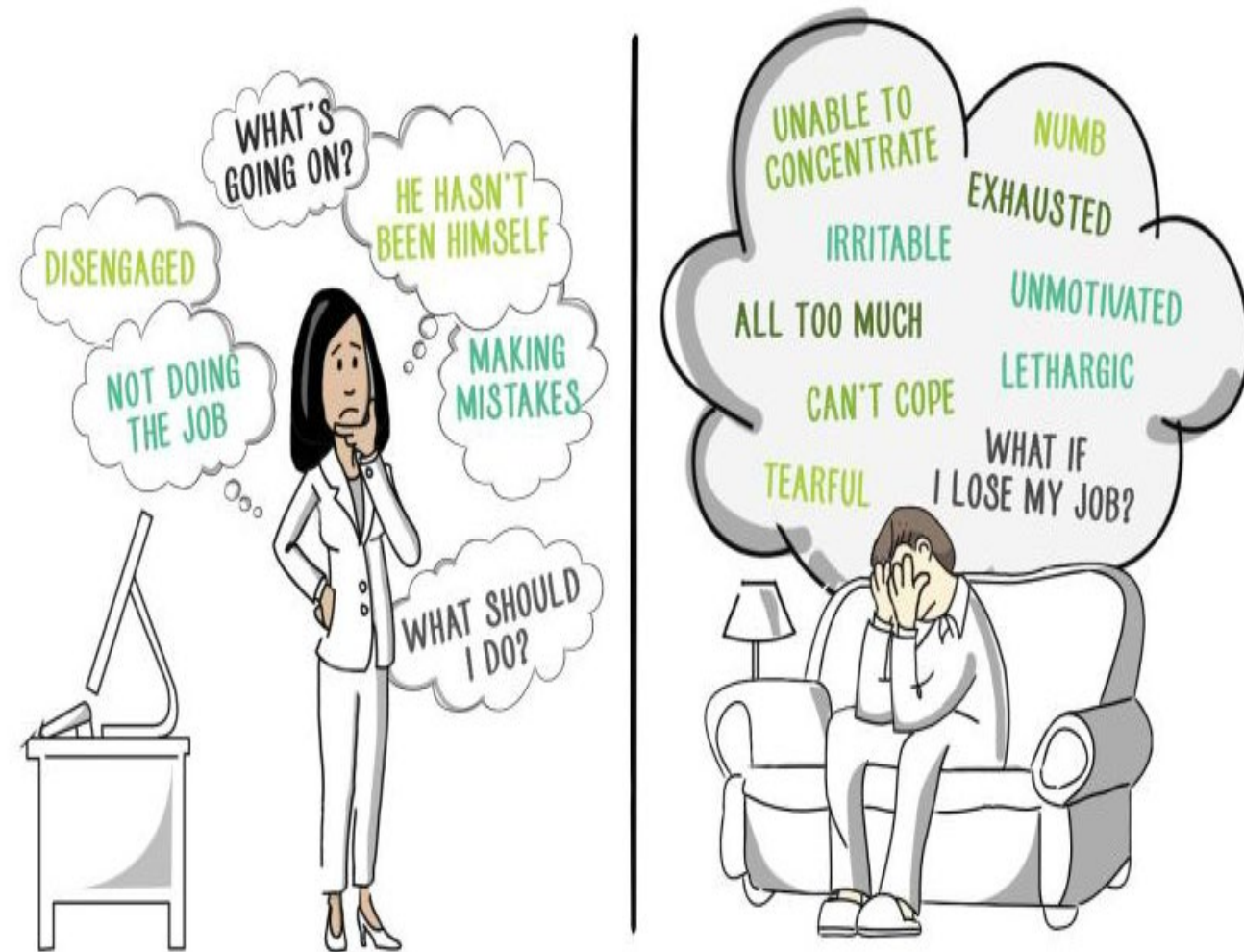# Supporting sustainable return to work among workers with common mental disorders

Prof. Karina Nielsen

30th June 2023

Overview

1. Why return to work following mental ill-health?
2. Our Approach
3. Our findings
4. Sustainable return to work
5. Implications for wellbeing and productivity
6. Toolkits

Why return to work following mental ill-health?

TOO MANY

1 in 3 'fit notes' issued for mental disorders (NHS Digital, 2017)

57% lost workdays is due to stress, anxiety or depression, £5.2bn in Great Britain each year (HSE, 2018)

FOR TOO LONG

The longer people stay off, the less likely they are to return

Some figures suggest 20% relapse, 20% exit work (e.g. Norder et al, 2017)

WITH TOO LITTLE SUPPORT

Managers do not know how to, or can not afford to, make adjustments

Employees are unsure of what to say, or what to do

Our Approach

- Interviews with 39 employees and 20 managers at multiple time points over a four-month period (7 people 4 times first four months)

- Used our IGLOO Framework to explore the resources that help returning workers stay at work (Individual, Group, Leader, Organisational level resources)

