

PS01/22

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# Occupational mental health:

Addressing patients' occupational, educational and psychosocial needs as an essential aspect of mental health care

July 2022

POSITION STATEMENT

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## Purpose of statement

This position statement highlights the crucial, positive role that ‘good work’ can have on an individual’s mental health, and how poor experience of work both risks exacerbating pre-existing poor mental health and/or contributing to the emergence of a mental health condition.

This position statement provides advice and recommendations to the key organisations and individuals who have a role in ensuring work makes a positive impact on mental health.

## College position

The College believes that addressing patients’ occupational, educational and psychosocial needs is an essential aspect of mental health care. Supporting individuals to work, wherever possible, can positively contribute to the recovery of individuals who have mental health conditions. Therefore, all mental health professionals should formally consider whether employment is a precipitating and/or maintaining factor in someone’s mental health condition, and should view being in appropriate work as a key treatment outcome.

## Recommendations

For **Government**, we recommend:

- 1 Giving workers with mental health problems early access to occupationally focused healthcare, which should include helping them to obtain, remain in, or return to, appropriate work.
- 2 Expanding vocational support services in both NHS and community settings for patients with mental health problems to help them remain in, or return to, work.
- 3 Improving access to flexible benefits and sick leave for patients with chronic fluctuating health conditions to help patients remain in, or return to, work.
- 4 Ensuring that all employers (including the NHS) recognise the benefits of ensuring that all supervisors, from the most junior upwards, feel confident to identify potential mental health difficulties in their staff and to speak with them about such difficulties using a salutogenic approach (an approach to wellness that focuses on health rather than disease).

## For **the NHS**, we recommend:

- 1 All healthcare staff understand the close links between someone's state of mental health and their ability to work. This is especially important when providing care for people who work in safety critical occupations (e.g. vehicle operators, emergency services etc.).
- 2 All healthcare staff provide care in a way that helps patients stay in, or return to, appropriate work.
- 3 All NHS staff understand the key role that occupational health services have in helping to support patients staying in, or returning to, appropriate work.
- 4 Ensuring, as a priority, that all NHS supervisors, from the most junior upwards, feel confident enough to identify potential mental health difficulties in their staff and to speak with them about such difficulties using a salutogenic approach (an approach to wellness that focuses on health rather than disease).

## For **psychiatrists**, we recommend:

- 1 Routinely exploring a patient's employment history – including their current employment status – to understand what role it may have played in contributing to their state of mental health.
- 2 Viewing it as an important treatment outcome to help patients to obtain, remain in, or return to, appropriate work.
- 3 Encouraging healthcare colleagues to recognise the mental health benefits of being in work and to consider work as a key treatment outcome for any care provided.
- 4 Advocating for their patients by appropriately communicating with employers and occupational health providers to challenge any discrimination or stigma that exists about mental health, with the aim of helping their patients remain in, or return to, appropriate work.

## For **employers**, we recommend:

- 1 Ensuring that those in supervisory positions, from the most junior upwards, feel confident enough to identify potential mental health difficulties in their staff and to speak with them about such difficulties using a salutogenic approach (an approach to wellness that focuses on health rather than disease).
- 2 Adopting policies and practices which support people who develop mental health conditions to remain in, or return to, appropriate full- or part-time work.
- 3 Recognising the value of occupationally focused mental healthcare in helping their staff remain in, or return to, appropriate work.

## Background

Mental health problems are a leading cause of work disability in the UK (Harvey et al., 2009) and access to work is a central concern for a large proportion of people with mental health problems. Supporting short- and long-term recovery from mental health conditions often involves addressing patients' needs in terms of employment, education and benefits.

'Good work' is associated with better mental health and has a number of characteristics, including:

- job security
- pay is reflective of the role
- takes place in a safe and healthy environment
- encourages productivity and prevents isolation
- allows appropriate autonomy and control
- balances power appropriately between workers and employer
- allows for a work–life balance
- offers appropriate career progression.

However, people with poor mental health are often excluded from the workplace or find themselves in precarious work (Public Health England, 2019). This puts people with mental health problems at high risk of financial insecurity, social exclusion and poor health outcomes (Rönnerblad, 2019; Henderson, 2021). Furthermore, there is strong evidence that poor mental health is associated with absenteeism and presenteeism (reduced occupational functioning) which is a particularly important consideration for those in safety critical roles (Johnston, 2019).

