Government
Health & Safety Lead

Creating mentally healthy work and workplaces

A guide for public sector health and safety leaders and practitioners

May 2021

New Zealand Government

Disclaimer

Creating a mentally healthy workplace

Workplace mental health and wellbeing is a key focus for many public sector agencies. But what does mentally healthy work look like, and what should public sector agencies do to create this within their workplace?

As research continues to reveal the link between modern work practices and mental harm, it is essential that agencies take action to identify and effectively manage the mental health risks in their workplace as part of their duty of care outlined in the Health and Safety at Work Act 2015.

This guide explores what mental harm is, the factors that contribute to mental harm, how we can create mentally healthy work, and what a comprehensive system to support a mentally healthy workplace looks like.

This guide has been written to support health and safety leaders and practitioners to review how their agency is currently enabling mentally healthy work, and to identify their agency's gaps or opportunities.

Contents

Understanding mentally healthy work

What is mental health and wellbeing?

Mental health and wellbeing is complex. When we talk about **mental health** what we are referring to is the presence or absence of mental illness. Whereas **mental wellbeing** refers to our state of mind – our sense of self and purpose, and our experience of positive or negative emotions.

As our mental **health** and mental **wellbeing** move along a continuum, they can affect each other: if we have poor mental wellbeing (e.g. stress from toxic work) we are more likely to experience poor mental health (e.g. mental illness) over time.

Our mental wellbeing may change from day-to-day and can be affected by how we individually perceive and respond to circumstances.

To put it simply, when we talk about our mental health and wellbeing at work, we all sit somewhere on the continuum of unwell to thriving.

Unwell   **Struggling**   **Going OK**   **Thriving**

Adapted from Business Leaders' Health and Safety Forum & Leading Safety Protecting Mental Wellbeing at Work

What is mental harm?

WorkSafe defines mental harm as significant cognitive, emotional, or behavioural impact arising from one or more work-related risk factors. Mental harm of this kind may be either acute or chronic and may result from single or repeated exposure to risk factor(s).

This is where a risk factor(s) has affected our wellbeing, potentially to the point of causing mental ill-health or illness.

What are the things that can cause mental harm?

The things that can cause mental harm at work (i.e. psychosocial risks) can be grouped into four key areas: task, individual, social, and organisational. These psychosocial risk areas are the ones within the control of your agency and therefore should be actively reviewed and addressed as part of your agency's health and safety risk management.

When managed well, these are the things which are protective of wellbeing and will help workers to thrive within the work environment. When these factors are not managed well, they may cause harm and workers may experience increased levels of stress which can cause poor mental wellbeing and exacerbate or cause mental ill-health. Work-related harm if prolonged and/or severe can cause both psychological and physical illness. Here are some common psychosocial risk factors:

| Task	Individual	Social	Organisational
Demands	**Control**	**Workplace culture**	**Psychological safety**
The pressures (or lack of) placed on a worker while at work. They include things like workload, work patterns, type of work, physical or emotional stressors, match of skills to role. This can include exposure to stressful or traumatic work.	The level of autonomy or say a worker has (or perceives they have) in the way they do their work. This includes the pace of work, the pattern of work, and enabling workers to use their skills and initiative in their work.	The workplace culture and the affects of it on workers. This includes promoting a positive workplace culture, diversity and inclusion, and dealing with unacceptable behaviour such as bullying, harassment or discrimination when it occurs. This also includes how safe workers feel to interact with the mental health interventions.	The workplace culture and perceived safety for interpersonal risk taking (i.e. the degree to which workers are comfortable expressing themselves, asking questions, sharing ideas and speaking up without fear of negative consequences.
Role clarity	**Development**	**Support**	**Organisational justice**
Whether a worker fully understands and is able to undertake the requirements, responsibilities and expectations of their role, and understands how their role contributes to the team and the wider organisation.	The perceived level of opportunity for personal or professional progression or growth.	The level of information, guidance, encouragement, and resources provided by the organisation, managers, and colleagues to enable a worker to do their job fully.	How fairly a workplace treats its workers, particularly in how applies its policies and procedures, manages poor performance, and makes decisions about allocation of work and resources.
Workplace environment	**Work-life balance**	**Violence and aggression**	**Reward and recognition**
The conditions that a worker is exposed to in their work, including exposure to hazardous working environments e.g. excessive noise levels, unsafe machinery, extreme temperatures, use of hazardous materials, and condition of the workplace.	The perceived balance between a worker's work demands and their personal demands/ activities in their life that are important to them.	The exposure to abuse and/or harm (or the threat of) in the workplace or in undertaking work duties. This can include a broad range of both physical and psychological forms of violence and aggression.	The amount of formal and informal reward or recognition given by the organisation for a worker's efforts. This can include positive feedback, opportunities to use skills and experience, and further development or upskilling opportunities.
Remote and isolated work	**Meaning and purpose**	**Workplace relationships**	**Change**
The location in which a worker is required to work and the level of access to resources, support, and interaction with others. This includes the travel required to reach the work location	The level of value or contribution a worker perceives their work and/or efforts to have.	The quality of individual and team relationships workers have in the workplace and the feelings of inclusion and belonging that workers feel.	How organisational change is managed and communicated to workers in the organisation. This includes restructures, resource re-allocation, and starting or stopping work. his includes how workers are supported to manage and adapt to changes..

