

Working for Wellbeing in employment

A toolkit for advisers

**Employment-focused mental health and wellbeing guidance
November 2012**

Foreword

- This toolkit is for employment advisers to help them co-ordinate wellbeing action within an employment advisory setting. The toolkit outlines this new approach and provides a means for new or experienced advisers to reflect on and develop their practice. The toolkit will also be a valuable aid to managers.
- The toolkit illustrates the thinking that will help advisers progress from a work-focussed discussion to one that considers wellbeing needs and interventions. It is not a training programme but it should complement other adviser training. Advisers and managers should discuss what the wellbeing and employment approach means for your business and how the toolkit can help.
- The starting point is the employment goal. This means engaging the individual in a conversation about the best work goal for them and what they need to do to achieve it. That goal must be realistic - something the individual believes they can do. For some people this means thinking about not only the job requirements, and their own abilities, but also how they will manage health and wellbeing needs while at work. This is the employment approach to wellbeing - a realistic goal to prepare for with health and wellbeing needs judged against that goal.
- The toolkit walks advisers through the thinking behind how to identify need and help people to get the right support. Advisers do not need to be clinician to do this.
- Every Work Programme provider has signed a public pledge to build expertise throughout their businesses to help more people with mental health conditions get the right job.

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Working for Wellbeing in employment

Working for Wellbeing

Section 1

Working for Wellbeing

“ We will develop our expertise to help people with mental health conditions, find, enter and remain in employment. ”

Extracts from the Joint Pledge on work and mental well-being signed by all chief executive officers of the Work Programme and other leading specialist providers and endorsed by leading mental health organisations (November 2011)

“ We will educate our workforce on the value of work to health. ”

What are the aims of this toolkit?

- To help you focus on employment goals as a means to better mental health
- To help you offer good employment advice to people with mental health needs and know where to go for more specialist help
- To help the jobseeker get into work and sustain it, and have better well-being through work

On a practical level, **this toolkit will guide you to:**

- Identify those instances when a jobseeker may benefit from more specialist employment or mental health intervention to help them get into work or when a self referral to a GP is advised
- Know what specialist support is available, know how to find it and how it can help the jobseeker to their job goal

This toolkit does not:

- Replace or supersede your core training
- Require you to be a mental health expert
- Expect you to diagnose health problems
- Ask you to solve health problems

Whether you are experienced or new to your role, use this toolkit to help build on your existing knowledge and skills

The starting point: principles

- Wellbeing through suitable and sustained work is the goal
- Most people with mental health conditions do work, can work and want to work
- People don't need to have fully recovered to work – work can be part of recovery
- Health and work needs are important – aim to identify and cater for them
- Advisers enable people to establish suitable job goals and work solutions
- Some jobseekers may need specialist mental health care
- Some people will be guided to less intensive help as part of their job goal plan
- Where people can self manage this should be encouraged – *what people can do for themselves they should do for themselves*
- Advisers are employment advice specialists and should know when to seek advice from other specialists: they do not need to be mental health experts themselves

Who is the claimant with work and wellbeing needs?

- A varied group ... with a range of employment experience and skills
- Found in both Jobseeker's Allowance and Employment Support Allowance (one in five JSA claimants has a common mental health condition)
- Some will also have physical health conditions
- Job loss/being unemployed can itself often cause distress
- As a group, people with mental health conditions spend longer on benefit
- Some chose to claim JSA - "I can manage my health condition at work"
- Others claim JSA following the Work Capability Assessment
- Not everyone with a health condition needs extra support
- On an individual level, there is no clear cut relationship between severity of illness and return to work

Key Messages:

- Two people with the same diagnosis and similar symptoms may think differently about their employment and health needs & goals
- Sustained work requires belief and suitable workplaces

What you should listen out for

- Each individual's experience of their work, health and recovery will be unique
- Health symptoms and the individual response will vary from person to person
- Listed on the next pages are some things that jobseekers may tell you about their health
- The jobseeker may mention health or wish to talk about it. If this happens, it is good practice to do this in the context of work rather than focusing on the condition or symptoms
- As you help the jobseeker develop a suitable job goal, you will begin considering work solutions and whether specialist help is needed (see Glossary for definition of *Work Solutions*)

You should be vigilant, but do not try to diagnose a condition

You should think about how health can be managed at work

What people may say

“I’m always so worried about things”

“I feel guilty about things”

“I feel really stressed”

For depression and anxiety, people may say they are on treatments including talking therapies or medication drugs

“It’s so hard to concentrate”

“It’s so hard to make a decision”

“I can’t sleep and get so tired”

“I feel tired all the time”

“It’s hard to cope”

Be vigilant - “I don't think I can take it any more”

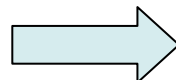
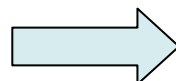
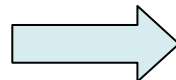
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Action: Find out about your organisation's suicide prevention policy

Why beliefs about health and work matter

Unlikely to get into work

- I can't work/I'll never work
- I want to work but what can I do?
- I know what to look for but how do I find it?
- They'll take one look at my CV and say no!
- Even if I get a job, I'll never keep it with my problems?



More likely to get into work

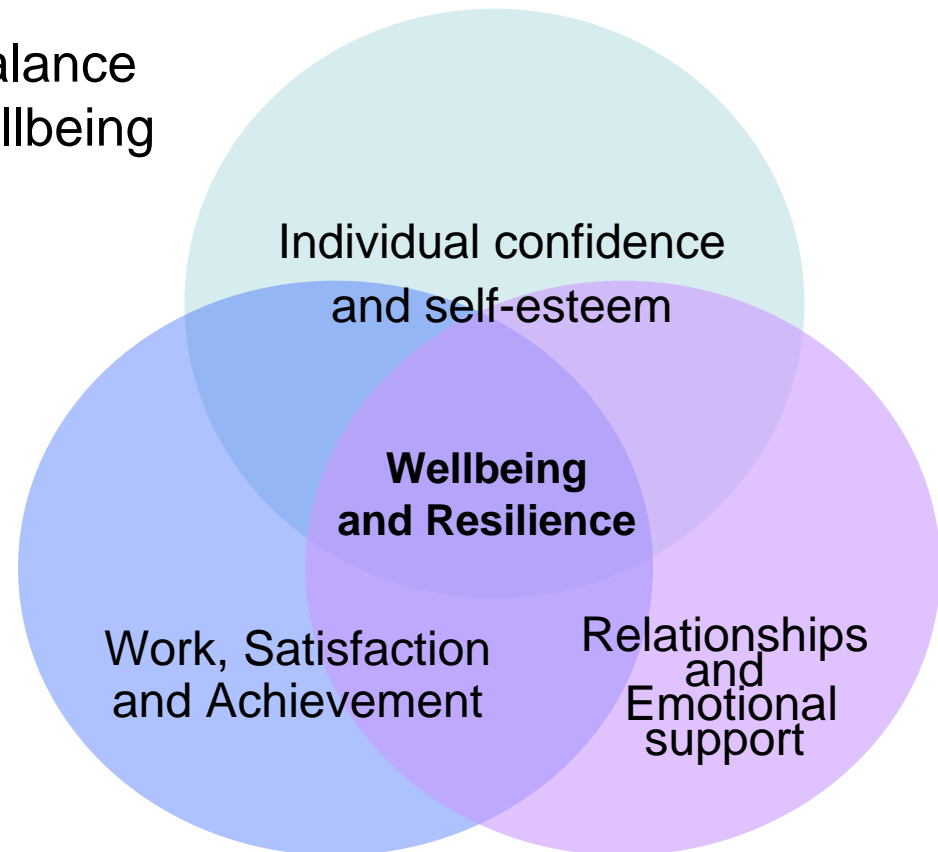
- I can work/I will work
- I know what I want to do
- I know how to go about finding it
- I know how to sell myself
- I have coping strategies

What is mental wellbeing?

