

Supervisor Guide: The 4Rs for Workplace Mental Health Support

| When you observe changes in normal patterns of behaviour - DO THIS | | | | |
|--|--|--|--|--|
| | Notice - What is different? | | | |
| | ☐ Physical: tired, lethargic, frequently sick, less groomed, increased bouts of energy, physical | | | |
| | complaints (eg headaches) | | | |
| | ☐ Behaviour: repeatedly late to work, withdrawal from normal activities | | | |
| | ☐ Cognitive: difficulty concentrating, performance decline decision making problems ☐ Emotional: Irritable, loss of sense of humour, uncharacteristic loss of confidence | | | |
| | Consider | | | |
| | ☐ Are you aware of issues in the staff member's personal life that could be impacting them? | | | |
| Ф | ☐ Could the behaviour be related to stress factors – personal or workplace? | | | |
| Recognise | Get ready to have a conversation | | | |
| <u>=</u> | ☐ Be prepared to clearly communicate the concerns you have with examples. | | | |
| 6 | ☐ Are there other indicators that may highlight issues? (absence, feedback from colleagues or | | | |
| ၓ | clients, incident reports). | | | |
| Ф | ☐ Be ready to listen non judgementally. | | | |
| œ | ☐ Are there any repeated patterns of behaviour? | | | |
| | Dif there are workplace behaviours that are causing concern start documenting conversations, and save in a secure location. | | | |
| | Check that you are not: | | | |
| | ☐ Ignoring your observations. | | | |
| | ☐ Jumping to conclusions or making assumptions. | | | |
| | ☐ Treating the person differently. | | | |
| | ☐ Waiting and assuming that the uncharacteristic behaviour will go away. | | | |
| | | | | |
| | If the staff member is still at work, arrange an appointment in a private work location. If the staff | | | |
| | member is not at work, in most circumstances it is appropriate to phone the staff member. | | | |
| | Communicate in a warm, supportive and respectful manner. If workplace relationships are complex or if you feel uncertain, seek advice from your HR representative. | | | |
| | Allow sufficient time | | | |
| | ☐ Be prepared to be understanding. | | | |
| | ☐ Pick a suitable time and a private quiet space. | | | |
| | Start a conversation | | | |
| | ☐ Explain why you are wanting to talk, give examples | | | |
| | •"You don't seem yourself. I have noticed you seem tired and I haven't seen you in the tea room | | | |
| 7 | in the last few weeks. I'm wondering if you're OK?" | | | |
| Ĕ | •"I'm concerned about you. I've noticed lately you are having trouble withwhich is usually something you do very well. " | | | |
| spond | •" I'm concerned about you. In our team meeting you seemed agitated and appeared angry when | | | |
| S | we were discussingAre you OK?" | | | |
| e e | *"I don't wish to intrude on your privacy but something seems to be impacting on you at work and | | | |
| LL. | I am concerned. Are you OK? I want you to know what help is available" | | | |
| | ☐ A decision not to disclose details to you should be respected - if they do not wish to share, | | | |
| | don't force a conversation. Reassure the staff member that 'your door is always open'. | | | |
| | ☐ Guide the conversation, encourage the person to do most of the talking. Ask open ended | | | |
| | questions. "How long have you felt this way?", "What might have caused this reaction?". Give time | | | |
| | to reply – silence is ok. Check that you are not: | | | |
| | ☐ Speaking down to the person or using derogatory terms. | | | |
| | ☐ Trying to diagnose a medical condition. | | | |
| | ☐ Dismissing any potential fear the person may have about being discriminated against if they | | | |
| | report mental health or other health concerns. | | | |