What is mentally healthy work?

Mentally healthy work is work where the risks to workers' mental health are eliminated or minimised, and their wellbeing is prioritised. When work is mentally healthy, it is usually well-designed and improves mental wellbeing. This is 'good work'.

When work is mentally unhealthy it may be referred to as 'toxic work' which can harm mental wellbeing.

Designing mentally healthy work requires an agency to think about mental health risks like other work-related health and safety risks and proactively address the factors that can cause harm. Creating mentally healthy work is not about removing all pressures or stress from a worker; it is about designing and managing work effectively. This includes thinking about the factors that can work to prevent mental harm occurring (i.e. protective factors).

In some instances, it is about ensuring an effective balance between several protective factors and areas or aspects of work that have the potential to be harmful. For example, in some cases the risks from high workload could be managed by offsetting them with protective factors such as a strongly positive culture, highly supportive management, or high reward and recognition.

When the risks are designed out of work and/or managed well, workers are more likely to experience mental wellbeing and flourishing at work. When these psychosocial risk factors are not designed out of work or managed effectively, it can create poor mental wellbeing which can lead to mental harm. This may be expressed psychologically, physically, or behaviourally.
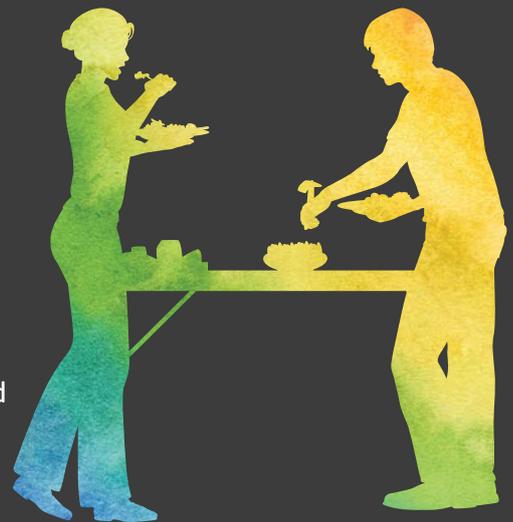
Toxic work	Decent work		Good work
Unwell	Struggling	Going OK	Thriving

Adapted from Business Leaders' Health and Safety Forum & Leading Safety Protecting Mental Wellbeing at Work.

> " When psychosocial risks are managed well, they create good work which helps workers to thrive. When psychosocial risks are managed poorly, they create toxic work which can harm workers. "

Creating mentally healthy work

What is required under HSWA 2015?

Under the Health and Safety at Work Act 2015 (HSWA), agencies (as PCBUs) have a primary duty of care to ensure the health and safety of workers – this includes psychological health as well as physical health. This requires agencies to understand and control the risks of mental or psychosocial harm in their workplace. This places the responsibility on the agency to eliminate or minimise exposure to mental health risks where it relates to work.

What should agencies focus on?