stress

anxiety

depression
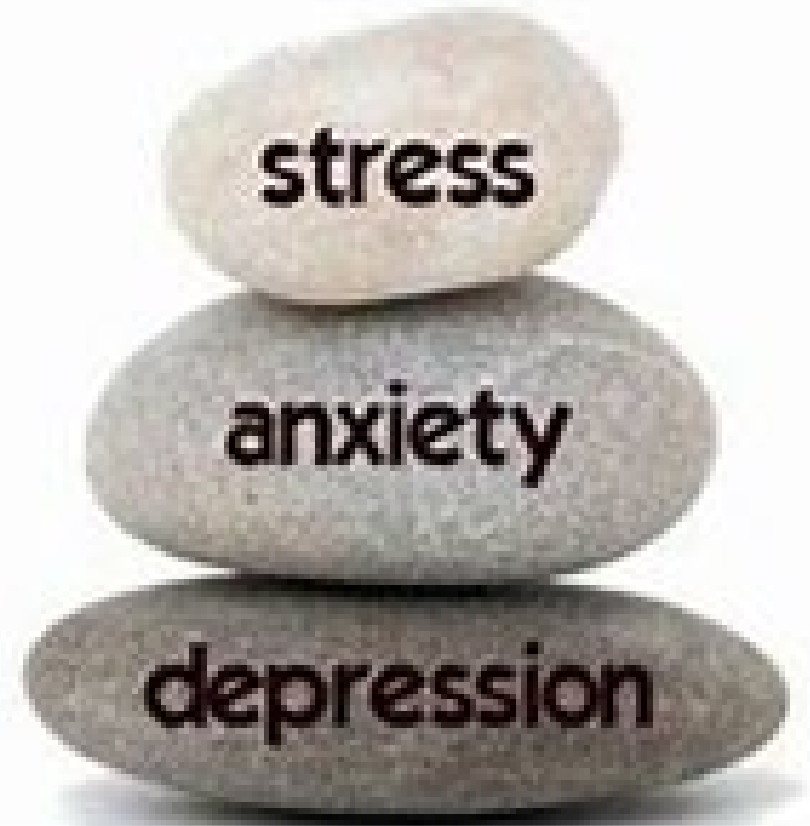
The IGLOO model
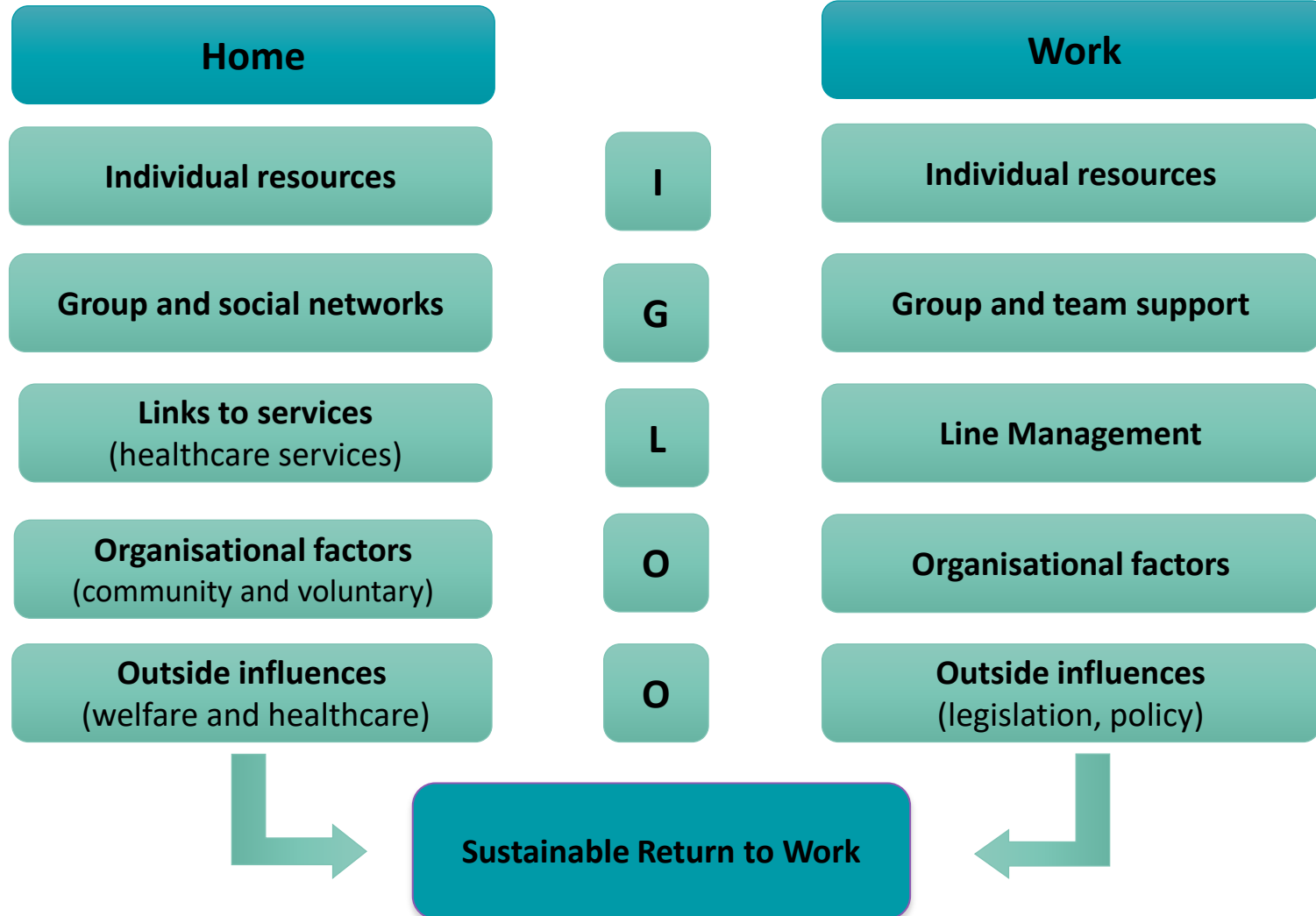
Nielsen, K., Yarker, J., Munir, F., & Bültmann, U. (2018). IGLOO: An integrated framework for sustainable return to work in workers with common mental disorders. *Work & Stress, 32*(4), 400-417.

Home		Work
Individual resources	**I**	**Individual resources**
Group and social networks	**G**	**Group and team support**
Links to services (healthcare services)	**L**	**Line Management**
Organisational factors (community and voluntary)	**O**	**Organisational factors**
Outside influences (welfare and healthcare)	**O**	**Outside influences** (legislation, policy)

Sustainable Return to Work

Thrivers, survivors and exiteers

- Three trajectories over the first four months
  - Thrivers: unusual work and family pressure prior to sick leave, settling in well, work respite from home
  - Survivors: ups and downs in the four months, but hanging in there, easy to throw off kilter
  - Exiteers: Feels unwelcome, stigmatised and looking to find new job

Thrivers, survivors and exiteers

Certainly in the last month, every day I've been in there's been something that's boosted my confidence a little bit more and made me think, yes, this is what I want to do; I do want to keep doing this; I can keep doing this. (M4)

It's off and on. Start of last week, brilliant. I was flying. Just not a care in the world. Happily just knocking it out of the park. But as it got to the end of the week, I saw that I had a (complex task) and I just went out of the window. The struggle to, like, do the amount I should be doing, the struggle to understand what I was doing. (M4)

If I get really quite emotionally overloaded, that's when I do seem to get a little bit upset. And I'm thinking the situation I'm in at the moment … I've got no support at work, other than from my colleagues. And I'm thinking, is that going to be a potential trigger, and what do I do about it? (M4)

Individual level resources
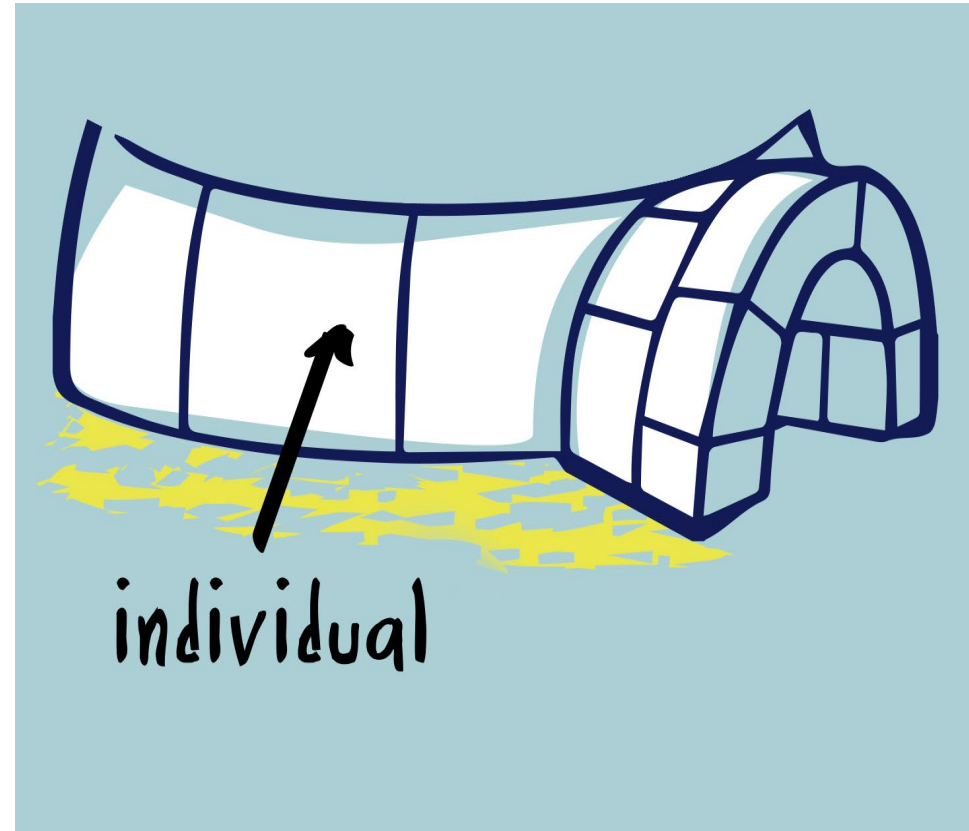
Job Crafting

Work

- Task job crafting: creating structure in the day, identifying discrete sub-tasks, identifying and prioritizing core tasks, taking small breaks between tasks, demarcation between work and leisure
- Relational job crafting: Limit social interaction, changing work location according to task, setting colleague expectations
- Cognitive job crafting: Placing a conscious focus on life, not just work, setting realistic expectations about the job, supporting others with CMDs

