace accommodations, such as physician notes or assessments, will be covered by yourself as the employer?■ Ensured the policy identifies your duty to your employees? | <ul style="list-style-type: none">■ Developed a protocol in the event that an employee is unable to return to the workplace?■ Ensured the policy identifies the duties of your employees, and clearly communicated them?■ Considered how these policies will be shared with all staff? |
|---|---|--|

TIPS FOR SPEAKING WITH YOUR EMPLOYEES

Creating accommodations for employees to support their mental health as they transition back to the workplace requires working from a place of compassion. Some tips to keep in mind:¹⁹

Build trust: Always maintain integrity and confidentiality. At every opportunity, share information about the plans in progress with your teams, and request that they share their feedback and concerns with you. Where possible, share your own concerns as well and how you are coping personally.

Make time to talk: If you have only one or two employees at a time, overlap their shifts by a few minutes to encourage employees to talk to each other, and to you. This builds the team and helps everyone know they are not alone in their concerns.

Encourage participation: To increase your employees' personal commitment, encourage their participation in decision-making processes. Consider creating a committee with members of staff included so they can be part of that decision-making. Consider also circulating a survey so anonymous feedback can be provided for those not comfortable speaking during large virtual meetings.

Be specific: When sharing plans, provide as much detail as you can. Staff will feel safer if you can provide specific information based on the latest research evidence. Including hyperlinks to the actual research will be beneficial.

Respect privacy: Where some individuals have had private conversations with you, be sure not to disclose this during larger meetings. Not everyone wants their mental health status or personal accommodation requests disclosed. This also means not asking a member of staff whether they are struggling with their mental health, and instead asking whether there are any problems that are interfering with their work, or if they will be able to perform all the essential duties of their job.

Educate employees: Just because you 'get it' does not mean other staff do. Ensure your team and workplace are educated on mental health concerns related to COVID-19 and know how to access professional supports if they wish.

Be positive: Create morale-boosting measures where possible, such as online team-building exercises, etc.

Be proactive: Take the time to talk about the importance of employee mental health. This sets the conditions for conversations to occur, cements your commitment as a leader to employee well-being, and introduces the protective factor of psychosocial support into the work environment. Know, and understand, that you are part of an informal support network for all employees.



CREATING A PSYCHOLOGICALLY HEALTHY AND SAFE WORKPLACE

A responsibility that management carries for their staff is creating and fostering an environment that is healthy and safe – physically and psychologically. [The National Standard for Psychological Health and Safety in the Workplace](#) (the Standard) is a free resource that organizations can use to develop a management system which cares for the psychological well-being of staff. We encourage you to use the innovative best practices in the Standard, adopted by private and public sectors, to support employees as they return to work during the pandemic.

The Mental Health Commission of Canada (MHCC) has also produced a comprehensive review of organizations that began to implement the Standard and found many saw dramatic improvements in productivity and satisfaction. As a business case, you can reference the [MHCC Case Study Research Report](#) to provide the groundwork for beginning the journey in your organization.

CMHA Branches, Divisions and our National office, through our [Mental Health Works](#) program are also ready to assist with training opportunities for interested leadership. A nationwide social enterprise of CMHA Ontario, Mental Health Works provides tailored, capacity-building workshops and consultations to organizations looking to improve and protect employee mental health, while also realizing the fiscal benefits of mental health promotion. Mental Health Works developed an [Accommodation Guide for Managers and Staff](#), a resource that is intended to support employers and employees with the often difficult conversations that arise about workplace mental health. To contact your local CMHA Branch, visit: <https://cmha.ca/find-your-cmha>

A RECENT STUDY BY DELOITTE FOUND THAT FOR EVERY \$1 SPENT ON MENTAL HEALTH PROMOTION OR INITIATIVES IN THE WORKPLACE, PARTICIPATING ORGANIZATIONS SAW A \$1.63 RETURN ON INVESTMENT. A SUPPLEMENTARY PIECE TO THE STANDARD, [ASSEMBLING THE PIECES](#), PROVIDES ADDITIONAL TOOLS NEEDED TO BEGIN THE IMPLEMENTATION PROCESS, WHETHER YOU ARE LOOKING TO ROLL OUT THE STANDARD IN ITS ENTIRETY, OR SIMPLY ADDRESS PARTICULAR AREAS OF PSYCHOSOCIAL RISK.