✓ **Agencies should focus on ensuring their workers aren't mentally harmed by the work they do.** This means prioritising the implementation of effective and appropriate interventions for protecting the mental health of workers from work-related psychosocial hazards. This puts the focus on the organisation proactively managing the risk before the harm has been done (i.e. through primary interventions such as good work design).

Individually-focussed interventions (i.e. secondary and tertiary interventions) are an important component of a comprehensive mental health system, however agencies should prioritise harm-prevention through good work design, rather than solely supporting the worker to respond better to toxic work through secondary and tertiary interventions to support. This is a parallel to the hierarchy of controls we consider for other risks. Similar to personal protective equipment, agencies should not rely on tools at an individual level that may protect a worker when they are exposed to a risk; agencies should instead prioritise eliminating the risk at the source so far as is reasonably practicable.

✓ **Agencies should take a risk management approach to mental health** and start by eliminating or minimising the level of risk caused by work-related factors. Under HSWA 2015, workplaces have a duty of care to manage risks arising from work. These are the things that an agency can directly control and influence in the workplace and therefore should be the primary focus for an agency. The work-related factors that an agency can directly control should be the focus of its psychological harm risk management efforts. This does not necessarily mean removing a potentially harmful factor entirely, but instead looking at what can be increased e.g. if job demands are high – can role clarity, support, rewards or recognition be increased?

> "In order to support people to be well and thrive, we must first ensure we are not harming them.

How can I identify the risks?

It's important to understand which psychosocial risk factors are affecting workers as well as how they are affecting workers. Psychosocial risks are multifaceted, complicated, and subjective. Different psychosocial risk factors may present themselves across your agency depending on the nature and area of work, and the individuals working in them.

Psychosocial risk factors may affect workers and teams differently. Use a risk assessment tool or mental wellbeing by design tool to understand the risks for your workers in the context of your agency or business unit.

It is important to understand the unique psychosocial risks affecting workers or business units as the interventions or controls need to be tailored to the type of risk (e.g. an intervention of "resilience training" may not be an effective control for the psychosocial risk of "repetitive, unchallenging tasks").

Mental Wellbeing by Design – Ratings

Name of operational or functional group: _____

TASK — Rate the extent to which the factors below are harming or protecting the mental wellbeing of people in your work area. 1 = Very harmful and 10 = Very protective.

Harming Factors	1	2	3	4	5	6	7	8	9	10	Protective Factors
Excessive workload											Tolerable workload
Repetitive, unchallenging tasks											Variable, challenging tasks
Fast-paced work											Well-paced work
Unrealistic timeframes & targets											Realistic timeframes & targets
Inadequate resourcing (equipment & people)											Adequate resourcing (equipment & people)
Unclear goals & expectations											Clear goals & expectations
No autonomy or control of task or pace of work											Autonomy & control of task or pace of work
Lack of involvement in decisions											Engagement in decisions
Poor physical working condition											Good physical working conditions
Add other harming factors relevant to the task:											Add other protective factors relevant to the task:

Considering your ratings above, circle the extent to which this reflects toxic, decent or good work.

Overall Task Assessment: Toxic   Decent   Good

Example tool: Business Leaders' Health and Safety Forum & Leading Safety ratings tool

What are the controls or interventions?

There are a range of actions or interventions that agencies can take to protect and/or enhance mental health and wellbeing of workers. These are categorised into three distinct groups which generally correspond to the mental wellbeing continuum. When primary interventions such as good work design are the core focus, workers are more likely to thrive. An effective system ensures an appropriate balance of resource and effort across the levels of interventions.

Eliminating or minimising psychosocial risk factors through good work design should be a core goal of your efforts. Where it is not practicable to eliminate or fully minimise psychosocial risks, or substantially minimise a particular psychosocial risk, agencies should consider how other factors that interact with this risk could be enhanced. Additionally, agencies should consider where secondary and tertiary interventions can play a supportive role in minimising the risk.

Psychosocial safety climate, perceptions of good management competence, feelings of inclusion and perceptions of organisational justice have all been shown to offset some of the negative effects of other psychosocial risks. Remember good work is about effective management of psychosocial risks, not necessarily removing them altogether.