affinity
health at work

Job Crafting

I have a list of all the job tasks I'm dealing with and where I am with things, and where there is anything outstanding, it's in red, that gets left on my desk, all sorts of things to make things easier for everyone else. It makes things easier for me as well, because I can see at a glance what I need to do.

I actively control the way I deal with people. If I start feeling emotional I actually sit myself down and have a talk, and say, this has not worked in the past so don't do it now, and work out a way around it.

I will take days off, like yesterday I took a day off to go and visit my friend in Aberdeen, like you know we just went down to visit her little boy. And I think it's being able to say my life is bigger than my job, my life is bigger than my work…So it's really being able to prioritize myself over my work and by myself I mean me, but also the rest of my life

Group level resources
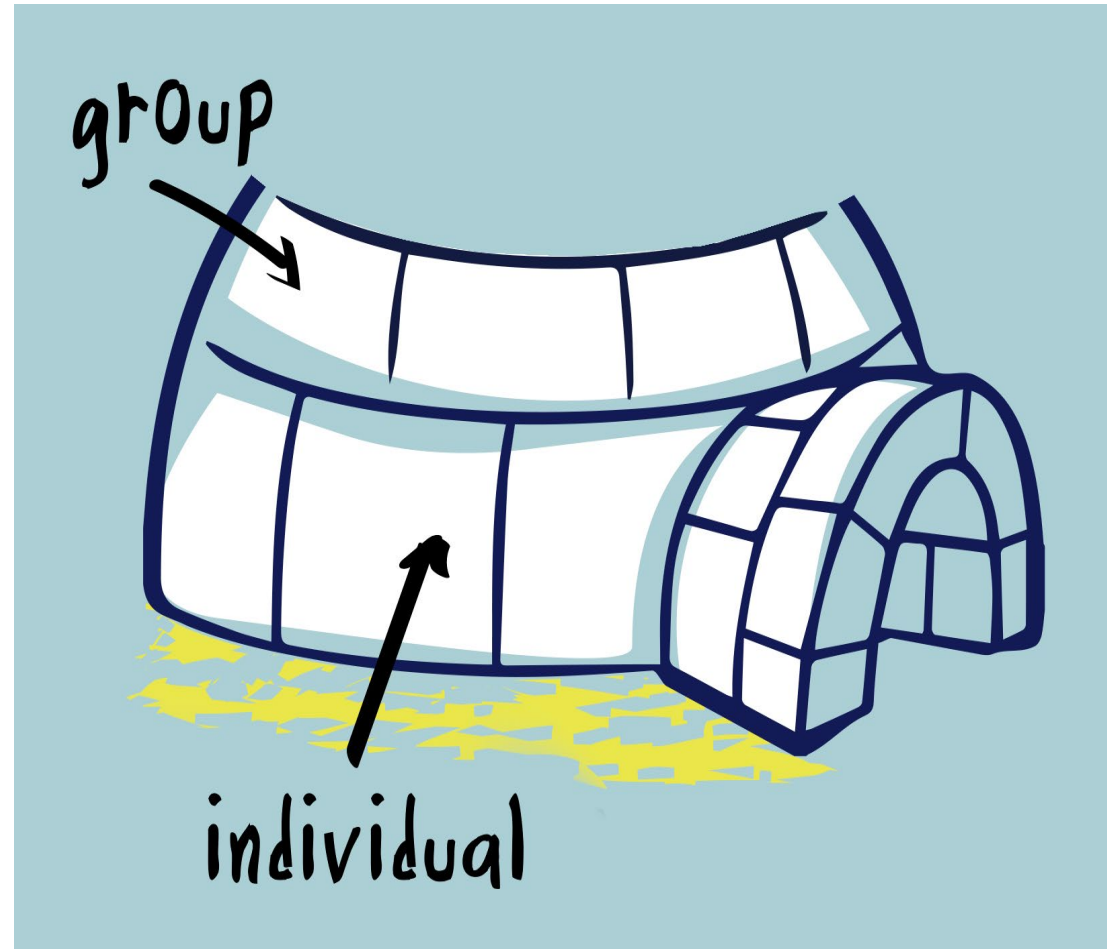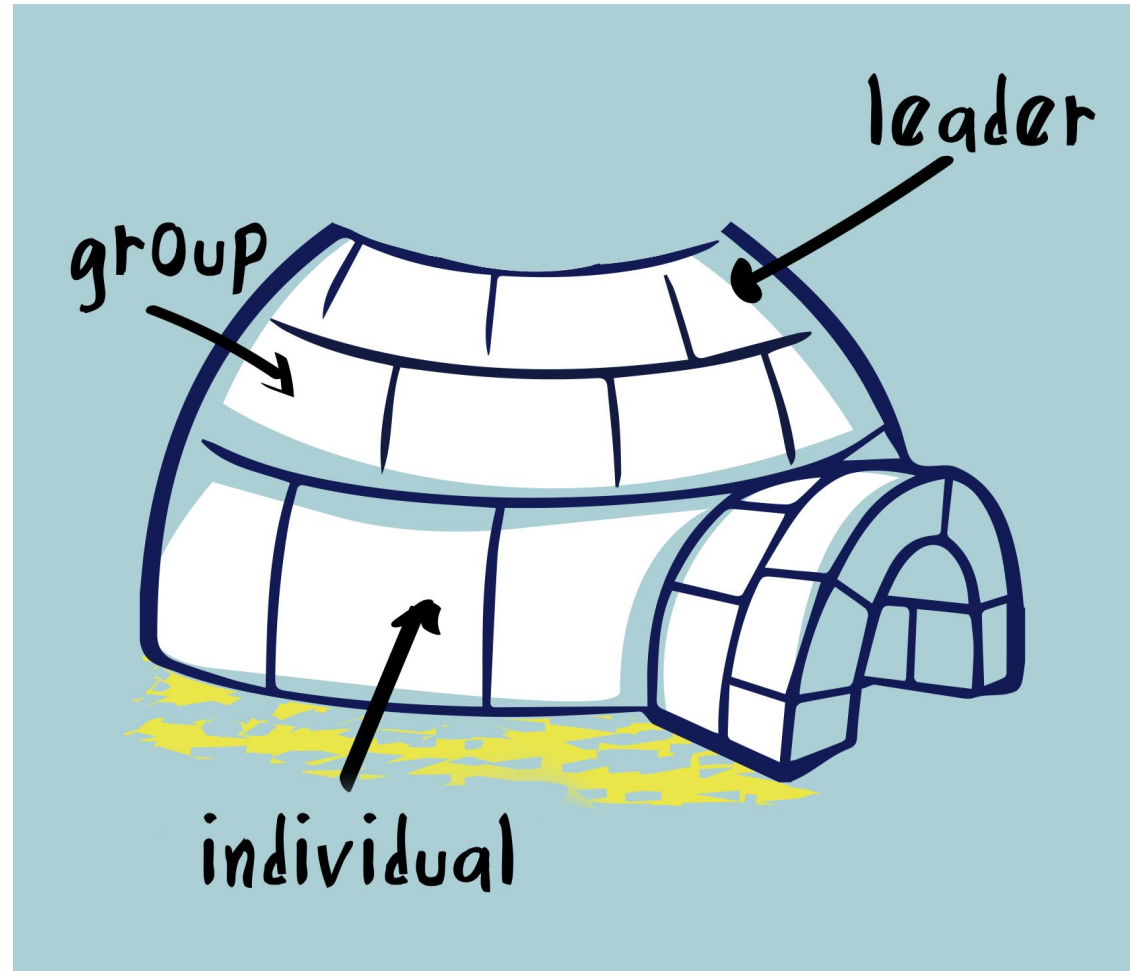
Group level resources