- Mental wellbeing is about how feeling positive about ourselves as individuals, our work and our relationships, all interact (see Glossary)
- For most people, finding a good balance in our lives helps to sustain our wellbeing
- And is part of our identity

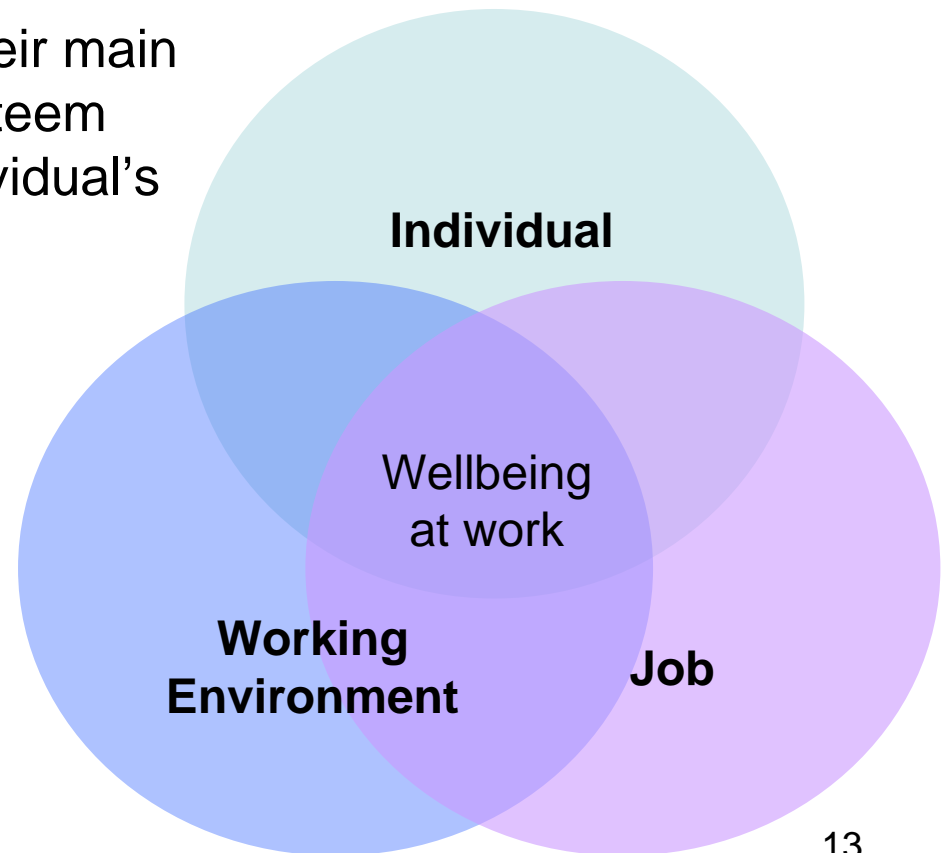
Building resilience:

- Involves identifying strengths and capacity
- Using these to deal with setbacks in life
- Adapting to change and facing adversity



What is wellbeing at work?

- Mental wellbeing at work is about how the individual, the job and the working environment interact (see Glossary)
- For most people, work provides their main source of income, it boosts self esteem and identity, and is part of the individual's contribution to society
- It's when the interaction doesn't work well that work can have a negative effect on mental health
- A suitable job goal will lead to a suitable job



Working for Wellbeing in employment

Using a work-first approach

Section 2

The employment advice interview: getting ready

- Sometimes advisers have little or only very general information about a jobseeker's condition and social situation. **This does not matter.** Where the discussion focuses on employment, the individual's work issues will emerge
- The starting point is to address the individual's ability to do the job and any work solutions that are required. This approach works as well for people with mental health conditions as for any other group
- Good interviews help people think things through. When a person thinks things through for themselves they become much more committed to fulfilling a course of action
- Allowing the jobseeker time to think of what they want to say, instead of jumping in to "rescue" them, is very supportive behaviour

The employment interview: your aim

- The framework in this section helps you think about how you structure your interviews. It prompts you to maintain a focus on the job goal **AND** be vigilant to health issues
- How you *order* the discussion is up to you – there's no right or wrong way – and you may take more than one meetings to arrive at a suitable job goal
- People who have been out of work for some time may have lost confidence in their ability or be anxious about coping at work
- This is not unique to people with mental health conditions, but be aware it may be more visible in some people
- Your **aim** is to build trust and individual belief. Your **responsibility** is to be vigilant and respond to health and well-being issues

Tip: Remember – what matters is the individual's ability to do the job and the work solutions they may need

Table 1: Employment Intervention Framework - Stages of Interview

Interview Stage	Stage Concern	Questions
1. Welcome	Greet individual	Check arrival / travel. Small talk
2. Engage	Ensure comfortable to continue with the interview	Check any needs / requirements
3. Aim / Scope	Explain the purpose of the interview and range of discussion. Looking ahead to employment when able to work	Check understanding and expectations. Check consent. What do you think we are here to discuss? Is this what you were hoping to discuss today?
4. Think Employment	Exploring where individual is in return to employment. Recognise and credit any thinking they may have done	Have you been thinking about getting a job? What are the things an employer would like to hear about you? Your skill and abilities?
5. Trial Job Goal	Set a trial job goal – explain it will help to learn about employment opportunities	If there is not a clear job goal would it help to consider a 'trial' job goal.
6. Job Content	Consider content of job (tasks, relationships etc)	What tasks will the job involve? What responsibilities will the job holder have? Will the job involve working with others?
7. Person ability	Consider the person's ability to do the job	Any previous experience? Any training or skills?
8. Vision and Work Solutions (WS)	Enable the individual to look ahead to being in the job, how they will perform tasks and relate to supervisors and colleagues. Review need for work solutions (WS)	<p>What is a work solution? This is a change (temporary or permanent) that enables the person to do the job. See Glossary for a fuller definition.</p>
9. Goal Decision	Evidence they can do the job - or would an alternative trial job goal be more appropriate?	
10. New Goal	New trial job goal. Repeat steps 5,6,7,8, & 9	
11. Action Planning	Include employment & wellbeing needs (page 45)	

The employment interview: why have a job goal?

- It can be difficult for individuals to consider their readiness to return to employment until they can picture themselves doing the tasks of an appropriate job and working with colleagues
- People with mental health issues often describe themselves as not being sure about a job goal or have doubts about their confidence to get back to work - stay supportive

Good interview practice is about:

- Getting the person to talk
- Helping them think things through
- Gaining commitment through their own efforts
- Keeping the focus on work - establishing a job goal and the job tasks
- Gathering evidence about the person's abilities and previous work experience
- Building confidence to perform job tasks
- Considering factors that may present issues for performing that job
- Having new or remembered coping strategies

- Do say – “Tell me how you cope”
- Better still – “Let’s think how you will manage your wellbeing in the workplace”
- Don’t say – “Tell me about your depression”

Table 2: Gathering and interpreting information

What is the jobseeker's experience of health and work? How do they perceive their situation?

	Observe	Explore	Check	Build
Response to greetings, questions and planning	Behaviour observed or reported	Is it OK for me to ask about (behaviour, report). Can you say how this may impact on job search, your job or manager? Have you had to leave a job in the past?	Note behaviour/ personal descriptions; Assist referral; and help individual to take charge of their recovery	Discuss how referral will help with obtaining work; and note what learnt about individual's employment capability
Throughout interview	Reports ongoing treatment	Explore previous work (activity) experience (note positives, skills, strengths – and what wished to improve). What helped you cope/ what did you find difficult? Review plans for work and see what work solutions may have advantages	Check GP awareness of WP; Check WP impact; and Check individual WP perceptions	Discuss how WP specialist assistance and WP will combine together to help with obtaining work
Discuss activities, work history or planning	Describes short-term confidence issue related to health	Explore previous work, What helped you cope... (see above) What has helped you since your treatment finished? Have you considered work and do you need further or different MH support? Review plans for work (see above)	Check individual WP perceptions; and Listen for discussion of confidence. Check employment history, learning, coping, plusses and incidents/concerns	Consider how confidence could be developed to enable work transition (in workplace or before)
Discuss activities, work history or planning	Describes longer term or more entrenched confidence issue related to health	Explore previous work...., What helped you cope... (see above) What has been happening since you completed treatment? Are you getting enough support? Would you like to discuss how work and health can be managed with the right work based support? Review plans for work (see above)	Check individual WP perceptions; Listen for discussion of confidence; and Check employment history, learning, coping, plusses and incidents/concerns	Remind individual about building on the gains they made while in recovery and outline that getting into work is also part of the recovery journey i.e. think about a job goal with support

Look at the case studies in the next section.