Primary interventions: address work factors

These are things that address issues at the source. They look at the work/workplace factors themselves to prevent problems from continuing and having an adverse effect on worker health. This may include how work is designed, how demands are managed, and how workers are supported to do their jobs.

most effective (preventative)

Secondary interventions: build resilience

These focus on helping employees deal with issues by building individual psychological resilience, either proactively or reactively. However, they do not address the underlying cause of the problem. This may include resilience training, mental health first aid, peer support, and health education and promotion.

Tertiary interventions: provide support

These interventions are aimed at reactively improving the well-being of employees who are experiencing mental ill-heath. They provide targeted support for individuals to recover. This may include employee assistance programmes, incident support, and return-to-work programmes.

least effective (reactive)

An alternative sense-making framework is the Business Leaders' Framework for managing Mental Health and Wellbeing at Work

How can I check our interventions are in place and working?

Agencies should ensure they have effective assurance mechanisms in place to check that their interventions are in place and working as expected, including competency, controls, and culture. Assurance mechanisms will vary depending on the level and types of interventions put in place for the specific psychosocial risks identified. Here are some examples of the types of assurance mechanisms at the different intervention levels:

Primary

- Proportion of high-quality manager/worker one-to-ones completed (via self-report to HR)
- Proportion of workers that agree their workload is manageable (via pulse check)
- Proportion of workers acceptable hours/shifts in a week (via shift tracker)

Secondary

- Participation rates in resilience education activities
- Number of engagements with peer support systems
- Uptake and attendance rates at professional supervision sessions

Tertiary

- Number of employee-assistance programme sessions used

Examples of assurance mechanisms for psychosocial interventions or controls

Sustaining mentally healthy work

How can we make this sustainable in our agency?

Enabling mentally healthy work that is sustainable requires change .requires change across all levels of an agency. This can have considerable implications financially and operationally, therefore it is essential to have engagement across all levels of your agency.

Agency leaders should focus their efforts on enabling the system-level changes within their agency as this will support the interventions put in place at the operational level to function effectively. This requires agencies to put in place the necessary structures to support the system to flourish.

Key actions for creating a 'system' approach

To what extent has my agency completed this action	Not at all	Somewhat	Fully in place
We have defined mental health and wellbeing for our agency and workers, including the cultural, individualistic, and holistic considerations of workers.			
We have selected or built a framework for mental health in our agency which we are using to understand and identify our interventions and the distribution of our efforts.			
We have documented our agency's commitment and approach (senior leader buy-in, framework, policy, position/intent).			
We have provided support (e.g. tools/guidance/training) for business units to identify the psychosocial risks for their teams/business areas.			
We have identified which psychosocial risks are critical risks for our workers to ensure senior-level oversight of the management of these risks.			
We have developed and embedded indicators for psychosocial risks which measure both work-related risk factors and individual wellbeing/resilience/prevalence of poor mental health (e.g. absence data, self-declared poor mental health)?			
We have identified the reasonably practicable controls for the psychosocial risks we have identified (prioritising primary interventions where possible).			
We have put in place reasonably practicable controls (prioritising primary interventions such as good work design where possible).			
We have allocated critical control ownership / we have identified who is responsible for ensuring that the interventions we have put in place have defined policies and procedures where required, and/or identified who is accountable for ensuring it is available at an organisational level.			
We have identified and put in place a process for how our agency will confirm our interventions are in place and functioning as expected.			
We have put in place a way of ensuring senior leaders have visibility and oversight of psychosocial risks and the interventions in place to manage them.			

What are the roles and responsibilities for creating and managing mentally healthy work and workplace?

