

Leading WELL

SUPPORTING MENTAL HEALTH AND RESILIENCE
IN THE WORKPLACE WITHIN ACADEMIC
SETTINGS

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AGENDA

10:00AM - Welcome, Land Acknowledgement

10:02AM - Mood Activity (5 minutes)

10:10AM - Approach to mental health using the MHCM (10 minutes)

10:20AM - Psychological health and safety in the workplace, team resilience and
PH&S leadership practices

10:30AM - Breakout group discussion (20 minutes)

10:50AM - Share back with broader group (20 minutes)

11:10AM - Mentimeter activity

11:20AM - Closing remarks



LEARNINGS WE HOPE TO LEAVE WITH YOU

- GAIN AN UNDERSTANDING OF UBC'S APPROACH TO MENTAL HEALTH AND RESILIENCE
- EXPLORE INTERSECTIONS BETWEEN INDIVIDUAL MENTAL HEALTH, TEAM RESILIENCE AND PSYCHOLOGICAL HEALTH AND SAFETY IN THE WORKPLACE
- LEARN ABOUT, REFLECT ON AND GAIN AN UNDERSTANDING OF CORE CONCEPTS RELATED TO PSYCHOLOGICALLY SAFE AND HEALTHY LEADERSHIP PRACTICES THAT SUPPORT MENTAL HEALTH AND RESILIENCE IN THE WORKPLACE
- REFLECT ON AND IDENTIFY WAYS IN WHICH MENTAL HEALTH AND RESILIENCE ARE FOUNDATIONAL TO REMAINING EFFECTIVE DURING TIMES OF UNCERTAINTY



INTRODUCTIONS: MOOD CHECK IN ACTIVITY

Think about two words that best describe your current mood and how you feel. Try your best to be open and honest.

In your breakout room, share two words that describe your current mood and a short description as to what be contributing to the mood you are experiencing (if you feel comfortable).





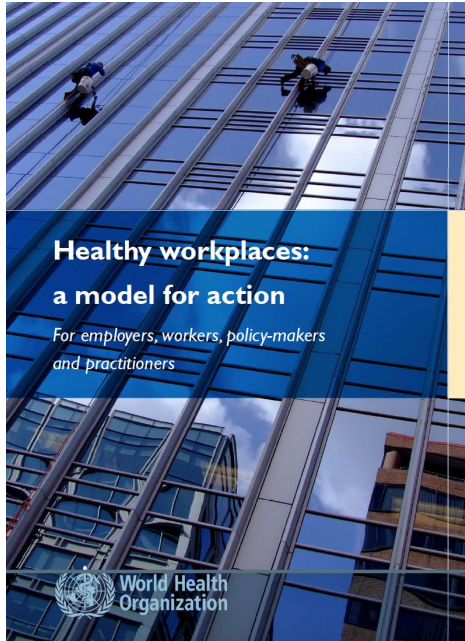
WHEN I HEAR, I FORGET

WHEN I SEE, I REMEMBER

WHEN I DO, I UNDERSTAND

- ADAPTED FROM THE TEACHINGS OF XUNZI

WORKPLACE WELLBEING



Healthy workplaces: a model for action

For employers, workers, policy-makers
and practitioners



World Health
Organization



CSA
Group



Bureau de normalisation
du Québec

CAN/CSA-Z1003-13/BNQ 9700-803/2013
National Standard of Canada

Psychological health and safety in the workplace —

Prevention, promotion, and guidance
to staged implementation

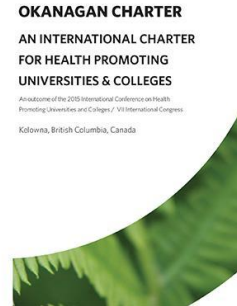
Disponible en français
*Santé et sécurité psychologiques
en milieu de travail —
Prévention, promotion et lignes
directrices pour une mise en
œuvre par étapes*



Commissioned by the
Mental Health Commission of Canada



Standards Council of Canada
Conseil canadien des normes



OKANAGAN CHARTER AN INTERNATIONAL CHARTER FOR HEALTH PROMOTING UNIVERSITIES & COLLEGES

An outcome of the 2015 International Conference on Health
Promoting Universities and Colleges / VI International Congress
Kelowna, British Columbia, Canada



WELLBEING AT UBC

- Universities are dependent upon their people (students, staff and faculty) and what we do. Research shows us that: to learn, teach, research or work well, you must be well
- We encourage our people to strive for excellence. By fostering an environment that promotes wellbeing, we are supporting them to succeed
- **SUPERVISORS AND LEADERS SERVE AS ROLE MODELS AND PLAY A KEY ROLE IN CONTRIBUTING TO AN ORGANIZATIONAL CULTURE OF INDIVIDUAL AND COLLECTIVE WELLBEING AT UBC**
- We are living through unprecedented times characterized by rapid and constant change. Our ability to navigate uncertainty is dependent upon our ability to invest in and leverage our wellbeing and resilience.