TELECOMMUTING AND REMOTE WORK

Many organizations have made the decision to allow employees the flexibility to work from home temporarily as they resume normal operations. As technology has become more effective, some organizations are able to continue operations remotely. While providing staff the choice to work from home may alleviate some of the anxiety caused by potentially returning to the workplace, it introduces new concerns and challenges. The following are things to consider as you gradually plan the return, conduct a flexible business resumption plan, or encourage some staff to continue remote work.

Make the time for regular check-ins. For those staff who may not be attending the office regularly, or at all, recognize that some extra effort needs to be taken to ensure they feel connected to management. Set up a call every so often, as this will demonstrate your appreciation for their effort.

Provide staff with the necessary tools. If staff were utilizing particular tools or workspace items at the office they will likely need them at home (such as monitors, printers, ergonomic chairs, etc.). Make sure you conduct a detailed scan of what supports you were providing in the workplace, and extend those to the home. This helps to limit the physical stress that may be encountered when working from home.

Encourage breaks, monitor time and be open. It is easy for staff or management to work longer hours when at home. This may include checking or sending emails late at night, not taking breaks from a home work station, or not taking vacation time. Set clear expectations and encourage staff to take time off if they are eligible. Make an explicit effort to show that off-hours work or overtime isn't expected if it is not needed.

Provide support. Staff may be struggling with a multitude of competing responsibilities – such as childcare, elder care, noise in the home or interrupted connectivity. These are unique stressors not seen in most workplaces, and thus staff may require additional support to manage their stress. Explore creative ways to offer team-building and group activities to remote workers, and improve access to benefits.



While providing staff the choice to work from home may alleviate some of the anxiety caused by potentially returning to the workplace, it introduces new concerns and challenges.

YOUR OWN WELL-BEING

Whether you are a business owner, manager or senior executive, it is important for you to realize that you too need and deserve a psychologically-healthy and safe work environment. By taking care of yourself, you are better able to respond to concerns as they arise among your staff. Clear leadership comes from clear expectations for one's own self, so take the time to recognize when you would benefit from some support or need a break. The benefits of doing this are healthier management, healthier staff and a work environment that is better able to innovate. Some recommendations:

Practice mindfulness. Mindfulness is the awareness that arises when we pay attention, non-judgmentally, to what is happening in the present moment.²⁰ This includes events happening externally in the world, as well as internally inside each of us. Practicing mindfulness helps us appreciate the small joys in life and combat negative thoughts by mitigating our negative responses to stress. Your responsibilities can be incredibly taxing. Introducing moments of mindful practice into your day-to-day routine supports you when responding to crises. Focusing on reading a book, being present and mindful while sitting down for lunch or focusing on your surrounding while going for a walk are all examples of everyday mindfulness practices. More involved practices may include experiencing 'full body scan,' guided meditations or mindfulness-based therapies.

Build a support network. Seek out other leaders and learn from their experiences, actions and innovation. Since we are all learning how to navigate this current moment in history together, there is no shortage of people interested in connecting and learning from each other. If you are feeling isolated, reach out to your network and form peer groups that can help one another navigate these changes.

Build a team. Every employee and manager in your organization is a leader in some way. As you begin the return to work process, acknowledge this by building a team that will help to initiate the process and see it through to completion. Your guidance is irreplaceable, but by seeking out help from internal resources you will get there quicker, safer and in creative ways.

Communicate intent, not task. Trust in your team will lead to success. There may be solutions to problems you haven't thought about, and by communicating your intent you provide the freedom of initiative to the people who will help the organization get closer to the finish line. By not micromanaging results, you instill a sense of trust and respect within the workforce while also allowing you to shift focus to other emergent concerns.