Work

- Instrumental support: Help with getting back into things, supporting with tasks

  > I'm surrounded by people, and I've got much more frequent contact, and I know I can say to people, just check this out, or I'm not really sure where I'm going with this, just kind of proofread it for me before I send it.

- Emotional support: Knowing colleagues are there…

  > I have spoken about … how things happen with me. And that's fine because we do get on and we do … and we can I suppose laugh about it. We can have a bit of banter and joke about it.

Leader/Line Manager level resources

Line Manager level resources

Work

- Positive attitude: seen as people, not the disease and valuable assets to team and organization
- Demonstrating care: availability on phone and in person, mental health part of meetings
- Ongoing work adjustments: Adjustments agreed up front and ongoing monitoring
- Flexibility: Holidays, days off, flexible work location and working hours and times
- Bending the rules: Buffer against inflexible system

Line Manager level resources

Line managers' supportive behaviors

Workload management
Reduced workload
Encouraging adherence to workload adjustments

Flexible work hours
Leaving work at short notice
Taking leave at short notice
Coming in late for work

Flexible work location
Working from home
Working in locations with other people
Having a safe space to withdraw to

Conversations about mental health and work*
Informal chats about mental health and work issues
Formal regular scheduled meetings about mental health and work
*Approach adapted to returned workers' needs and preferences

Long-term support and ongoing review of adjustments
Review of action plans
Graduated and supported increases in work tasks
Wider team support
Increasing support during periods of fluctuating mental health

affinity
health at work

Line Manager level resources

"If he needs to leave at a moment's notice, other than, perhaps, if we're right in the middle of the meeting, he knows that he can do that."

"There's been one occasion where I think some of her old challenges have arisen following a meeting…but again she's been very proactive, so she sought me out after that to explain that she found it difficult, and we talked through the best way to put things in place to manage that. And then booked in regular catch ups for the rest of that week to make sure that – that she was doing okay and – and that she had the support she needed."

"So yes, we met a week later, then we met two weeks later as well, and then I kept her informed. I've preferred meeting her face-to-face rather than, kind of, contacting her. But I still call her on a weekly basis at least once or twice a week just to ask her how she's getting on with her work and that has been actually going on since she has returned to work last year, so that regular contact."

"We've got a plan in place around actually buddying her up with someone when she goes back on so she's not going straight back onto it being an independent responsibility. Part of her role is to pick up investigations. We haven't done that from her coming back but she's just picked up her first one with that. We've agreed that well, that she's gonna run with that, but run it past me before she sends it off. Just…for her…peace of mind really."

affinity
health at work

Factors influencing line managers' supportive behaviors

Individual characteristics
Lived experience
Understanding the boundaries of the role

Organizational factors
Training, Human Resource policies,
Autonomy devolved from senior management

Line managers' supportive behaviors

Workload management
Reduced workload
Encouraging adherence to workload adjustments

Flexible work hours
Leaving work at short notice
Taking leave at short notice
Coming in late for work

Flexible work location
Working from home
Working in locations with other people
Having a safe space to withdraw to

Conversations about mental health and work*
Informal chats about mental health and work issues
Formal regular scheduled meetings about mental health and work
*Approach adapted to returned workers' needs and preferences

Long-term support and ongoing review of adjustments
Review of action plans
Graduated and supported increases in work tasks
Wider team support
Increasing support during periods of fluctuating mental health

affinity
health at work

I think the fact that I have a lot of empathy for what she's been through, and I've spoken to her about some of that from my own experiences at different times, I think that has definitely helped. Going back to the lived experience, I think it does make a difference. I don't think that people need it to support somebody. I wouldn't say, oh, you have to have lived experience to be able to support somebody. But, for me, it gives me an insight into how it might feel and how I would have wanted to have been treated.

I'm not a medic…employees' managers can't set themselves up in that role it would be hugely detrimental to the employee but for them as an individual as well, I think it would be really dangerous.

It's… supposed to be at the manager's discretion but it's not really, it's… I can decide I want to apply discretion and then I have to send a bid with the case up to my senior managers for them to go "yes, that's ok", which I could see why we do that, because I was under HR before I came here, so I can see why we do it and I'm fully aware why we do it, he just seems to make a mockery of them "well you've got discretion, you're the manager.

Organisational level resources
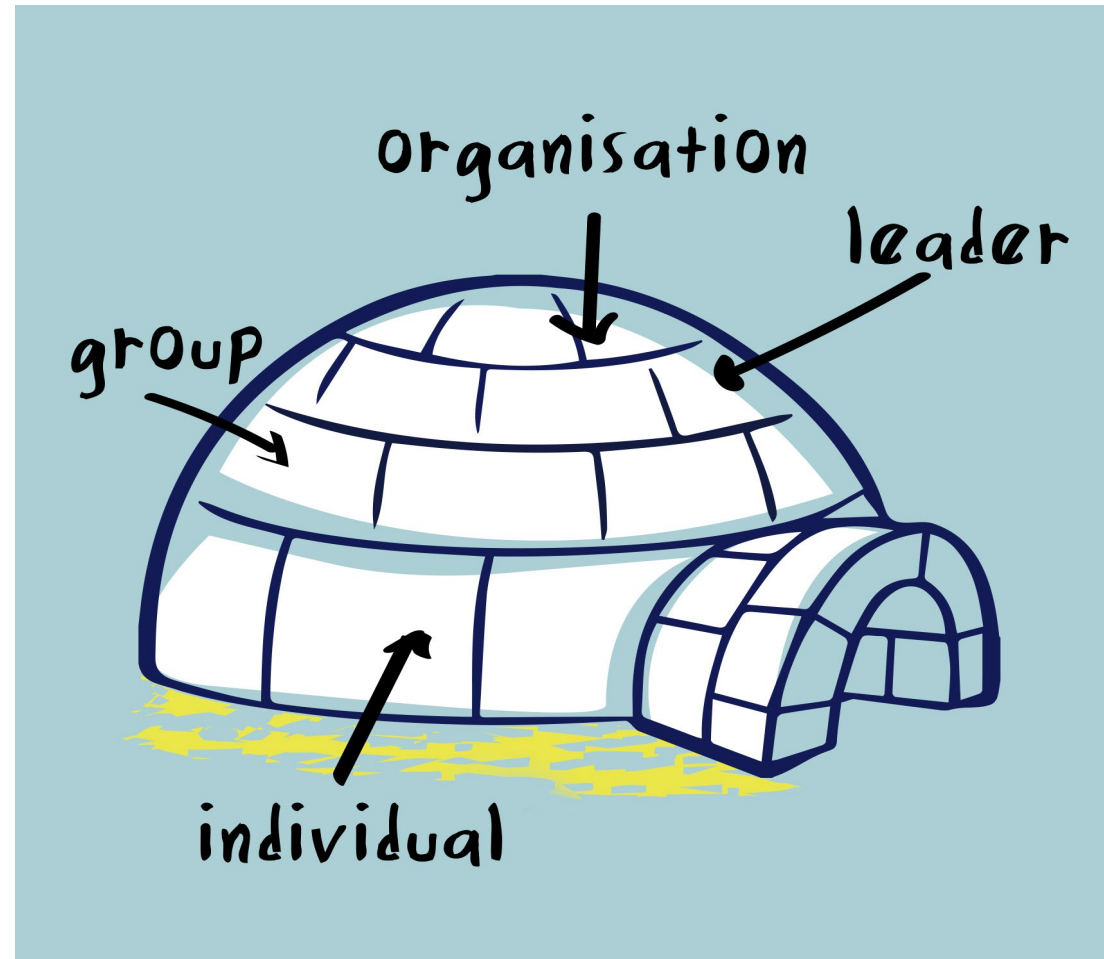
Organisational level resources

