

Mentally Healthy Workplaces in NSW

re-execution of benchmarking tool survey among the NSW workforce



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project overview and approach

background to the strategy and study



NSW Mentally Healthy Workplaces Strategy 2018–22

The need

- Nearly one in six Australian workers experience a significant level of mental illhealth in a four-week period.
- If unaddressed, this can have long-term impacts on an individual's mental health, quality of life and financial independence, which can in turn impact their family and the community.
- One third of adult life is spent at work and the workplace can prevent mental ill-health and promote recovery or, conversely, cause or exacerbate mental illness. The rising expenditure related to workplace mental health is largely attributed to treatment, rather than prevention.
- The workplace presents a unique opportunity to reduce the impact and severity of mental ill-health in NSW. Mentally healthy workplaces achieve better mental health outcomes and experience returns of up to four dollars for every dollar invested and additional benefits, such as improved staff retention, increased productivity and more engaged workers.

The strategy

- The NSW government's vision is to ensure NSW workplaces take effective action to create mentally healthy workplaces to enable "healthy, safe and productive working lives".
- By 2022, the aim is to have more than 90,000 NSW businesses taking effective action to create mentally healthy workplaces, with the target of a 30% reduction in serious workplace illness and injuries by 2022 outlined in the WHS Roadmap for NSW 2022.
- Ultimately, the outcomes being sought include:
 - 1. Increased awareness and understanding of mentally healthy workplaces
 - 2. Increased capability and awareness of NSW employers to create mentally healthy workplaces
 - 3. Improved NSW workers' perception that their workplaces are safer and healthier
 - 4. Better promoted, preserved and restored social connections within the workplace and community
 - 5. Improved productivity, due to reduction in absenteeism and presenteeism, improved recovery at work outcomes and employer cost savings.

the 2017 benchmark study

In collaboration with mental health experts, advocates and Instinct and Reason, SafeWork NSW developed the mentally healthy workplaces in NSW benchmarking tool (BMT) - a tool that measured the capability of <u>employers</u> to create mentally healthy workplaces, identified the initiatives most needed, and enables future evaluation of the success of the NSW Mentally Healthy Workplaces Strategy. The 2017 BMT surveyed 2,000 NSW workplace employers to establish baseline metrics (workers were not surveyed in the 2017 study), with the results indicating NSW workplaces were widely distributed across five capability segments to prevent and manage mental health at work. These are listed below with the distribution of workplaces:

Five mental health capability segments in NSW

5. Integrated and sustained

Mental health is everyone's responsibility. Mental health specific systems, policies and procedures are integrated and embedded in the workplace. Interventions are tailored to each work group. Improvement in mental health in the workplace is visible and continuous.

4. Effective action

Ongoing leadership commitment (work design, culture, financial) with prevention focus. Universal mental health systems, policies and processes support evidence-informed interventions at the workplace level, targeted at identified risks.

3. Limited action

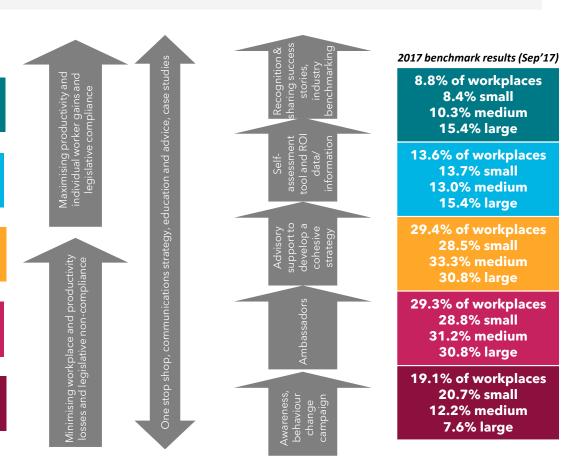
The workplace recognises its responsibility to manage workplace mental health risks and issues. Generic mental health systems, policies and processes with reactive, optional or unconnected interventions.

2. Intention

General WHS systems, policies and processes with limited, ad hoc or outsourced psychosocial support services.