Role	Responsibilities	Key actions
Agency	An agency (a PCBU) has a responsibility to eliminate or minimise risks, so far as is reasonably practicable. At an agency level, this means having effective systems for protecting the mental health of workers from work-related mental health risks. This may include policies, processes, guidance, training, resources, and assurance to check controls are in place and working effectively.	✓ Develop policies, procedures and guidance on mental health risks. ✓ Clearly describe roles and responsibilities, and ways to report concerns ✓ Develop training for leaders and workers on mental health risks, their consequences, and ways to manage them ✓ Provide a system for managers and workers to raise concerns and report incidents relating to mental health risks ✓ Regularly check controls are in place and are working effectively ✓ Report on themes in data collected on mental health risks ✓ Take action to address concerns that are raised by workers and managers ✓ Engage with workers, Health and Safety Representatives, and unions when making changes that may affect the health and safety of workers.
Officers	Officers have a responsibility to assure themselves that the agency is eliminating or minimising the risk of psychosocial harm from work, so far as is reasonably practicable. This means taking appropriate and proactive steps to ensure the agency is managing psychosocial risks effectively and is meeting its duties.	✓ Keep up to date with good practice for psychosocial risk management. ✓ Understand the work undertaken in their agency and the psychosocial risks associated with the work that workers, volunteers, and any other people affected by their agency's actions may encounter ✓ Check their agency has appropriate resources and processes to eliminate or effectively minimise psychosocial risks. ✓ Ensure there are systems to collect and communicate information regarding psychosocial risks and incidents. ✓ Seek assurance that their agency has appropriate controls in place to manage risks and verify these are functioning as they should be.

Role	Responsibilities	Key actions
Managers or people leaders	Managers or people leaders are acting on behalf of the agency (the PCBU). It is important they understand what the agency expects of them to support workers with to mental health risks. People leaders should help their workers to identify what might cause mental harm in their work and assess the likelihood of this happening. They should work with workers to find ways to eliminate or minimise the risk, and ensure they know how to report any concerns.	✓ Ensure they and their workers understand the agency's policies and procedures and know what their personal responsibilities are for managing psychosocial risks. ✓ Help their workers to identify psychosocial hazards and assess the risk to them. Work with workers to put in place appropriate controls. ✓ Ensure their workers understand where and how to seek support, and how to report any psychosocial incidents/concerns. ✓ Encourage a culture where your workers feel comfortable raising concerns. ✓ Act on any psychosocial concerns/incidents that workers raise, or they become aware of.
Workers	Workers should understand their role in managing mental health risks that may affect them. Workers should work with their manager to identify and assess potential risks to their mental health, and to find ways to eliminate or minimise these. They should also keep an eye out for any signs or symptoms of psychosocial harm that they may be experiencing, and report concerns and seek help early if needed.	✓ Work with their manager to identify and assess mental health risks that may apply to them or their role. ✓ Work with their manager to find ways to eliminate or minimise the risk of harm and put these in place. ✓ Raise any concerns and/or incidents relating to mental health risks with their manager or Health and Safety Representative. ✓ Ensure that they understand their agency's policies, procedures and guidance on mental health risks. ✓ Complete any training relating to managing mental health that their agency provides
Health and Safety Representative (HSR)	Health and Safety Representatives are the voice of workers at their agency. Their role is to represent and assist workers in their agency on health and safety matters, including those relating to psychosocial risks. This may include supporting workers to raise concerns with the agency about psychosocial risks in their work.	✓ Represent workers on health and safety matters, including those relating to psychosocial risk and/or harm. ✓ Make recommendations to their agency on how to improve systems and/or processes relating to psychosocial risks. ✓ Investigate complaints and risks to worker health and safety relating to psychosocial harm. ✓ Give feedback to their agency about how it is meeting its duties to manage psychosocial risks.

Tools and resources

- [Mentally Healthy work position statement](#)
  WorkSafe New Zealand

- [Health isn't just physical](#)
  WorkSafe New Zealand

- [Work-related psychological health and safety](#)
  SafeWork Australia

- [Protecting Mental Wellbeing at Work](#)
  Business Leaders' Health and Safety Forum / Leading Safety

- [Mental Wellbeing by Design Process](#)
  Business Leaders Health and Safety Forum / Leading Safety

- [Psychological health and safety in the workplace](#)
  Mental Health Commission Canada

- [Management Standards – Stress](#)
  Health and Safety Executive UK

- [Principles of Good Work Design](#)
  SafeWork Australia

- [CEO Guide to Mental Health and Wellbeing](#)
  Business Leaders Health and Safety Forum

- [Critical Risk Maturity Improvement RoadMap](#)
  Government Health and Safety Lead

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