Work

- Sickness absence
- Return to work policies
- Mental health provisions
  - EAP
  - Counselling
  - Therapy

I got a lot of practical skills out of going to CBT as well, that I'd use in everyday life, not just work related, in terms like how to manage my thoughts and my worries and my anxieties, learning to let go and not hold on to the negative stuff. And actually, you know, praise myself more than just being critical

RETURN TO WORK INTERVIEW FORM

affinity
health at work

Overarching context resources

Overarching context resources

Work

I think socially and culturally there's that stigma around people with mental illness, anxiety, depression. There was still some of that judgmental opinion around that, which perhaps you see in employers. You see it in colleagues. I know that ongoing work around the world kind of improves that. I think that will help people's understanding. And knowledge that it is a debilitating condition to stop you from functioning when work is such a key part of your life and your day-to-day structures ... It's devastating. I think sharing people's experiences like this is useful. You know, mental illness is more talked about now. Depression is more talked about. So it's getting that message out there ... and (that) people do want to be at work.

The Igloo Model

Level	Responsibility to….
Individual	• Understand and take action to maintain health and work needs • Voice and share needs appropriately to access relevant support
Group	• Behave considerately towards others • Advocate and support of colleagues
Line manager	• Behave in a way that promotes and protects health • Monitor workplace risks and take action to prevent risks where possible • Signpost support where needed
Organisation	• Provide access to policies and monitor consistency of practices within local areas • Develop employees with the knowledge and skills to fulfil their responsibilities • Monitor workplace risks and take action to prevent risks, develop resources to cope with job demands and provide support services
Outside	• Variation dependant on national culture and policy *Organisations to be aware of cultural norms and the external support available within local community
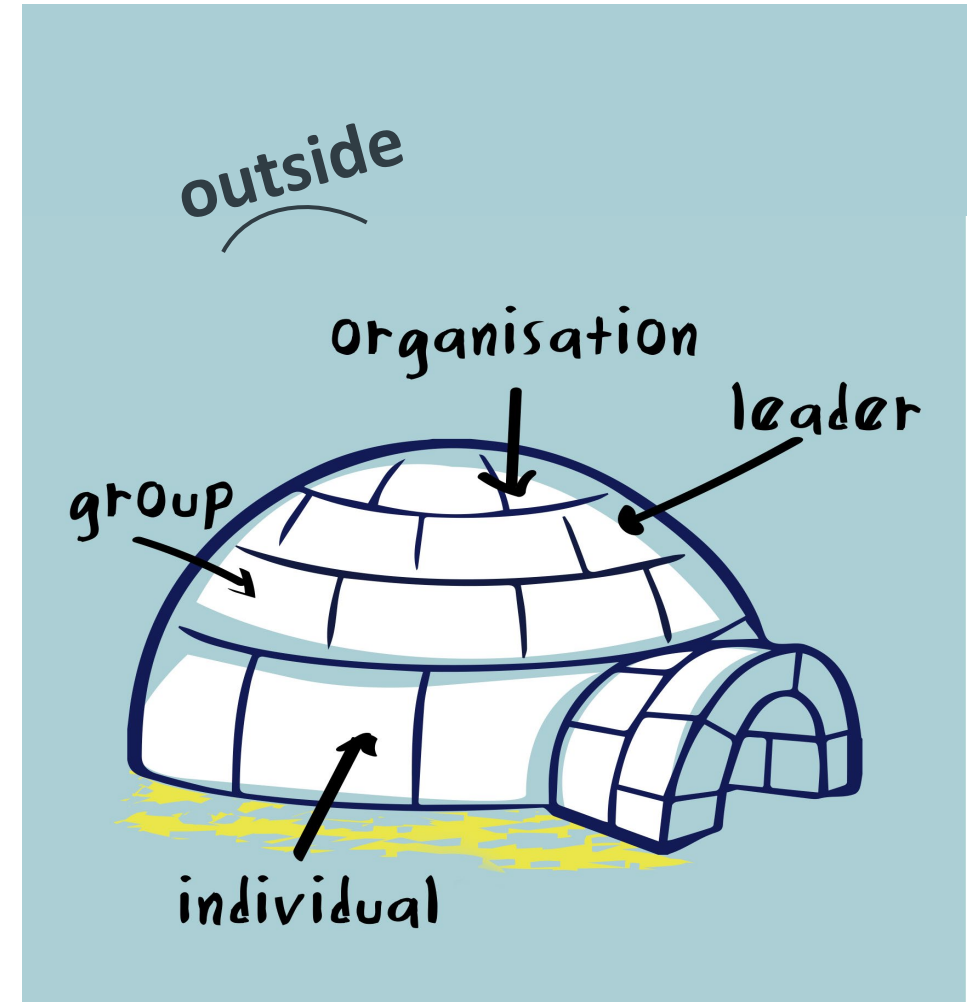
Sustainable return to work

"For me it's about creating that environment where I'm able to work, to function on some level, even if not at full capacity. …. It's tricky, because every organisation, every person [is different]. Whether ..we look at sustainability through something formal from a legal perspective or something sustainable from moral stance, I don't know. But …

I know what I need to sustain myself. I know what's important for me that may not fit everybody, people are different, values are different. So that's really difficult. I think there's no definitive answer. It's such an individualised need that people have.

Implications for wellbeing and productivity

We need to:

- Consider resources at all IGLOO levels at work

- Implement multi-level interventions

- Equip the managers with the knowledge, skills and confidence to support the returning employee

- Encourage the returning employee to draw on a range of resources rather than doing it on their own

- Re-orientate our systems to cope with fluctuating conditions (including GP services and fit notes, absence policies, SSP benefits)

And do so in a flexible, individualised way, for the long term.