1. Basic awareness

The workplace views mental health as an individual's responsibility. General WHS systems, policies and processes only.



the 2020 pilot validation study

- The 2020 mid-term evaluation builds on the results of the 2017 mentally healthy benchmarking tool (BMT) by validating the BMT through a qualitative and quantitative pilot study. This was to ensure the BMT was understandable to workers and accurate in describing the performance of the workplace in being a mentally healthy place to work.
- By getting these two elements right, the BMT incorporates and compares the employer and worker perspectives to measure the current mentally healthy status of the workplace.
- The validation pilot study validated the BMT by establishing that a relationship does exist between positive workplace behaviours (the workplace attributes measured in the benchmark) and a genuinely mentally healthy workplace (these additional factors were identified and then included in the pilot test validation survey). The results showed that the segments, as based on worker and employer views about the actual state of the workplace, do in fact correlate with better mental health workplace outcomes and, as such, the BMT was validated.
- The validation pilot study designed a worker survey that incorporates the worker perspective while ensuring workers can complete the BMT survey in a meaningful way (that is, ensuring they understood the questions, and could answer them), and showed that the results were consistent with the employer BMT. The existing BMT was found to be ambiguous and unclear in parts for workers who are not exposed to policies, training, vision, or what managers receive by way of training. As such, section D and E scales were revised to a yes or no while section B and C had the scale terminology revised.

2020 VALIDATION PILOT STUDY APPROACH

STEP 1



- We conducted 36 expert interviews qualitatively <u>25th June</u> 2020 to 29th July 2020
- To establish <u>face validity/content</u> to enhance the survey in line with union reps, senior health and safety reps and workers exposed and engaged with issues related to a mentally healthy workplace
 - > Implemented a Yes / No scale for Sections D & E
 - Revised Likert-type semantic scale to enhance understanding and suitability to workers
 - > **Deleted** ambiguous and repetitive statements
 - Simplified wording and terminology
 - Added experience of mental health events and more attitudinal statements
 - > Added **COVID-19** questions

STEP 2



- We put the revised survey into field on 4th September 2020 to 14th September 2020 with the worker and employer samples
- We achieved n=506 workers and n=302 organisations
- To establish survey validity using robust quantitative techniques and analysis
- Outcome of this step: make proposed revisions to survey instrument/s in consultation with SafeWork NSW

the 2020 benchmark re-execution

this report details insights gained from the two BMT surveys worker and employer



Objectives

This 2020 mentally healthy survey re-execution aims to understand whether an increased number of NSW businesses were taking effective action to create a mentally healthy workplace.

More specifically:

- To identify the NSW workforce's current performance in providing a mentally healthy workplace (MHW) and its capacity for incorporating mental health awareness and initiatives into their workplace health and safety systems and procedures.
- To support the NSW workplaces through the provision of trended data against the 2017 benchmark results to determine progress in achieving more mentally healthy workplaces.



Method

These insights are based on online survey responses from its workforce; with the survey developed from SafeWork NSW's benchmarking tool surveys of 2020.

Length of survey:

- o Employer survey: 14 mins 20 secs
- o Worker survey: 13 mins 57 secs

Timing of fieldwork



- Launched on the 6th of October, 2020
- Completed on the 11th of November, 2020
- 36 days in field



Sample

NSW employers



NSW workers



A further breakdown of the worker sample is as follows (more detail can be found in the appendix):

	Worker	Employer
Supervisory role	2,737	4,002
Non- supervisory	5,268	4,002
Sub-total	8,005	4,002
TOTAL	12,007	

the four themes and 42 attributes measured for employers



POLICIES

- 1. Has a vision for worker health and wellbeing
- 2. A workplace health and safety or wellbeing strategy
- 3. A workplace health and safety strategy that is monitored
- 4. A health and safety and worker wellbeing policy
- 5. Key performance indicators for workplace health and safety

PROCESSES

- 6. Processes for prevention efforts for workplace illnesses and injuries
- 7. Workplace illness and injury prevention activities informed by organisational data



RISK IDENTIFICATION

- 8. Organisation's safety culture is everyone's responsibility
- 9. Consults workers to identify workplace risks/hazards (using informal meetings, surveys etc)
- 10. Designs work to improve safety and wellness outcomes