Working for Wellbeing in employment

Case scenarios

Section 3

Case study prompts

The case studies that follow will help you think through your decisions.

Anna, Bola and Cate are ESA claimants with similar employment histories and diagnoses - on first reading you may think they are the same, but they describe three different employment situations. But do Anna, Bola and Cate have the same circumstances and needs? *Read the case studies that follow and think about your approach*

- What tells you whether they can progress to employment?
- Does anything suggest that they can progress independently?
- What evidence is there that they may need more help?
- What else will help you decide if they need more help?
- What other questions should you ask?
- Do they have a mental health support needs? If so, what will you do next?

ESA case scenario 1: Anna

Anna claims ESA. She has bouts of depression and anxiety and has told her GP that her treatment is not helping much. She says her problem is lack of energy and confidence. She finds it hard to talk to people socially.

Anna was employed as a store supervisor for a high street retail chain for eight years. She wants to look for similar work again. She used to feel a little over qualified, but enjoyed the company and helping junior staff to learn.

Anna's key tasks were leading a team, training and discipline, monitoring customer handling, stock management and display, and deputising for the manager. Looking ahead Anna thinks the formal training, customer and till work will be OK but is concerned about busy days – e.g. coping with big deliveries or talking to staff members being difficult about their leave or shifts.

Adviser action:

You reflect whether work will help, whether work might be as an assistant rather than a supervisor. You think about discussing work solutions for example not having to deal with staff rotas or not being left alone by manager on high volume days

ESA case scenario 2: Bola

Bola claims ESA. She has bouts of depression with anxiety and has told her GP that her treatment is not helping much. Drained of energy with low confidence, she can't relax in social situations and worries about what people say about her.

Bola was employed as a store supervisor for a high street retail chain for 8 years. She wants to look for similar work again. She used to feel over qualified, but enjoyed the company and helping junior staff to learn.

Bola's key tasks were the same as Anna's. Looking forward, Bola thinks training, customer and till work will be OK but is worried about fumbling her words and getting stuck. She says she'd need someone else to help when everything happens at once or with staff difficulties.

Adviser action:

You reflect whether work will help right now, whether work might be as an assistant or on a part time basis. You think about specialist help to arrive at work solutions - for example not dealing with staff rotas or not being left alone by manager on high volume days

ESA case scenario 3: Cate

Cate claims ESA. She has bouts of depression and anxiety and has told her GP that her treatment is not helping much. She has no energy and feels guilty about her lack of progress. Constantly tense in social situations, she knows that people may be putting her down.

Cate was employed as a store supervisor for a high street retail chain for 8 years. She would like similar work. She used to feel a little over qualified, but enjoyed the company and helping junior staff to learn.

Cate's key tasks were the same as Anna's and Bola's. Looking ahead Cate thinks the training, customer and till work will be a struggle and hard to imagine without help on high pressure days. Cate wonders if she needs more pills.

Adviser action:

You reflect whether work will help right now or whether a referral to the GP or another health professional would be advisable. Longer term, whether work might be as an assistant or part time. You think also about whether a specialist adviser could help with work solutions

Case study prompts

The case studies that follow will help you think through your decisions and start to consider work, health and wellbeing together.

John and Peter both claim JSA. John has little work history whilst Peter was in an established job role before becoming ill. *Read the case studies and think about your approach.*

- What tells you whether they can progress to employment?
- Does anything suggest that they can progress independently?
- What evidence is there that they may need more help?
- What else will help you decide if they need more help?
- What other questions should you ask?
- Do they have specific mental health support needs? If so, what will you do next?

JSA case scenario 4: John

John is 21. He left formal education at 16 following the death of a close relative. Over the past four years John has worked now and again mostly in labouring jobs for anything from one day to three weeks. For most of the time he has not been in paid work.

At the employment interview John is uncommunicative. He mumbles and looks at the floor. Eventually, he says that he wishes he could stick at something. Being with people is difficult. He has lost touch with his childhood friends and he spends much of his time alone.

Adviser action:

You reflect on whether work will help right now. You consider if John has training needs that might improve his job prospects or if on the job training might work better. You begin to consider whether John needs specialist help alongside his job search efforts. One possibility is a work experience placement to help him overcome his social anxiety.

JSA case scenario 5: Peter

Peter is 47. He is a technician with an established work history in the printing trade. A downturn in the industry and a spell of physical ill health has meant that Peter had to leave employment and claim ESA.

He reports good days and bad days with his health condition: and following a Work Capability Assessment is considered fit for work.

Peter now claims JSA. He is frustrated with his situation and angry at being moved from ESA. He “can’t see a way forward ” and says he doesn’t think he will get back to work. He says that this is dragging him down but he’s reluctant to talk about what might help.

Adviser action:

You explore with Peter what he can do to help him cope with his frustration. You help him think through what his job goal might be. You propose a short to medium term return to work plan. You suggest that developing job search skills will enable him to take control of his situation. In asking how he copes you begin to establish whether he has any additional specialist support needs.

Reflections on learning

Having read the case illustrations, write short answers to the following questions. *When you finish, share your answers with your line manager and arrange a time to discuss.*

- What are the individual's attributes and strengths?
- What would you recommend they include on their CV or Application Form and be prepared to discuss with employers?
- How will employment have a positive effect on the individual? Specific benefits?
- Are they ready to return to work now?
- Should they attend to any issues at the same time as returning to work?
- Should they attend to any issues before going back to work?
- For questions 4, 5 and 6, what are some of the advantages and disadvantages?

Summarise evidence and set out agreed next steps

Summing up so far

Wellbeing for work - what you have learned	Health and wellbeing- what is the need?	Intervention options - what you can propose
<ul style="list-style-type: none">▪ Think about what you have learned from the employment interview▪ Think about how 'simple' or 'complex' the health and well-being need is▪ Focus on employment issues from which the health and wellbeing need flows	<ul style="list-style-type: none">▪ Think about why the individual may benefit from a health / wellbeing intervention▪ And how this will contribute to the job goal	<ul style="list-style-type: none">▪ Explore options ranging from low to high intensity, from self help to treatment▪ Think about the pros and cons of each approach and what they offer for preparation for work

For descriptions of mental wellbeing needs and interventions see Tables 4 and 5 in Section 5

Working for Wellbeing in employment

Work, health and wellbeing

Section 4

Principles for work, health and wellbeing

This section moves on to thinking about health.

The table on the next page gives examples of the types of mental health issues you may come across and some of the possible interventions available – these are illustrations to help you think things through.

The table sets out:

- **Examples of what you may hear or glean from your discussions** – what people say that can be used to indicate the need
- **How this helps you identify health and work needs for work**
- **The variety of options you can propose to help the individual access specialist health services or support** – this allows you to think through the pros and cons of each approach weighing up what might benefit the individual most while preparing for work, as well as asking the individual which option they prefer and why

Now move on to Table 3. Following this there is a more detailed case study (Jake) with a worked example of thinking things through in and after the interview

Table 3: Health-related intervention

What you've learned	Health and wellbeing needs for work	Intervention options
<p>The individual has been out of work for some time and is unsure about getting back - "I'm not sure I've got what it takes to get back to work – it's been a long time"</p>	<p>Consider ways to increase confidence and resilience e.g. help them to recognise the skills they have to offer an employer. You may feel there is a greater level of need and think about a referral for more intensive confidence-building to address the individual's longer term concerns.</p>	<p>Consider with the individual whether they could benefit from either a self-help programme or a guided/facilitated intervention</p>
<p>The individual recognises that they find conversation at work hard. - " Even though I'm 22 I still find it difficult to speak to people "</p>	<p>Consider a supported work trial as a way of making a further assessment or explore whether individual has other difficulties (perhaps long standing) that would benefit from specialist mental health input</p>	<p>Discuss joining sports / social clubs or in-house provision to develop conversational or social skills. For more significant issues, specialist help may be required e.g. talking therapy or GP</p>
<p>The individual talks about having 'highs' and 'lows' at work and that this was one of the reasons for losing her last job - " How will I cope – I had to leave my last job"</p>	<p>Enable the individual to develop specific coping strategies e.g. by understanding more about their mood and emotions, so they feel more confident in dealing with them. Having an "advance plan" can help reduce situational anxiety</p>	<p>Explain the benefits of working with a specialist employment adviser for help with job or health coaching. If the client offers more information, e.g. about their depression, think about talking therapy options to help them cope with emotions</p>