I want to THRIVE not just SURVIVE!
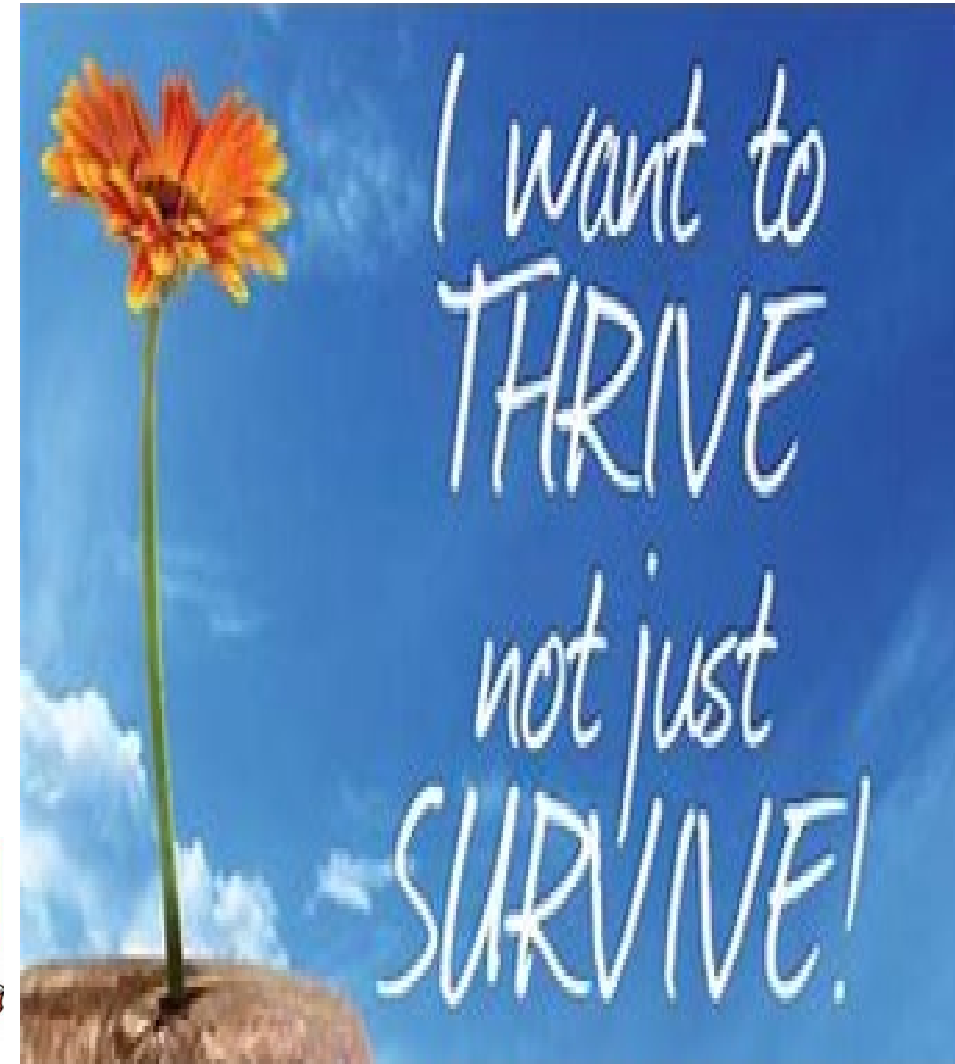
Guidelines – colleagues' example

Guide for Colleagues

What can you do to help a team member returning to work?
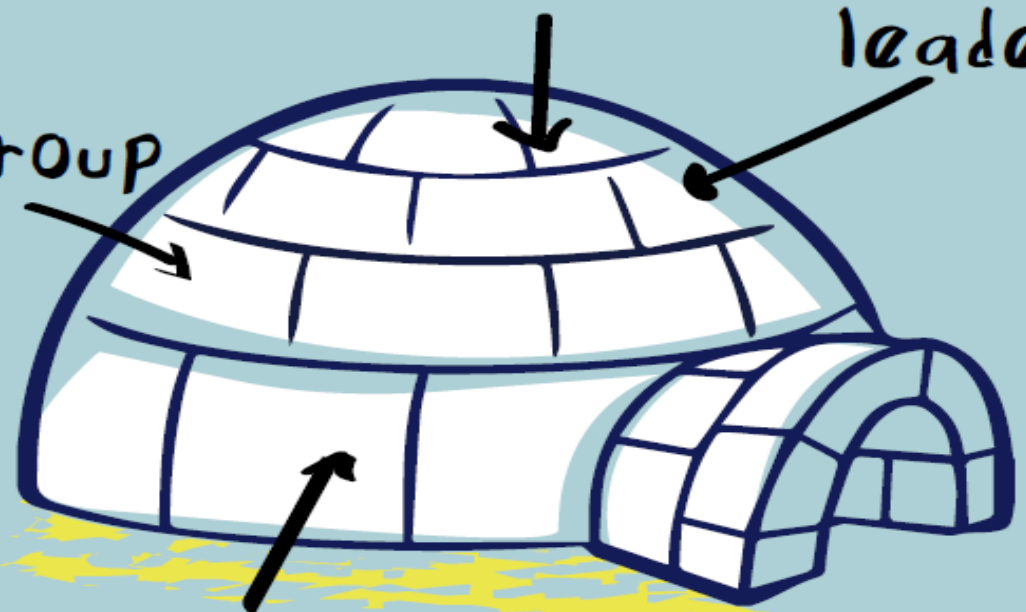
the IGLOo

for returning to work following mental ill—health

individual

leader

group

organisation

Guide for Colleagues

What can you do to help a colleague returning to work?

Many people do not know what to say or do when a colleague comes back to work. Your returning colleague is likely to be experiencing mixed feelings. They might be looking forward to returning to a sense of normality, but are also likely to be apprehensive about how they will manage work and whether they will be able to maintain their health when back at work. These concerns are normal. In fact did you know that 1 in 6 people experience mental ill health and 1 in 3 'fit notes' signed by doctors are for mental ill-health?

This guide is designed to help you support a colleague returning to work following a period of absence due to mental ill-health. It draws from the latest evidence to outline what works, and what does not, when it comes to helping someone back to work.

We can't do everything on our own. When people have been unwell they often need help from others. Colleagues, friends and family, line managers and others can help the individual build their **IGLOo**. Remember, an employee with strong resources is much more likely to stay in and be productive at work.

What is stress, anxiety and depression?

Mental health is complicated. Everyone's experience of mental health is slightly different. It is sometimes difficult to tell whether someone is experiencing stress, anxiety or depression. A really important sign is a change in the person's behaviour – are they behaving differently? Here are some of the common signs and signals:

- Behavioural signs – struggling with workload, low levels of concentration and focus, difficulty in organising, low productivity, negative attitude, changes in motivation.
- Emotional signs – feeling anxious or irritable, mood changes, changes in how you interact with colleagues, too much emotion, feeling isolated or socially withdrawn.
- Physical signs – tiredness, having sleepless nights, increased drinking and/or smoking, not feeling hungry, headaches.

Most people make a full recovery and are able to fully contribute at work following mental ill-health. But when employees are not supported on their return, they are more likely to relapse and exit the workplace.

Many returners have a different manager on their first day back and many do not have anyone to greet them on their first day. You could help to change this. Use this guide to give you examples of ways you could make a returning employee feel safe, welcome and productive at work.