Be kind to yourself. Practice 'contemplative acts of self-compassion' daily. Give yourself the permission to feel a bit lost, worried or stressed. Acknowledge that many are feeling this way, and that it is ok to take a moment to just breathe. A brief pause does not mean you are inactive. It means you are readying yourself for the next bound.

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APPENDIX A: ADDITIONAL RESOURCES

Government of Ontario

[Guideline on developing a COVID-19 workplace safety plan](#)

A guide for employers on developing a plan to work safely, with information on controls that need to be put into place to make the workplace safer for everyone.

Ministry of Labour, Training and Skills Development

[Resources to prevent COVID-19 in the workplace](#)

A webpage dedicated to sector-specific guidelines and posters to help protect workers, customers and the general public from COVID-19 in Ontario.

Public Health Ontario

[COVID-19 Public Resources](#)

Resources and fact sheets to support with containing COVID-19.

Ministries of Health & Long-Term Care

[COVID-19 Guidance for the Health Sector](#)

Guidance documents to support the health sector.

Mental Health Works

A nationwide social enterprise of CMHA Ontario, [Mental Health Works](#) provides tailored, capacity-building workshops and consultations to organizations looking to improve and protect employee mental health, while also realizing the fiscal benefits of mental health promotion.

ConnexOntario

A centralized, consistently updated, repository of resources available to all Ontarians. [ConnexOntario](#) can connect you with mental health and addictions resources, and provides 24-7, real-time support through its chat and phone services.

Togetherall

A free online peer-to-peer support service that offers immediate online assistance to people struggling with mild-to-moderate anxiety and depression. Patients can be referred to [Togetherall](#) and register themselves.

BounceBack

A free skill-building program managed by CMHA, [BounceBack](#) is designed to help adults and youth 15+ manage low mood, mild-to-moderate depression and anxiety, stress and worry. Delivered over the phone with a coach and through online videos, participants get access to tools that support them on their path to mental wellness.

The Ontario

Caregiver Association

[The Ontario Caregiver](#)

[Organization \(OCO\)](#) supports Ontario's 3.3 million caregivers: people who provide physical and emotional support to a family member, partner, friend or neighbour. The OCO acts as their one point of access to information, so they have what they need to be successful in their role.

CMHA ONTARIO BRANCHES

CMHA Brant Haldimand Norfolk

www.bhn.cmha.ca

CMHA Champlain East

www.cmha-east.on.ca

CMHA Cochrane Timiskaming

www.cmhact.ca

CMHA Durham

www.cmhadurham.ca

CMHA Elgin

www.cmhaelgin.ca

CMHA Fort Frances

www.cmhaff.ca

CMHA Grey Bruce

www.cmhagb.org

CMHA Haliburton, Kawartha, Pine Ridge

www.cmhahkpr.ca

CMHA Halton Region

www.halton.cmha.ca

CMHA Hamilton

www.cmhamilton.ca

CMHA Huron Perth

www.cmha-hp.on.ca

CMHA Kenora

www.cmhak.on.ca

CMHA Lambton Kent

www.lambtonkent.cmha.ca

CMHA Middlesex

www.cmhamiddlesex.ca

CMHA Muskoka-Parry Sound

www.mps.cmha.ca

CMHA Niagara

www.cmhaniagara.ca

CMHA Ottawa

www.ottawa.cmha.ca

CMHA Oxford County

www.cmhaoxford.on.ca

CMHA Peel Dufferin

www.cmhapeeldufferin.ca

CMHA Sault Ste. Marie

www.ssm-algoma.cmha.ca

CMHA Simcoe County

www.cmhastartalking.ca

CMHA Sudbury/Manitoulin

www.sm.cmha.ca

CMHA Thunder Bay

www.thunderbay.cmha.ca

CMHA Toronto

www.toronto.cmha.ca

CMHA Waterloo Wellington

www.cmhaww.ca

CMHA Windsor-Essex County

www.windsorsex.cmha.ca

CMHA York And South Simcoe

www.cmha-yr.on.ca