Table 3: Health-related intervention (cont)

What you've learned	Health and wellbeing needs for work	Intervention options
<p>They describe inability to cope in certain situations – and mention “panic attacks”.</p>	<p>Aim to reduce occasions when individual becomes anxious and identify and talk through practical coping strategies</p>	<p>Re-assure about types of support including self-help groups where they can talk to other people with similar experiences. Finding out more from a psychological wellbeing practitioner, health adviser or wellbeing coach may help as a first step towards feeling in control. The adviser can offer to help the client find out more by referring them to a talking therapy service for low intensity specialist mental health support</p>
<p>Individual says their doctor has told them they can't cope with stress</p>	<p>Anxiety management could help build the individual's ability to cope to enable job performance in the workplace – avoiding stress can be counterproductive if it means the person finds more and more things they can't cope with, so the goal is to enable them to experience that they can cope successfully with stress</p>	<p>Reflect back that not being able to cope and feeling stressed affects almost everyone at some point, but there are still things that can help. Could refer to self help material and psycho-educational groups via local talking therapy service</p>

Table 3: Health-related intervention (cont)

What you've learned	Health and wellbeing needs for work	Intervention options
Discussion focuses on the individual's feeling that they are unable to cope	Build sustainable coping to help the individual perform well at work and stay in employment	Reviews with mental health practitioner to boost coping resources
Individual says they used to be quite good at their job, but adds: "I can't think straight, I am tired all the time, irritable. I can't see the point of going on anymore"	Better ability to cope to boost self-confidence and help individual develop a more positive appraisal of their skills and prospects, help to break out of a pattern of reinforcing depression and low mood that can undermine their sense of self worth and purpose	Be alert to how low the person may feel and whether there is any risk of self harm . If person agrees, consider referral to GP for specialist mental health referral, but can also offer information on different therapy options for depression and help to access talking therapy service. If seriously concerned, consult with a manager while the person is present
Individual tells you they don't like being among large groups of people and coming to the meeting was very difficult for them	Recognise individual is anxious in social situations and consider how this might be managed to help them to travel to work and develop relationships at work – a work trial could help. Specialist mental health input could be considered to help overcome the difficulties	Talking therapy referral might work well along side assistance from a job coach or workplace buddy

JSA case scenario 6: Jake

Jake is 23 and receiving Jobseekers' Allowance. On arrival for his first appointment with his adviser, he seems full of energy and is keen to get started.

Since leaving school at 16 he has worked on and off helping friends in the building trade. He tried retail, but the job did not last because of arguments with co-workers and management. He has not worked in the past three years.

In talking about his past employment, Jake becomes agitated and at times tearful. He reveals that life has been hard to cope with and there are things from his past that he just can't overcome. He continues to be tearful, but now expresses how angry he is with all those who have messed up his life.

Jake mentions his previous employer, acquaintances and family members. He feels all of them have conspired against him. His frustration and anger are clearly causing him some distress. He is now withdrawn and subdued.

He asks his adviser where he is and what is the point of the interview, saying he has to leave soon.

Case scenario 6: adviser action

- 1. Making the initial response.** You reassure Jake there is help available, taking a few moments to explain that whatever has occurred in his past need not be a barrier to employment in the future.
- 2. Planning positive employment steps.** In the follow-up meeting, you give him a brief outline of how you would like to help him take steps towards finding a new job and discuss one or two work-related actions you would like him to do between now and the next time you see him. This could include identifying a job goal and preparing for a discussion about his job search skills because you have identified at this early stage that developing job search skills will help him to take control of his situation.
- 3. Access to professional support.** You ask if he has had any professional help in the past or if he is getting any help presently. Reflecting on his story, you begin to consider what additional support he might need to help him develop a better sense of self worth.

Case scenario 6: adviser action

- 4. Extra support discussion.** Before he leaves, you tell Jake extra support might help and you will think about how you might be able to help him access it. At this stage, you have not decided what support is relevant, but you make a note to consult your organisation's mental health toolkit and directory. This will help you identify the range of mental health support that may be available in the community as well as in-house. You tell Jake that you will discuss his health and wellbeing and what support is available next time you meet. You ask him to consider if he thinks he will wish to take up extra support now.
- 5. Summing-up.** You sum-up what you have agreed and begin to develop an outline short to medium-term return-to-work plan. A quick review of **Table 1** can help. You sketch out some practical steps to help Jake gain better insight to his skills and what he has to offer a potential employer. Turning your attention to how you will approach the employment and mental health issue and the **development of the employment and wellbeing Action Plan**, you now reflect first on the stages in **Table 2** of the mental health toolkit and once you have decided on where you think the jobseeker is in the stages you move on to consult **Table 3**.

Case scenario 6: adviser action

6. Next Steps. The process of writing the employment and wellbeing Action Plan will involve you having a clear sense of the mental health and employment issue in your mind. A quick review of **Table 3** will remind you how to do this. You can then consult **Table 4** which has outline mental health support descriptors of broad categories of need in the form of 4 broad **levels of problem** and 4 broad **levels of support**.

At this stage you will also be thinking through the advantages and disadvantages of each approach, weighing up what might benefit the individual most whilst preparing for work. Look at **Table 5** to see what options there are and what else you might need to explore with Jake to help him come to a decision on **the right option for support at this stage in the journey back to work**. It may be helpful now to discuss your thinking with your manager and prepare a draft employment and wellbeing Action Plan to discuss at Jake's next appointment.

Working for Wellbeing in employment

Finding the right support

Section 5

Finding the right mental wellbeing support

Intervention options - how they work	Health and wellbeing need – how can it be met?	Intervention options - where you can find them
<ul style="list-style-type: none"> ▪ Think about the level of the problem and talk through with the jobseeker how different options work ▪ Think about what option might suit them best ▪ Focus on what kind of change is needed to improve emotional wellbeing 	<ul style="list-style-type: none"> ▪ Think about where the person is now and where they want to be in terms of their emotional wellbeing - what level of support do they need to help reach the job goal? ▪ And how will you and they know if progress is being made? 	<ul style="list-style-type: none"> ▪ Consult the Map of Mental Wellbeing Help ▪ Check availability of the selected option - consider how practical this is; decide when to review progress

For descriptions of mental wellbeing needs and interventions see Tables 4 and 5

Table 4: Finding the right level of support

As an employment adviser you are not trying to make a diagnosis – ask the individual where they see themselves and think about what level of support sounds right for them to reach their job goal

A few of us when things break down quite badly – level 4
SEVERE crisis, self neglect, hopelessness, possible self-harm

Making an appointment to see a doctor or mental health therapist who can offer an assessment and access to e.g. longer-term therapies

Some of us, time to time -level 3
RECURRING depression during a period of not getting help or withdrawal, often with other difficulties then piling on top

Taking steps to find out about talking therapies that can help, choosing the right approach, and focusing on health and well-being aims relevant to work

Most of us at some time - level 2
OCCASIONAL stress that leads to depression e.g. after a loss or setback or at a point when we are not enjoying life or coping very well

Getting some advice and information on how to deal with stress and depression e.g. from a helpline, website or by talking with others e.g. peers to share ideas and support

All of us when things are not going well - level 1
DAY-TO-DAY Just as we have health and need to look after it we all have mental health. Mental pain exists to remind us our emotions matter as well as our bodies.