For more details on signs and symptoms of stress, anxiety and depression, and the possible impact on work – visit Every Mind Matters

Understanding your IGLOo

We all need other people to help us stay happy and healthy. Everyone has their own set of resources inside and outside of work. We call this your IGLOo. Your IGLOo is made up of different resources that help you:

individual resources – like confidence, self-care

group resources – help from colleagues, friends and family

leader resources - help from your line manager, GPs or service provider

organisational resources – help provided by your organisation, volunteer groups or charities

The IGLOo for returning to work following mental ill-health includes:

At home the following actions help returning employees	Resources	At work, the following help returning employees
• Prioritising self-care • Establishing clear boundaries between work and leisure	Individual	• Creating structure in the working day
• Understanding from others • Receiving non-judgmental support	Group	• Receiving feedback on tasks from colleagues • Getting help when doing challenging tasks • Being treated as you did before not as someone with mental ill-health.
• Having a consistent point of contact • Facilitating of links to external services and treatment	Leader	• Agreeing the communication of information to colleagues • Continuing to provide support and work adjustments • Being available but not intrusive so
• Accessing work-focused counselling	Organisation	• Providing flexible working practices and leave policies • Providing work-focused counselling • Demonstrating care through support • Establishing a culture where mental health is not stigmatised

How can you help your colleague strengthen their IGLOo?

Use the checklist here to see what you can do to help your colleague build their **IGLOo**.

1. Look at the checklist. Read the statements in the 'Do I...' column. Answer 'yes', 'no' or 'sometimes'. Mark your answer in the column.

2. Use the checklist here to test the strength of your contribution to your colleagues' **IGLOo**. If you answer yes to these questions, you help your colleague build a strong **IGLOo**. If you answer 'sometimes' or 'no' think about whether they might like your help.

3. What else could you do to help? If you answer 'sometimes' or 'no' what could you do to make this part of their **IGLOo** stronger? It may be something you need to do, you need someone else to help you do, or you need to ask for.

4. How do you make this happen? Think about what you can do to make this happen. Need help and advice? Ask friends and family, colleagues, Line manager, GP, Human Resources, Occupational Health, Charities/support groups, Union reps

Remember...

Returning to work is not always easy, but having support can make a huge difference. If you are not sure what your colleague would find helpful, ask them. Talk through the checklist with them and identify some concrete actions that you can take to help them build their **IGLOo**.

Resources	Location	Do I...?	Do I... Yes, No, Sometimes	I need to... If you answered "sometimes" or "no", what else would be helpful?	I can make this happen by... Need help and advice? Ask friends and family, Need help and advice? Ask Human Resources, Occupational Health, colleagues, Charity/support groups, Union reps;
Individual	Work	Help the employee create structure in the working day? E.g. divide up tasks in to smaller components, diarise meetings.			
	Home	Enable the employee prioritise self-care by ensuring the employee leaves work on time and by allowing flexibility for exercise, appointments etc?			
		Ensure the employee has clear boundaries between work and home?			
Group	Work	Provide feedback on tasks to build confidence?			
		Help out when doing challenging tasks?			
		Treat the employee the same as before, not someone different or who is experiencing mental ill-health			
	Home	** While you can't influence how friends and families behave, if you know that the returning employee is experiencing difficulties outside work, this could make the group support in work even more important for them.			
Leader	Work	Check in with my line manager about what the employee wants us to know, and accept that they may not want me to know everything about their absence?			
		Accept that my line manager may put in place support and work adjustments, even beyond the first month, to help the returning employee?			
		Look out to ensure that my returning colleague has access to our line manager?			
	Home	** While you cannot influence the support the employee is able to access from their GP, if you know that the employee is finding access to support difficult it might be appropriate to direct them to occupational health support.			
Organisational	Work	Know what the policies are for flexible working and absence so that I can share them if needed?			
		Support the employee to access flexible working and work adjustments that are outlined in the organisations policy?			
		If the organisation offers work-focused counselling, and if so, do I know where they can find it?			
	Home	** While you cannot influence the support offered to the employee outside of work, if you know they want but are not able to access support it may be appropriate to direct them to Occupational Health, HR or your workplace EAP.			

Where to go for further information

Mental health

Every Mind Matters	www.nhs.uk/oneyou/every-mind-matters
Mind	www.mind.org.uk
Mental Health Foundation	www.mentalhealth.org.uk
Time to talk	take-time-to-talk.com

Professional bodies

CIPD (Chartered Institute of Personnel and Development)	www.cipd.co.uk
IOSH (Institution of Occupational Safety and Health)	www.iosh.co.uk
HSE (Health and Safety Executive)	www.hse.gov.uk
ACAS (Advisory, Conciliation and Arbitration Service)	www.acas.org.uk/index.aspx?articleid=1461
DRC (Disability Rights Commission)	www.drc.org.uk
SOM (Society of Occupational Medicine)	www.som.org.uk

Managing mental health at work:

ACAS Managing staff absence guide	www.acas.org.uk/index.aspx?articleid=4199
ACAS Mental health at work guidance	www.acas.org.uk/index.aspx?articleid=1900
Mental Health at Work	www.mentalhealthatwork.org.uk
Fit for Work	itforwork.org/employer
Access to Work	www.gov.uk/access-to-work/overview

Biographies

Professor Karina Nielsen is Director of the Institute of Work Psychology, University of Sheffield. Her research focuses on the design, implementation and evaluation of organizational interventions in the field of organizational health.

Dr Joanna Yarker is Director of Affinity Health at Work, a workplace wellbeing consultancy. Her work uses evidence based approaches to improve health and wellbeing at work for employees, teams, managers and organisations.
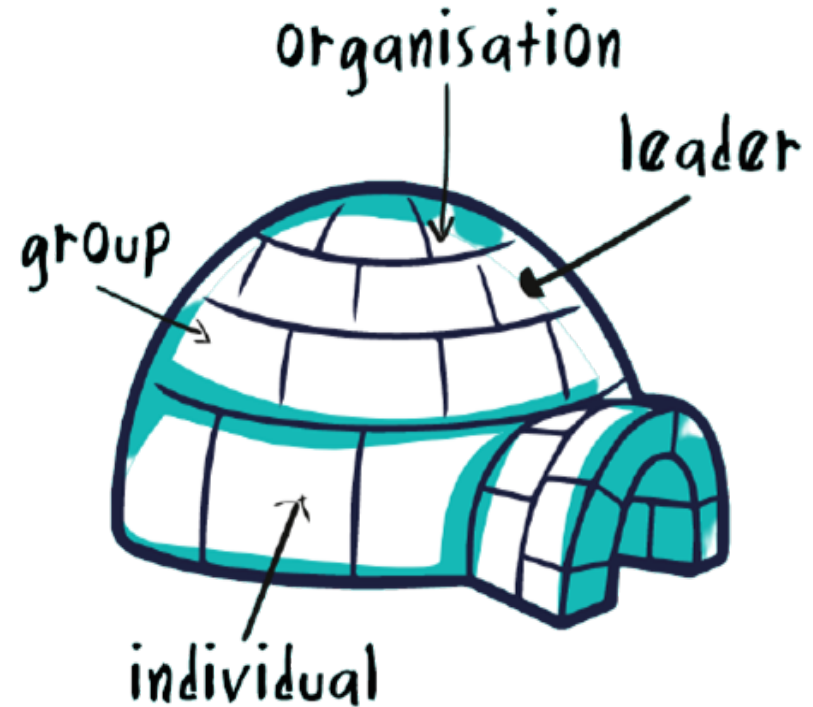

About these Guidelines

These guidelines have been developed by a research team from Sheffield University, in partnership with Affinity Health at Work. The research was funded by the Productivity Insights Network, a multidisciplinary network funded by the Economic and Social Research Council. Supported by a diverse steering group of subject matter experts, practitioners, policy makers, employers and employees who have returned following mental ill-health, the research team followed 38 employees who had returned to work following a period of absence, and 20 line managers who had managed a returning employee. Using thematic analysis, the team identified the resources that employees reported helped them stay and be productive at work. Once the interviews had been analysed the steering group supported the design of the guidelines presented here.