| support ext steps | Encourage action for personal support "Are you getting any assistance/ support from others/talked to your GP?" "How can I support you?" □ Provide details of EAP counselling and wellbeing support. □ Is there immediate concerns or risk to person or others? See workplace mental health support pathways. Have workplace stressors been identified? □ Is mental health impacting work or could the behaviour be workplace stress related? □ Paraphrase back/use clarifying questions to ensure understanding. "So it sounds like" "It seems to me you are saying" □ Check Psychosocial risk management webpage for more information about managing psychosocial hazards. | |
|---|---|--|
| Refer for support Consider next steps | Consider next steps □ Let the person know options are available to support them. See workplace mental health support pathways. □ Ask what they would like to do from here □ If a request for workplace adjustments is made, commit to following up and meeting again if you are unsure if the adjustments are possible - do not immediately decline a request. □ Seek support from HR/HSW to address psychosocial hazards if identified or for support regarding reasonable adjustments. Don't: □ Rush to solve problems or tell the person what they must do. □ Assume a single conversation will be all that is required. □ Ignore possible workplace stressors that are contributing or behaviours of concern that are impacting the workplace. | |
| Re-Connect - continue the Conversation Empower | □ If the team member has not shared anything with you but your concerns remain − check in again a week later, at a suitable time and location. Reiterate you are happy to talk when they wish to. □ If the person takes a period of leave for personal mental health reasons, seek to maintain some simple contact (eg every few weeks). Contact Workplace Health and Rehab for return to work support. □ Communicate sensitively but clearly and honestly to build trust. □ Continue to offer support, and seek to empower and work with the person to have agency and responsibility to manage their health and work. Check workplace mental health support pathways. □ Re-connect in agreed time frames to review progress. Ensure you allow sufficient time and in a suitable location. □ To support further conversations/approaches use Manager Assist EAP for general advice on mental health and communication or consult HR client partner for specific case advice. □ Leading a Mentally Healthy Workplace tip sheet provides helpful guidance on leading well for thriving teams. □ Ignoring ongoing issues where mental health is impacting performance is not helpful to you or the staff member. Before proceeding with any actions to address performance enquire again if there are health concerns causing impact at work. See support from local HR Client Partner. □ If you make temporary changes to someone's working arrangements, make sure you inform other staff who need to know. Consult with the person on what communications are planned and get their consent. You should not breach confidentiality and share health information but ensure others who need to know are aware of changed arrangements so they can be supported in practice (eg if the adjustments mean changes to usual workflows). The person can disclose their health information to colleagues if they choose to. □ If there is disagreement between you and the staff member about the appropriate course of action don't let it drag on − contact your HR Client Partner for support. □ Forget to document notes and co | |



Workplace mental health support pathways

If mental health is impacting work capacity or behaviour at work consider best pathways:

| 1. | Address identified workplace stressors | | | | |
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| | If identified: can simple changes be made? | | | | |
| | ☐ Apply <u>SMART work design</u> principles | ☐ Altering the work environment | | | |
| | ☐ Skill development | ☐ Increasing role clarity | | | |
| | ☐ Support with work prioritisation | ☐ Increasing options for control over work or flexibility☐ Reviewing or modifying workload | | | |
| | □Addressing workplace relationships concerns (seek HR support) | | | | |
| 2. | Reasonable Adjustments | | | | |
| | The types of adjustments will depend on the individual health needs/symptoms, and in accordance with medical advice. Consult Mental Health Recovery at Work webpage. | | | | |
| | ☐ Consider the inherent requirements of work and key operational needs of your area, the likely impact of any adjustments on other team members, and how long adjustments can be accommodated for. | | | | |
| | ☐ Any agreed adjustments should be documented and have a review period. Contact HR or Workplace Health and Rehab for support. | | | | |
| 3. | Self-Manage and Monitor | | | | |
| | ☐ Agree to monitor, arrange subsequent meetings to review. | | | | |
| | ☐ Allow the person to self-manage without intervention. If there are workplace behaviour concerns, ensure the person understands what about their behaviour may need to change. Clarify expectations around performance. | | | | |
| | ☐ Encourage the person to seek assistance – GP, EAP (1300 307912). | | | | |
| 4. | HR advice | | | | |
| | ☐ For leave options to support recovery or matters | related to performance at work. | | | |
| 5. | Workers' Compensation | | | | |
| | ☐ If the person believes their condition is related to work and wishes to lodge a workers compensation claim, refer them to Work Injury Management 3365 6022 or webpage. | | | | |
| 6. | Immediate intervention: If there may be any immediate risk to the person or others take action. | | | | |
| | ☐ If the staff member discloses issues of a serious nature, such as suicidal ideation or domestic and family violence, seek further support immediately. There are options through the EAP to have a counsellor speak with a staff member immediately to undertake appropriate risk assessments or crisis response. This is called a 'warm transfer" and takes place when the staff member is with you. You can also contact your HR representative for further support or UQ security in emergencies. For more information on how to respond: Supporting a person with suicidal thoughts. | | | | |
| | ☐ If you have concerns for a staff members wellbe welfare call from EAP, or seek support for this from | | | | |
| | ☐ Violent or aggressive behaviour – contact Secur i | ty 3365 3333 or 000. | | | |