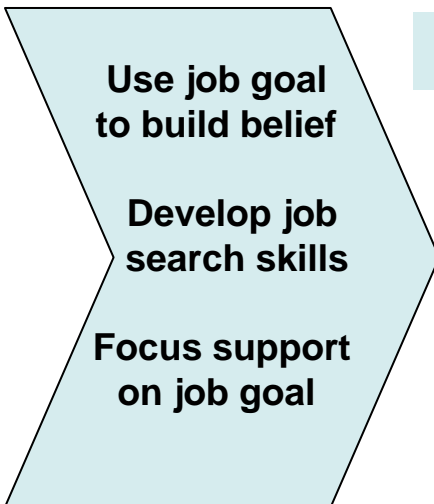
Doing things ourselves to look after our mental well-being better such as connecting with those around us, being physically active, learning, giving to others, and being alive in the moment

Nature of the problem

Nature of the support

Tip: Start at level 1 above

Mental wellbeing help – level of need overview



Employment Interview: Work, Health and Wellbeing Need

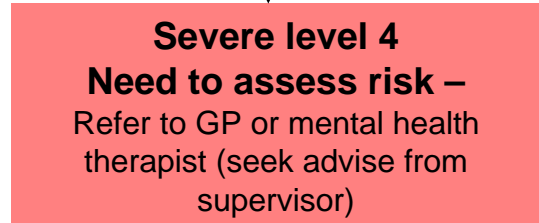
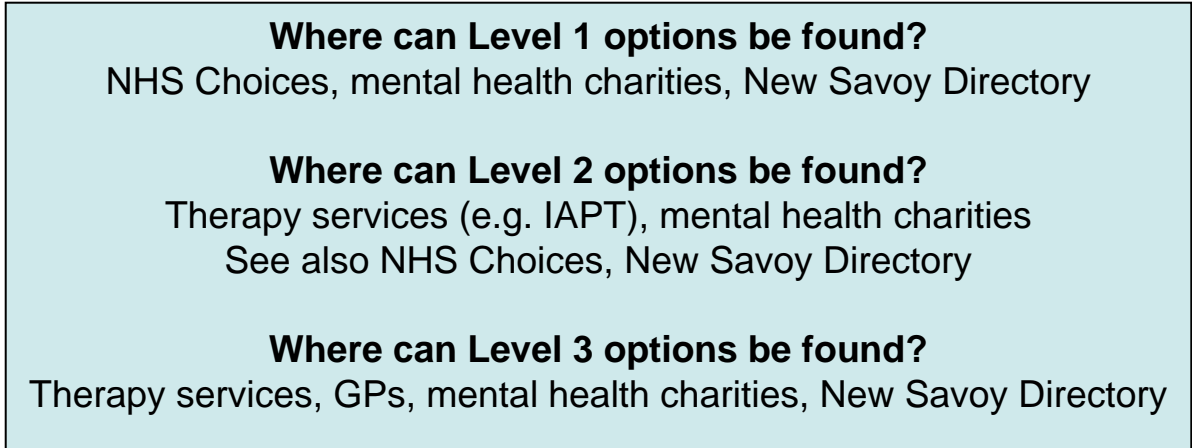
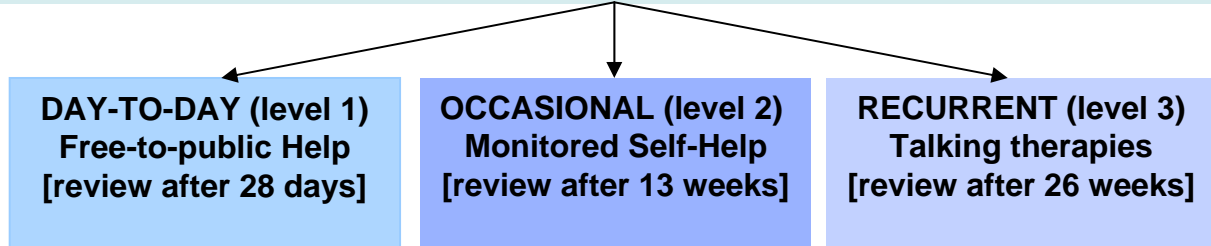


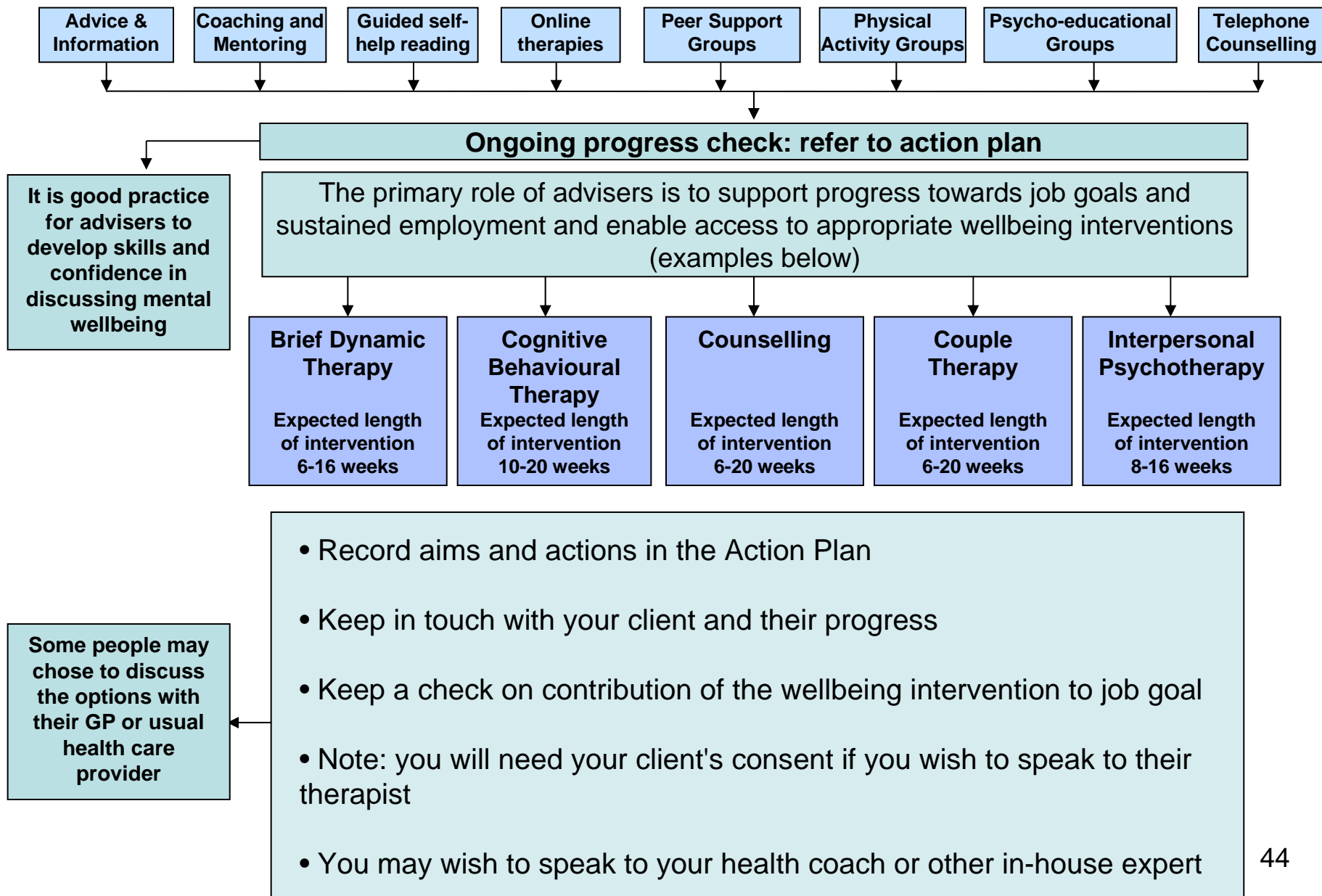
Table 5: Finding the right KIND of support - what will work best?

See also Table 4: What is the right level of support? And how will this contribute towards the job goal?