Our evidence based return to work approach

Individual
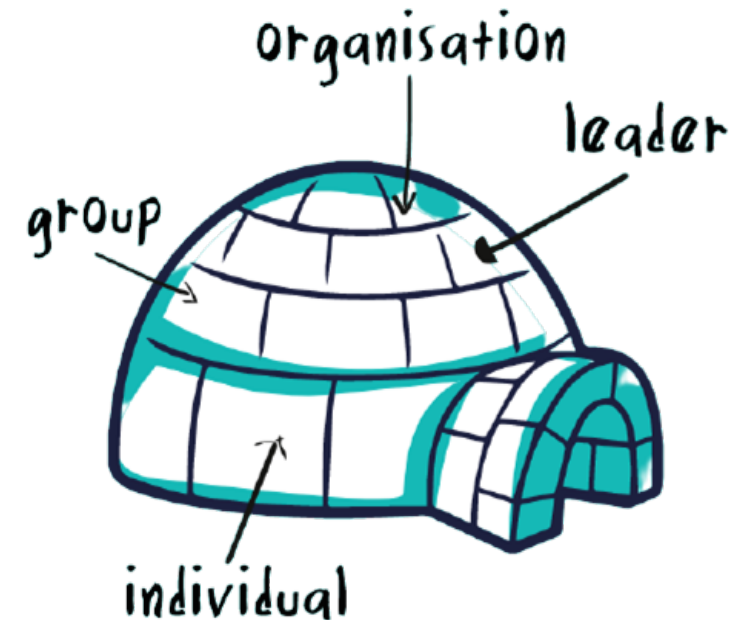Prioritise self-care, access support, keeping in touch, structure in working day

Group
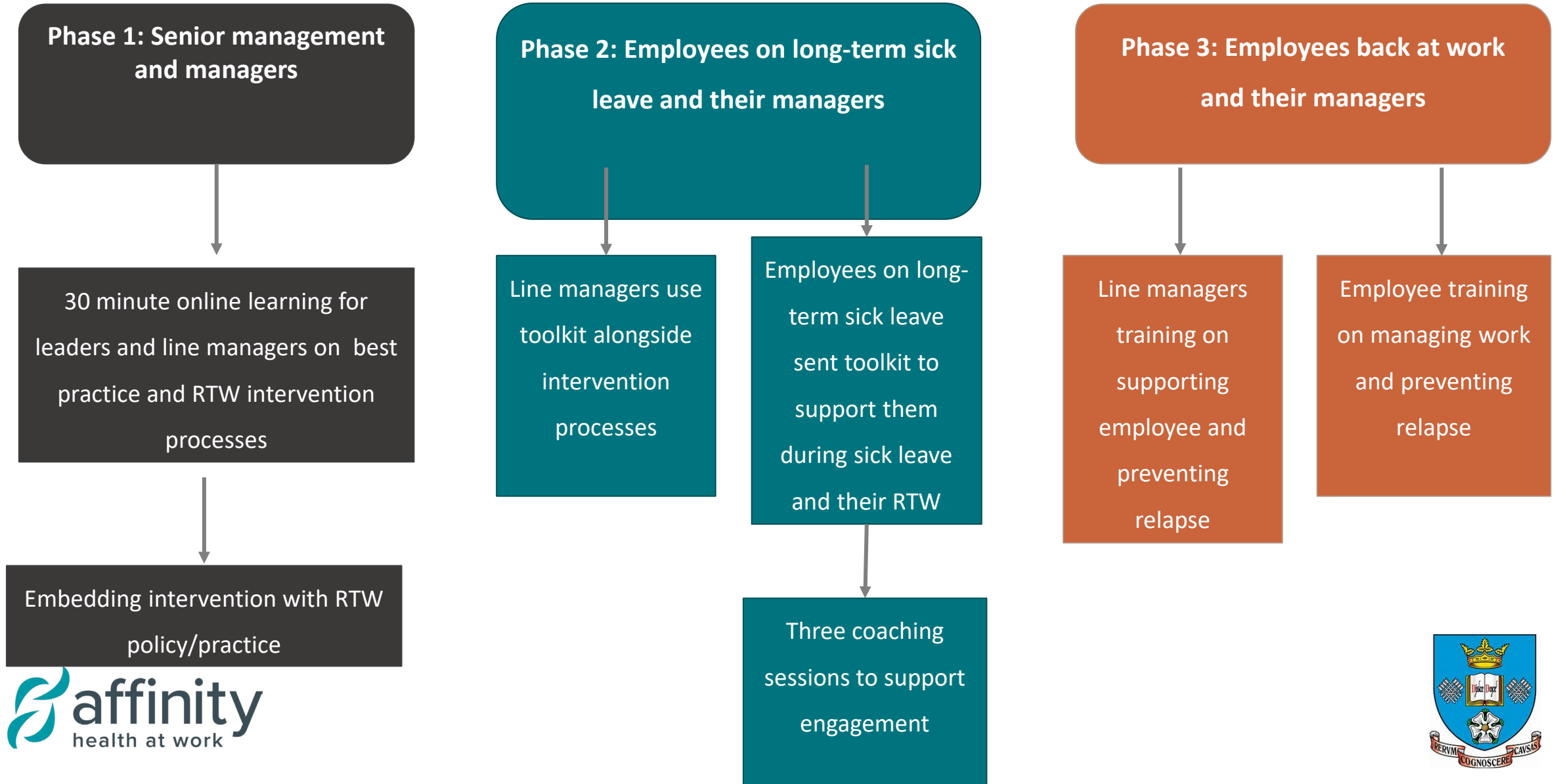Maintaining contact and non-judgemental support

Leader
Consistent point of contact, monitors employee work and wellbeing

Organisation
Compassionate absence practices, access to advice and support e.g. EAP service

Return to work programme offer

Phase 1: Senior management and managers

30 minute online learning for leaders and line managers on best practice and RTW intervention processes

Embedding intervention with RTW policy/practice

Phase 2: Employees on long-term sick leave and their managers

Line managers use toolkit alongside intervention processes

Employees on long-term sick leave sent toolkit to support them during sick leave and their RTW

Three coaching sessions to support engagement

Phase 3: Employees back at work and their managers

Line managers training on supporting employee and preventing relapse

Employee training on managing work and preventing relapse

Thank you

If you would like to know more about our work or get involved in our research, please contact us:

- Karina Nielsen k.m.nielsen@sheffield.ac.uk
- Jo Yarker jo@affinityhealthatwork.com