**IN A COMPLEX SYSTEM,
SMALL CHANGES CAN HAVE A
SIGNIFICANT IMPACT**



Mental Health Continuum Model



Signs and Indicators

<ul style="list-style-type: none"> ▶ Normal mood fluctuations ▶ Calm/confident ▶ Good sense of humour ▶ Takes things in stride ▶ Can concentrate/focus ▶ Consistent performance ▶ Normal sleep patterns ▶ Energetic, physically well, stable weight ▶ Physically and socially active ▶ Performing well ▶ Limited alcohol consumption, no binge drinking ▶ Limited/no addictive behaviours ▶ No trouble/impact due to substance use 	<ul style="list-style-type: none"> ▶ Nervousness, irritability ▶ Sadness, overwhelmed ▶ Displaced sarcasm ▶ Distracted, loss of focus ▶ Intrusive thoughts ▶ Trouble sleeping, low energy ▶ Changes in eating patterns, some weight gain/loss ▶ Decreased social activity ▶ Procrastination ▶ Regular to frequent alcohol consumption, limited binge drinking ▶ Some to regular addictive behaviours ▶ Limited to some trouble/impact due to substance use 	<ul style="list-style-type: none"> ▶ Anxiety, anger, pervasive sadness, hopelessness, ▶ Negative attitude ▶ Recurrent intrusive thoughts/images ▶ Difficulty concentrating ▶ Restless, disturbed sleep ▶ Increased fatigue, aches and pain ▶ Fluctuations in weight ▶ Avoidance, tardiness, decreased performance ▶ Frequent alcohol consumption, binge drinking ▶ Struggle to control addictive behaviours ▶ Increase trouble/impact due to substance use 	<ul style="list-style-type: none"> ▶ Excessive anxiety, panic attacks, easily enraged, aggressive ▶ Depressed mood, numb ▶ Non compliant ▶ Cannot concentrate, loss of cognitive ability ▶ Suicidal thoughts/intent ▶ Cannot fall asleep/stay asleep ▶ Constant fatigue, illness ▶ Extreme weight fluctuations ▶ Withdrawal, absenteeism ▶ Can't perform duties ▶ Regular to frequent binge drinking ▶ Addiction ▶ Significant trouble/impact due to substance use
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Actions to Take at Each Phase of the Continuum

<ul style="list-style-type: none"> ▶ Focus on task at hand ▶ Break problems into manageable tasks ▶ Controlled, deep breathing ▶ Nurture a support system 	<ul style="list-style-type: none"> ▶ Recognize limits, take breaks ▶ Get enough rest, food, exercise ▶ Reduce barriers to help-seeking ▶ Identify and resolve problems early ▶ Example of personal accountability 	<ul style="list-style-type: none"> ▶ Talk to someone, ask for help ▶ Tune into own signs of distress ▶ Make self-care a priority ▶ Get help sooner, not later ▶ Maintain social contact, don't withdraw 	<ul style="list-style-type: none"> ▶ Follow care recommendations ▶ Seek consultation as needed ▶ Respect confidentiality ▶ Know resources and how to access them
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LEADERSHIP, MENTAL HEALTH AND TEAM RESILIENCE

- Across various bodies of research there is an inextricable connection between psychologically safe and supportive leadership behaviours, employee mental health and team resilience.
- Team resilience mediates between positive emotions and team performance. This is mainly due to the critical importance of the social factor in individual resilience which extends to concepts like team agility, productivity and dynamics (Bennett et al., 2010).
- Team resilience, is defined as “the capacity to bounce back from failure, setbacks, conflicts, or any other threats to wellbeing that a team may experience” (West et al, 2009, p. 253).



PSYCHOLOGICALLY SAFE AND HEALTHY LEADERSHIP



KEY DOMAINS OF PSYCHOLOGICALLY HEALTHY AND SAFE LEADERSHIP



Communication
and
Collaboration



Social
Intelligence



Problem
Solving and
Conflict
Management



Security and
Safety



Fairness and
Integrity

BREAKOUT GROUP DISCUSSION – 25 MINUTES

Establish who will take notes and report back highlights to the broader group. Record notes under your breakout room group number (1-5) on the google doc. Each group will be assigned one of the PH&S leadership domains.



Think about a time when you have directly experience or indirectly observed this domain embodied by a supervisor or leader successfully. Consider the following:

- What did this look like? What was their leadership style (invite and inquire or command and control or both?)
- What impact did this have on direct reports and colleagues?
- Finally, why is this domain important within our context (increased in-person working and learning on campus)?

BREAKOUT GROUP DISCUSSION – SHARE BACK

PLEASE SHARE BACK THE KEY THEMES AND IDEAS THAT WERE GENERATED DURING YOUR DISCUSSION.

SEQUENCE:

Group 1 - Communication and collaboration

Group 2 - Social intelligence

Group 3 - Problem solving and conflict management

Group 4 - Security and safety

Group 5 - Fairness and integrity



MENTIMETER ACTIVITY

- What is one action you intend to take to be a psychologically healthy and safe leader and contribute to workplace mental health and resilience?



Go to **www.menti.com** and use code 9258 0693

KEY RESOURCES TO SUPPORT EMPLOYEE MENTAL HEALTH AND RESILIENCE

[For Managers, Heads and Deans](#)

Key Resources for Supporting Staff and Faculty Mental Health

- [Mental Health Resources and Supports](#) for Faculty and Staff [Psychological services are available through [Employee Family Assistance Program](#) and [Extended Health Benefits](#)]
- [Substance use and addiction support resources](#) for Faculty and Staff



Key Resources for Supporting Workplace Wellbeing

- [Workplace Wellbeing Ambassadors Program](#)
- [Healthy Workplace Initiative Fund](#) (deadline of May 30)
- [Not Myself Today \(CMHA\) Initiative and Digital Portal](#)

Workplace Wellbeing Services

- [Training and Education](#)
- Facilitation
- Support in strategic thinking, planning, action
- Support in measuring and evaluating workplace wellbeing

For further support, complete our [Workplace Wellbeing Consulting Services request form](#)

THANK YOU!



QUESTIONS OR COMMENTS? LET'S CONNECT!

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THE UNIVERSITY OF BRITISH COLUMBIA

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