Level / Need	Options > Plan (< review)	Explore > Plan (link to job goal)	Check > Plan (pros & cons)	Plan > Action > Review
1: Day-to-day	<p>Free-to-public Help <28 days</p> <p>Aim for less debt, more work</p> <p>Reducing stigma and valuing openness in mental health - promoting social inclusion</p> <p>Individually valuing our well-being e.g. 5-a-day activities</p>	<p>What are the things in life that enrich you and give you a sense of wellbeing? What are the things that cause you stress? Where do you turn to for support? How have you felt today? How do you connect?</p>	<p>Knowledge of self-help options and 5 ways to wellbeing - do these fit?</p> <p>If so, try out something</p> <p>It will be helpful to see if this worked at the next interview</p>	<p>Remind individual that you are there to help, that you will reflect on what they have said, and you will talk again at the next interview</p> <p>Schedule a follow up.</p>
2: Occasional	<p>Monitored Self-Help <13 weeks</p> <p>Advice and information</p> <p>Coaching and Mentoring</p> <p>Guided self-help reading</p> <p>Online therapies (e.g. CCBT)</p> <p>Peer support groups</p> <p>Physical activity groups</p> <p>Psycho-educational groups</p> <p>Telephone Counselling</p>	<p>Which approach the jobseeker thinks they would prefer (and why - see job goal)?</p> <p>How the different approaches work - what is the best fit with the person's health and well-being needs?</p>	<p>Availability</p> <p>Waiting times</p> <p>Where to get access</p> <p>- whether they are better off waiting for talking therapy if the person thinks that a low-intensity intervention may not give them enough time?</p>	<p>Enable access to interventions.</p> <p>Add wellbeing goals to the Action Plan and how / when these are expected to contribute to the job goal</p> <p>Follow up outcomes</p>
3: Recurrent	<p>Talking therapies <26 weeks</p> <p>Brief dynamic therapy</p> <p>CBT (cognitive behavioural)*</p> <p>Counselling</p> <p>Couple therapy</p> <p>Interpersonal therapy</p> <p>*Mindfulness groups (CBT)</p>	<p>Which therapy approach the jobseeker thinks they would prefer (and why - see job goal)?</p> <p>How the different therapy approaches work - what is the best fit with the person's health and well-being needs?</p>	<p>Availability</p> <p>Waiting times</p> <p>Where to get access</p> <p>- whether there is another 'good enough fit' option if the waiting time is too long?</p>	<p>Facilitate access to therapy.</p> <p>Add wellbeing goals to the Action Plan and how / when these are expected to contribute to the Job goal. Follow up outcomes</p>
4: Severe	<p>Specialist support <6 months</p> <p>Early intervention by a doctor or mental health therapist</p> <p>Assessment for longer-term therapies and family work</p>	<p>Is there an immediate crisis or risk that needs an urgent response - what has triggered this? What has been helpful in the past? How might working towards a job goal help?</p>	<p>If unsure about risk of self-harm or crisis getting worse ask a supervisor for support</p> <p>Establish if a care plan exists, and contact details for a doctor or care coordinator</p>	<p>Risk mitigation if needed (e.g. specialist referral) and note crisis plan for future</p> <p>Facilitate inclusion of Job goal in ongoing care plan</p>

Use step-by-step guide (page 45) to help you and the client consider options

Mental wellbeing help – type of support overview



Step-by-step – choosing the best fit

What is the need?

1. **Table 1:** Focus on trial job goal: can extra support get you there? get you there quicker?



How will this approach work?

Whatever wellbeing intervention is needed will then be relevant

2. **Table 2:** Use interview information to explore work and health needs - what did you find out?



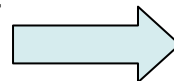
By identifying these you will open up the road back to work

3. **Table 3:** Start to work out what the health and well-being need is and how this will relate to meeting the trial job goal



This enables you to target the support intervention at specific emotional issues that need strengthening at this stage

4. **Table 4:** Think about the nature of problem, amount of support needed - decide on level, and when you expect results



Ideally, getting the right level will mean you achieve the right outcome in the shortest time realistic for the change needed

5. **Table 5:** Look at options for the level selected, explain how they work, set review date



The best guide is what the person prefers (What suits them? Why? What do they want to change?) 45

Summing up – use the tables to guide you to the right option

Working for Wellbeing in employment

Action Planning

Section 6

Action planning

- Your employer will have provided you with guidance on procedures they will expect you to follow.
- This may include drawing up an Action Plan and setting out timescales.
- You may wish to devise your own Action Plan, recording the key information and outcomes. (The next page has an illustration)
- The Action Plan can help provide you with a framework for recording the rationale behind your decisions and could be useful if sanctions were to be considered that may be detrimental to a claimant's mental health.
- The Action Plan could include details about:
 - The job goal
 - Individual action
 - If trial job goal agreed
 - How the wellbeing intervention will contribute

Action Plan Example

Employment Action Plan

Name: Adviser: Plan Date: Review Date:

Employment/trial Goal:

Why I can achieve this goal:

What do I need to prepare for employment:

Wellbeing Goal:

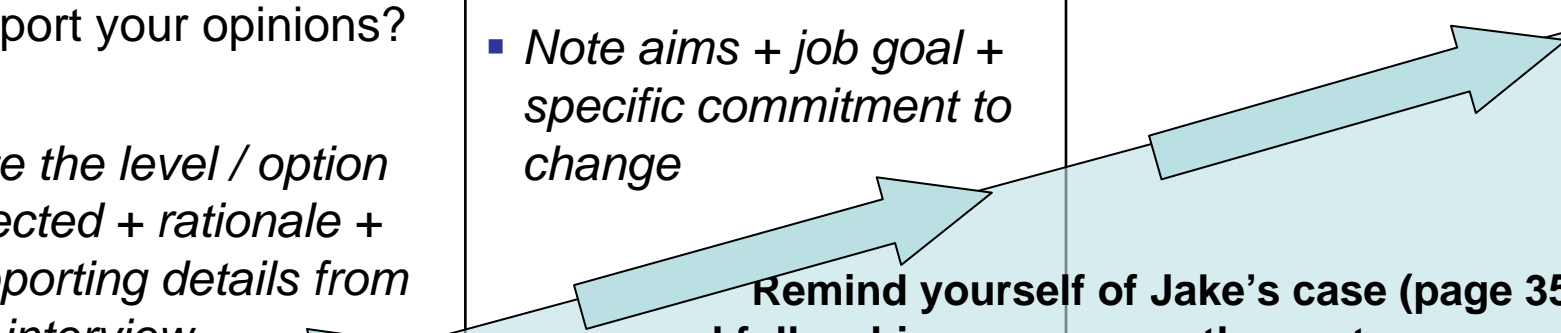
Why I need to address:

What I need to do:

Individual Need statement (described in outcome terms)	Specific Actions (to address the need)	Timescale	Who	Achieved	Part Achieved	Ongoing	Not Completed

Thinking about the Action Plan

Intervention option - rationale for choice	Health and wellbeing – what change is needed?	Intervention outcome - how you track progress
<ul style="list-style-type: none"> ▪ <i>Think backwards:</i> why do you think this option will contribute to the trial job goal? Why do you think it might suit this person? Is there any detail from the interview that you can recall to support your opinions? ▪ <i>Note the level / option selected + rationale + supporting details from the interview</i> 	<ul style="list-style-type: none"> ▪ <i>Think forwards:</i> what will success look like? Does this contribute to the job goal? Is there a specific commitment from them to <i>change something</i> and stay focussed? ▪ <i>Note aims + job goal + specific commitment to change</i> 	<ul style="list-style-type: none"> ▪ <i>Think starting point and end point:</i> when is this? Decide when to check progress and agree how this will be measured



Remind yourself of Jake's case (page 35) and follow his progress on the next page. There is a worked example of Jake's Action Plan on page 54

Case scenario 6: Jake's progress

Look back at pages 37 to 40 to remind yourself of where we left Jake

- 7. Second Appointment: keeping a focus on work.** You greet Jake and explain that today's meeting will start with checking progress on the job goal but that you will also have time to discuss extra support for any emotional issues. Noticing he seems more subdued than last time you check how he is? Jake says 'OK' but feels embarrassed at what happened last time. You reassure him there's no need to be.

It turns out Jake spoke with his girlfriend afterwards and told her you had said he 'needed to get therapy before he could think of going back to work'. She was supportive and said it might be a good idea. At this point its important to respond positively and flexibly whilst staying focussed on the primary purpose of the interview and the job goal. Apart from saying he doesn't want to go back to doing what he did before Jake has not thought further about this. You explain it will help to have a job goal in mind when you come to talk about options for support, such as therapy, and to start with looking at what would be important to Jake having a job - what does he want from work?