WORK DESIGN MANAGEMENT

- 11. Managers proactively identify where there are risks of injury
- 12. Managers adjust the design of work to minimise risk of injury
- 13. Managers support and commit to worker safety and wellbeing
- 14. Managers that cooperate with workers to identify risks to inform workplace health and safety strategies
- 15. The types of workplace health and safety incidents are measured/recorded

CONSULTATION AND ENGAGEMENT

16. Consults workers about health and safety

CONSULTATION REPORTING

- 17. Report the safety consultation results to management
- 18. Report the safety consultation results to workers

MENTAL HEALTH PROMOTION

- 19. Undertake activities and communications that promote worker health and safety
- 20. Tailored WHS promotions that relate to risks present in your workplace



LEADER TRAINING

- 21. Managers are trained in designing safe workplaces (e.g. designing roles to minimise exposure to psychosocial risks etc)
- 22. Managers are made aware of the best language and approach when dealing with workplace health
- 23. Managers are trained in how to prevent and manage stigma around workers' health
- 24. Managers and workers put their training into practice
- 25. There is training that builds leaders' capability to prevent and manage the health of workers

WORKER TRAINING ATTRIBUTES

- 26. Workers have compulsory induction training
- 27. Workers have training programs that make them aware of workplace risks
- 28. Workers have training programs on stigma reduction around ill-health
- 29. Workers have training programs that build capability to prevent and manage injuries at work
- 30. Workers are trained in providing support for their fellow workers regarding workplace health and safety



Support services

RESOURCES & SERVICES

- 31. Workers have access to self-service health tools
- 32. Workers have access to internal or external support
- 33. Workers have access to workplace health and safety support services with clinically trained professionals
- 34. Organisation monitors whether workers use internal or external workplace health and safety support services
- 35. Workers have access to peer support programs

PROMOTION & ENDORSEMENT OF SUPPORT SERVICES

- 36. Resources allocated to prevent incidents and manage safety
- 37. Information is provided about outsourced support services when requested
- 38. Managers promote use of support services
- 39. Managers make it normal for workers to use support services

QUALITY CONTROL ATTRIBUTES

- 40. Organisation monitors the use of support services
- 41. Organisation links use of support services to its workplace health and safety KPIs
- 42. Organisation evaluates the quality of the support services and improves them

the four themes and 24 attributes measured for workers



POLICIES

- 1. There is a vision or strategy for mental health and worker wellbeing
- 2. There are policies in place for mental health and worker wellbeing
- 3. There is a measurement system in place for how the workplace is doing on mental health of its workers (use of KPIs)

PROCESSES

- 4. There are processes to limit mental health risks and stressors in the workplace (e.g. changing work design, rosters, schedules, hours worked, social events etc)
- 5. There is organisational data on mental health and they act on this to make changes for the better



Managing risk in the workplace

RISK IDENTIFICATION

- 6. Has a positive mental health culture that is seen as everyone's responsibility
- 7. Consults with workers to identify workplace pressures and risks (i.e. using informal meetings, surveys, etc)

WORK DESIGN MANAGEMENT

- 8. Has leaders that proactively identify where there are mental health risks
- 9. Has managers that think about the workloads, tasks, and responsibilities of workers to minimise mental health risks
- 10. Has managers in place that are easy to talk to and approachable about mental health and worker wellbeing

CONSULTATION AND ENGAGEMENT

11. Consults workers about mental health and worker wellbeing

MENTAL HEALTH PROMOTION

- 12. Undertakes activities and communications that promote mental health and wellbeing (i.e. encouraging us to take walks during lunchtime, meditation sessions etc)
- 13. Promotes mental health and worker wellbeing at work (for example workers are made aware of issues like bullying and harassment, team work is encouraged to reduce stress, conflict resolution is taught etc)



LEADER TRAINING

14. Leaders are trained to recognise the warning signs of potential mental health issues

WORKER TRAINING ATTRIBUTES

- 15. Workers have compulsory induction training when they start on the topic of workplace mental health
- 16. Workers get training on what are the workplace risks that could lead to poor mental health
- 17. Workers get training on what they can do to be more capable to manage their mental health
- 18. Workers are trained in how to provide support for their fellow workers