Psychiatrists have a key role in supporting people with mental health problems to obtain, and remain in, good work, and in helping employers understand the interface between mental health and occupational function. The key aim of the RCPsych Occupational Mental Health Special Interest Group is to promote understanding and good practice in the evolving area of work and mental health.

The pandemic has highlighted the complex interplay between work and mental health and has raised awareness of the role that work plays in individual and wider community mental health. It has also led to changes in the employment landscape that have had both negative and positive effects on mental health.

# What should all psychiatrists do to support patients to access good work?

## 1 Routine assessment of employment and education history

An employment and education history should be a part of routine clinical assessment for patients of all ages. This information should be an easily accessible part of patient notes and updated regularly (e.g. at CPA meetings) to reflect changes. An exploration of the relationship between symptoms, work and education, and the impact of symptoms and medication on occupational and social functioning is essential when patients are in recovery. Asking about future hopes for work, education and training is key – wanting to return to work is the strongest predictor of return (Summerfield, 2011). Psychiatrists should aim to facilitate a return to appropriate work wherever possible, taking into account the wishes of the individual and the nature of the work that they do.

## 2 Define work-related treatment outcomes

It is important that psychiatrists see work, work-related activities and education, as potential treatment outcomes for all working-age patients. Discrimination against people with mental health problems, in particular severe mental illness, continues to be a major barrier to work. Yet, there is strong evidence that employment support enables people with severe mental illness to return to work. Programmes such as Individual Placement and Support have good employment and health outcomes, and have been introduced in the UK (Frederick and VanderWeele, 2019).

## 3 Address work-related challenges

Work may be the first place that symptoms become unmanageable for people with mental health problems. This is often associated with mistakes, poor performance or a breakdown of relationships at work. It is not unusual for patients to feel a sense of embarrassment, humiliation and reduced confidence. Return to work can be extremely difficult without mental health treatment and occupational support. Ensuring that return to work is a key treatment goal can help, as can appropriate liaison with someone's workplace to ensure that any reasonable adjustments are likely to be beneficial. In many cases, psychiatrists may work with occupational health professionals to optimise the likelihood that individuals can work safely and effectively.

## 4 Support patients with employment and disability rights

Psychiatrists need to be equipped in their training with an awareness of employment support and disability rights so they can support patients to know their rights in the workplace. People with mental health problems are often marginalised and unaware of available support and disability legislation. Having employment support embedded within mental health services offers a key opportunity to support recovery from mental health problems. It has been shown to be effective at helping people, even those with considerable 'barriers', move into work (Bond, Drake and Campbell, 2016). We know from previous research that employment support is often not offered or available to users of mental health services, and that this is even more pronounced for some racial and ethnic groups (Bertram and Howard, 2006).

## What is the role of occupational psychiatrists?

Occupational psychiatrists have experience of working with employers to protect and improve the mental health of their staff. They may have specific qualifications related to occupational health and/or may have worked alongside occupational health professionals.

Occupational psychiatrists use their expert understanding of mental health to ensure that people are fit for suitable work; evidence suggests that their role helps optimise worker's capacity to work well and safely (Greenberg, 2005). This may involve liaising between patients, employers and other clinicians to support people with mental health problems to remain in the workplace, or to return after a period of sickness absence. They have a role supporting patients to manage mental health conditions at work and advising employers on how best to support their workers. They also have a key role in assessing the risk to mental health problems for the employee and employer, and this is particularly important for people who work in safety critical role whose actions may directly affect the health, or indeed lives, of others. At present, there is no specific recognition of occupational psychiatry as a sub-specialisation by the Royal College of Psychiatrists. It is expected that occupational psychiatrists would be active members of the College's Occupational Psychiatry Special Interest Group.

## Summary and conclusion

Psychiatrists' attitudes towards work, training and education for people with mental health problems have a major influence on patients' hopes and expectations for rehabilitation. In addition, the position of psychiatrists as gate keepers to care enables them to refer patients for support and liaise with outside organisations, with consent, where appropriate.

In collaboration with patients and employers, RCPsych's Occupational Mental Health Special Interest Group aims to promote understanding of:

- 1 The way mental health conditions manifest in the workplace.
- 2 Specific challenges in occupational mental health.
- 3 Occupational support for patients with mental health problems trying to remain in work and navigate the benefits system.
- 4 Support for patients aiming to return to work, training or education.
- 5 Disability and employment rights.
- 6 Working with occupational health professionals, occupational psychologists, HR and other professionals who have a role in supporting the mental health of people within the workplace.

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