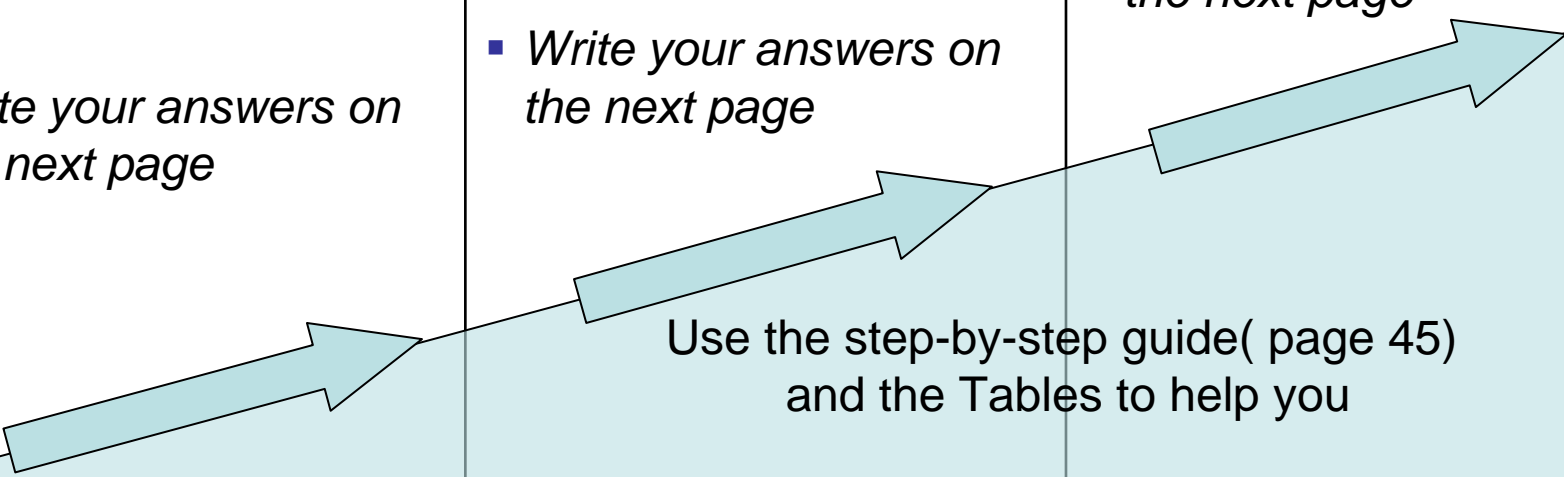
Case scenario 6: Jake's progress

8. **Trial Job Goal.** It emerges that although Jake has not worked for 3 years, officially, from time to time he has helped out his girlfriend's mother who runs her own small business, a crèche. As he enjoys this work (looking after toddlers) but has no qualifications you agree a trial job goal is to look for part-time unqualified work with children and suitable NVQ courses to access. You discuss job search tips.
9. **Employment and wellbeing Action Plan.** There isn't enough time now to discuss this properly at this meeting. When you say this Jake is annoyed - this was the main thing he wanted to talk about today.

You acknowledge Jake's annoyance but say the meeting today has been productive. You think it is better to have time for a proper discussion than to rush things. However, you did give some thought to this after the last meeting and if Jake is keen to make a start then it might be useful if he finds out more about some different options. You give him information on therapies and NHS Choices website. 51

Thinking about Jake

Intervention option - rationale for choice	Health and well-being – what change is needed?	Intervention outcome - how you track progress
<ul style="list-style-type: none">▪ What level/option do you think will contribute to supporting Jake with his job goal? Why do you think this might suit him? Is there any detail from the interview to support your opinions?▪ <i>Write your answers on the next page</i>	<ul style="list-style-type: none">▪ What outcome are you hoping for with Jake? How will this contribute to his job goal? Is there a specific commitment for him to <i>change something</i> you want?▪ <i>Write your answers on the next page</i>	<ul style="list-style-type: none">▪ When do you expect the intervention to start and end? Think about how and when you will check progress.▪ <i>Write your answers on the next page</i>



Use the step-by-step guide(page 45) and the Tables to help you

Jake's case: preparing to plan

Intervention option chosen	Health and well-being – change needed	Intervention outcome - progress checkpoints
<ul style="list-style-type: none"> <input type="checkbox"/> Level of problem <input type="checkbox"/> What do you think? <input type="checkbox"/> Option selected <input type="checkbox"/> What do you think? <input type="checkbox"/> Rationale for this <input type="checkbox"/> Jake discloses issues to do with an abusive step-father - How does this influence the way you approach the plan? What would you want to check out with him? 	<ul style="list-style-type: none"> <input type="checkbox"/> Outcome aimed for <input type="checkbox"/> What do you think? <input type="checkbox"/> Contribution to job goal <input type="checkbox"/> Able to get on better with work colleagues, bosses <input type="checkbox"/> Specific commitment to change (desirable) <input type="checkbox"/> What would you hope to see? 	<ul style="list-style-type: none"> <input type="checkbox"/> Start date <input type="checkbox"/> End date <input type="checkbox"/> Tracking Progress checkpoints:

Discuss this with your manager/colleague

Action Plan Example - Jake

Employment Action Plan

Name: Jake

Adviser: Frank

Plan Date: Nov 2012

Review Date: 4 Dec 2012

Employment/trial Goal: Part-time work with children

Why I can achieve this goal: Voluntary experience in crèche

What do I need to prepare for employment: Prepare CV, review training (NVQ)

Wellbeing Goal: Develop better sense of self worth and interpersonal skills

Why I need to address: Come to terms with past experiences and develop confidence

What I need to do: Get on better with work colleagues and bosses

Individual Need statement (described in outcome terms)	Specific Actions (to address the need)	Timescale	Who	Achieved	Part Achieved	Ongoing	Not Completed
1.Prepare a CV 2. Interpersonal skills (IP) training	<ul style="list-style-type: none"> •Attend CV workshop •Attend session with a job coach 	By end of next week By end of November	Jake Jake				

Working for Wellbeing in employment

**Work, Wellbeing and Talking
Therapies Explained**

Section 7

Before we start, why is informed choice helpful?

- No single approach is guaranteed to work for everyone, consider pros and cons
- If time is taken to explain options, how they work (for specific issues), and to find out what the person prefers (and why) they will be more involved in making an **informed choice** - this is more likely to get the best outcome
- Speaking to someone they feel they can trust is as important as the option itself
- Encourage the person to think about which option may work for them?
- Explain basic rules of confidentiality (see Glossary)
- Offer reassurance that privacy will be respected
- Remember, if someone wants therapy, you are not offering it yourself - just helping with selection
- This takes skill - and learning from experience

Key Messages:

- The options in Table 5 are what NICE says are most cost-effective
- People are entitled to access these free on the NHS - via a local therapy service or GP
- Look at the services your own organisation makes available

At the end of this section we pick up Jake's story

Brief dynamic therapy: how does it work?

- Difficult events in the past can continue to affect the way people feel and behave in the present.
- For example, someone who was bullied growing up and experienced negative, harsh criticism can repeat, *without realising how*, these same patterns at work. They seem to just ‘attract’ colleagues or managers who bully them. Eventually, they may give up rather than stay stuck in painful situations that they don’t know how to change.

Modern brief dynamic therapy is about:

- Getting the person to focus on what they can change *in the present* that will help them work
 - Helping them see how they are stuck (e.g. by not working) or repeating destructive patterns
 - Developing a capacity to deal with powerful feelings, noticing triggers e.g. during sessions
 - Developing a capacity to reflect on how they relate to people - how they see others, and how they experience the way others see them
 - Building confidence to face difficult realities
 - Unlocking new potential to make key changes
- Suitable for – anyone who feels stuck and is willing to explore what underlies their issues
 - Less suitable for – someone wanting mainly practical advice or solutions about what to do
- Tip: encourage people to choose a dynamic therapist who can ‘tune in’ to how they feel**

Cognitive behavioural therapy: how does it work?