Support services

RESOURCES & SERVICES

- 19. Organisation gives me access to internally available support services for mental health and worker wellbeing that the organisation has made known to us
- 20. Organisation gives me access to support services outside of this organisation for mental health and worker wellbeing that the organisation has made known to us
- 21. Organisation gives me access to peer support programs
- 22. Organisation gives me access to internally available support services, that are not only trained in mental health, but I have been told I can access for this reason (e.g. First aiders, OHS officers, union reps etc)

PROMOTION & ENDORSEMENT OF SUPPORT SERVICES

23. The organisation has managers who promote the use of support services for mental health

QUALITY CONTROL ATTRIBUTES

24. The organisation evaluates and improves the quality of support services it provides

the scales used to measure the themes and attributes

Employer BMT

All four themes and 42 attributes in the employer BMT are measured with the same scale as 2017. In the employer BMT, this scale and definitions, were shown as a reference to respondents:

Mental health policy that is Integrated & embedded across the business with tailored and Sustained continuous improvements Targeted and proactive on **Effective Action** mental health **Limited Action** health when an incident occurs Some focus on mental Intention health Little/no focus on mental **Basic Awareness** health

Worker BMT

The existing employer BMT scales were found to be ambiguous and unclear in parts for workers. In section B, policies and process, and in section C, managing risks in the workplace, the following scale was shown to respondents:

Mental health is effectively addressed

Only when a mental health incident happens (menta health has a limited focus)

Discussions to make it happen, but no action (has some focus on mental health)

Don't think that's happening

Don't know/not sure

In section D, education and training, and in section E, support services, the following scale was shown to respondents:

Yes

No

Don't know/not sure



2 executive summary







What the segment ratings tells us:

The following segment definitions are provided for reference and equate to the description shown in the employer BMT survey. The complete definition can be found in the background section.

Pacie Little/no focus on

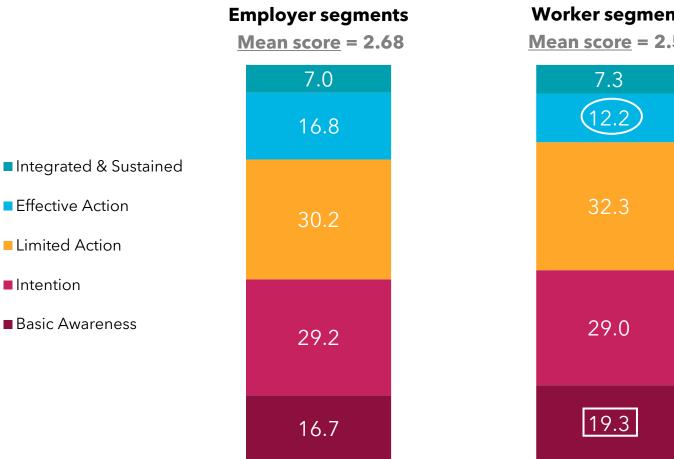
Basic	Little/no locus on	
Awareness	mental health	
Intention	Some focus on	
memon	mental health	
	Only focuses on	
District Assistan	mental health	
Limited Action Effective Action	when an incident	
	occurs	
	Targeted and	
	proactive on	
	mental health	
	Mental health	
Integrated & Sustained	policy that is	
	embedded across	
	the business with	
	tailored and	
	continuous	
	improvements	

^{*}According to ABS business indicators, there are 319,152 employing businesses in NSW at the end of financial year 2019 and 301,527 at the end of the 2016 financial year.



employer segments compared to worker segments

2020 rating comparisons using a standardised scoring approach



Worker segment	S	Fo
Mean score = 2.5	9	su
7.3		ou
(12.2)		su
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29.0		