- It can be more difficult for individuals to consider their readiness to return to employment when they are thinking negatively and at a point of feeling hopeless. These kinds of thoughts and feelings also reinforce anxiety and depression
- By changing the way a person thinks and behaves CBT can change the way someone feels. In turn, if we feel better we start to cope better, and coping better helps us to recover

Cognitive behavioural therapy is about:

- Finding practical and simple ways to change how we think and how we behave away from negative patterns to more positive patterns
- Trying out things with the support of the therapist to find what will resolve problems
- Learning skills (e.g. mindfulness) to deal with worries and difficult feelings or bad memories
- Practicing these skills until the person feels confident they can manage them on their own
- Giving support and encouragement (e.g. in a CBT group) to succeed with tasks that help someone to achieve their employment goals

- Suitable for – most forms of anxiety and depression, work-focussed support groups
- Less suitable – if a person has tried it before but didn't feel it was what they were looking for

Tip: Get the person to read CBT self-help books first or try out a self-help website

Counselling: how does it work?

- The experience of being out of work or losing a job very often affects a person's self-esteem and self-worth. When someone starts to feel worthless they are more vulnerable to depression
- Counselling provides the person with emotional support - often the support that is needed first of all to be able to express feelings of shame or anger - in a way that is safe and without feeling judged or bad because of their emotions

Effective work-focussed counselling is done by accredited counsellors and is about:

- Enabling the person to talk about *their* issues
 - Helping them get more in touch with feelings
 - Gaining trust and openness with the therapist
 - Keeping the focus on the kinds of feelings that tend to undermine their self-confidence and also can therefore limit them in terms of work
 - Building confidence they can deal with these
 - Considering new ways they can then look at themselves and re-engage with work goals
 - Having an experience of feeling accepted
- Suitable for – anyone with low self-worth
 - Less suitable for – someone who is not ready or prefers not to open up about their feelings

Tip: recommend only accredited counsellors and agree a work-focussed aim at the start

Couple therapy: how does it work?

- When one or both partners are out of work or lose their job this not only has an impact on the family income it also has an impact on the couple's relationship, which often comes under strain
- Whereas couples can and do support each other emotionally at normal times it has been found that the strain of unemployment can mean they start to criticise and undermine each other unhelpfully - making the situation worse, not better

Good couple therapy is about:

- Focussing on how to improve the relationship and clarifying how this will also help support one or both partners with employment
- Looking at how pressures from work - and lack of work are interacting with relationship issues
- Helping both partners to start to communicate with each other openly and constructively
- Building an understanding of the ways they can support rather than undermine each other
- Using their individual strengths and strengths as a couple to develop new ways of relating
- Supporting each other in achieving job goals

- Suitable for – any couples where relationship issues are affecting capacity to work
- Less suitable – where one partner is unwilling

Tip: explain they can each meet the couple therapist on their own at first if they wish

Interpersonal therapy: how does it work?

- Often what people feel is difficult about work is not the work itself but the people they have to work with - colleagues, bosses and awkward customers. When these relationships 'get on top' of someone they become depressed
- Returning to work and holding down a job requires these kinds of problems with getting on with people to be tackled head on. IPT is designed to help do this

Interpersonal psychotherapy (IPT) is about:

- Overcoming problems in relationships that then improve symptoms of depression and, in turn, improve the quality of relationships
- Identifying the links between what is going on in key relationships and the way a person is affected by these e.g. ending up feeling angry
- Working out better ways to deal with people:
 - By resolving conflicts with key people
 - By recognising how relationships need to adapt and change when life has changed
 - By moving on, and accepting loss
 - By improving relationship skills

- Suitable for – anyone with interpersonal problems that impact on their ability to work
- Less suitable – if direct mediation is needed

Tip: check - if person is unsure about starting work is this due to interpersonal problems?

Glossary of terms & definitions

- **Confidentiality** is a core requirement for effective talking therapies. The basic rule is that therapists will normally only share information with other professionals with the explicit consent of the client (and with other family members and carers if the client requests this). Collaboration about the progress of therapy should be with explicit consent of the client.
- **Employment interview** is used in this toolkit as a term to describe how advisers find out about jobseekers, discuss their needs and employment goal. Your organisation may have another term to describe this process.
- **Free-to-public help** refers here to self-help resources that are accessible as free to use (e.g. via public libraries, charity websites), as well as public mental health resources made available by local health services.
- **Job control and demands** are important to keep in balance so people can manage the amount of work they have to do and the way their work is organised. Control (or its absence) is a recognised factor in wellbeing, sickness absence and employment retention. Job demands can and do change. This can place additional strain on someone's ability to cope so discussing how they might handle changes will help.

Glossary of terms & definitions

- **Job goals** are essential to help focus the individual's job search, but equally to help maintain motivation to work. Having a job goal also helps build belief in capacity to work. It is also important as it validates attributes and skills that employers look for. Agreeing a trial job goal helps build confidence and enables health and wellbeing needs to emerge.
- **Job support** is a critical factor in keeping a job and doing it well. Before starting work or returning after sickness, identify the support available and how to access it. Line managers are pivotal to balancing demands and control for employees.
- **Mental wellbeing at work** is about how the individual, the job they do and the working environment interact. Good mental health at work comes from the employee being able to balance the demands of the job and exercise control over the way they do their work, while also receiving support to maintain that balance

Glossary of terms & definitions

- **Peer Support Groups** can be ongoing or brief (8-12 weeks) and focus on sharing experiences to support each other and improve mental wellbeing. They are more effective where a trained facilitator also works with the group.
- **Psycho-educational Groups** are a way of providing information and advice about health and wellbeing options e.g. for depression and anxiety in an interactive format and using role play and observational learning. They are led by trained facilitators.
- **Screening / Monitoring** is used in therapy as a systematic way to check for improved wellbeing or reduced symptoms (e.g. of depression). Subjective wellbeing is now measured for the general population. Screening and monitoring methods can range from simple checklists to more rigorous tests. Employers and employment advisers already screen for things such as literacy or numeracy. Tools that screen health conditions that are validated and reliable include GAD-7 and PHQ-9 for anxiety and depression. Used appropriately, screening is useful for understanding needs. But at the start the individual is often uncertain and has not yet taken stock of their strengths. This is why the approach in this Toolkit takes into account someone's goals and aspirations - where they want to get to with appropriate support. By identifying these in the Action Plan we can track progress, review this, and improve the quality of support we offer.

Glossary of terms & definitions

- **Talking therapists** are qualified practitioners who belong to professional bodies that oversee ethical standards, complaints and disciplinary procedures, and set quality standards for training and competence. Some may still be in training, but all will be working under clinical supervision as this is part of their professional requirement.
- **Vigilance** is being prepared and alert to identify appropriate interventions, pick up signs and clues from interviews, and know when action and support is needed. The vigilant adviser looks out for wellbeing and other issues that promote or constrain employment progress. Working on a job goal can protect mental wellbeing just as having a job can promote better health. Vigilant advisers look out for:
 - what issues should be managed before steps are made towards employment (by assisting the individual towards helping agencies)
 - what issues should be managed in parallel with steps towards employment (by assisting the individual towards coaching or mentoring)
 - what issues should be managed in employment to enable individual to retain their job (by assisting the individual to identify work solutions or receive help from a job coach or buddy)

Vigilance is also about being alert to the actions of employers and others which may impede the employment progress.

Glossary of terms & definitions

- **Work Solution** - sometimes a health condition or disability can hinder our ability to perform our job or job goal tasks. To identify a work solution we must think about the minimum change that we need to be able to perform the tasks. Some examples:
 - A jobseeker whose treatment leads to early morning drowsiness may ask to start 30 minutes later than normal. The employer may agree a later start of 15 minutes, but accept a slower pace on arrival.
 - Returning to work after depression, an employee working on data checking and problem resolution finds it hard to concentrate on the data. They prefer to focus on problem solving tasks, with colleagues taking over data checking. The manager accepts this and says some inaccuracies will be acceptable. Work solutions differ from adjustments (Equality Act, 2010) because they are not subject to negotiation or the employer's perception of what may be reasonable.

End note

- This toolkit was produced and designed by Work Programmes and specialist employment and mental health providers working together, with sponsorship from the Minister for Welfare Reform, Lord Freud.
- We hope you've found it useful and welcome any feedback. If you would like to comment please contact mentalhealth.work@dwp.gsi.gov.uk in box