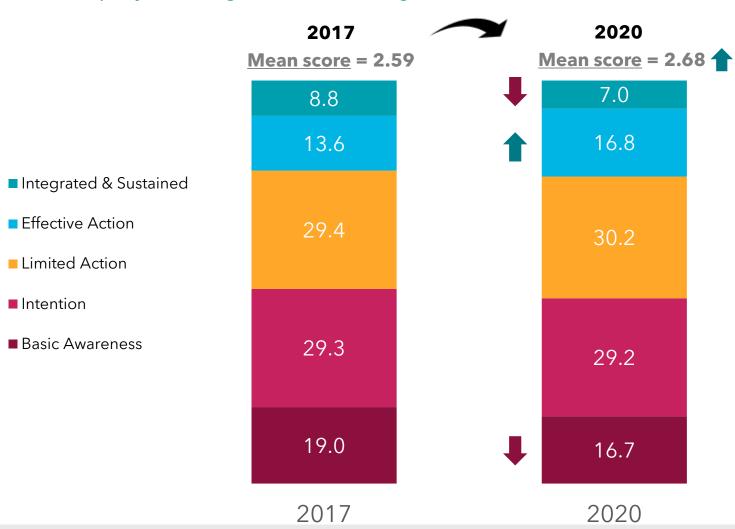
ollowing the calibration of scaling across the two rveys, we achieved remarkably similar segment itcomes, which provides face validity to the rvey results. Both results link higher performing gments to a wide range of outcomes that dicate a mentally healthy workplace actually cists.

	Employer Score	Worker Score
Basic Awareness	<84	<22
Intention	85-126	23-36
Limited Action	127-168	37-59
Effective Action	169-200	60-69
Integrated & Sustained	>200	70





2020 employer ratings (senior management / HR roles)



The mid term study finds an overall small but positive shift since the 2017 benchmark with:

- Basic awareness down by 2.3%
- Intention down by 0.1%
- Limited action up by 0.9%
- Effective action up by 3.2%
- Integrated and sustained down by 1.8%

Overall there is positive shift from 2.59 to 2.68 in three years and a more mature realisation that integrated and sustained requires more work than initially understood.

Number of businesses*	2017	2020
	n=	n=
Integrated & Sustained	26,534	22,341
Effective Action	41.008	53,618
Limited Action	88,468	96,512
Intention	88,136	93,256
Basic Awareness	57,381	53,426
Total	301,527	319,152

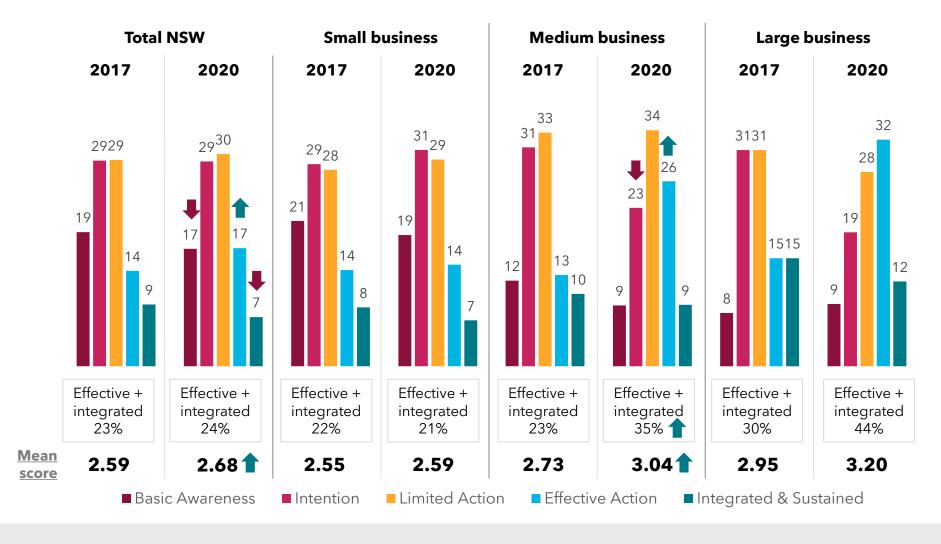
^{*}According to ABS business indicators, there are 319,152 employing businesses in NSW at the end of financial year 2019 and 301,527 at the end of the 2016 financial year.

Base: NSW employers (senior management / HR roles); 2020 n=4,002; 2017: n =2,000



employer segments: business size

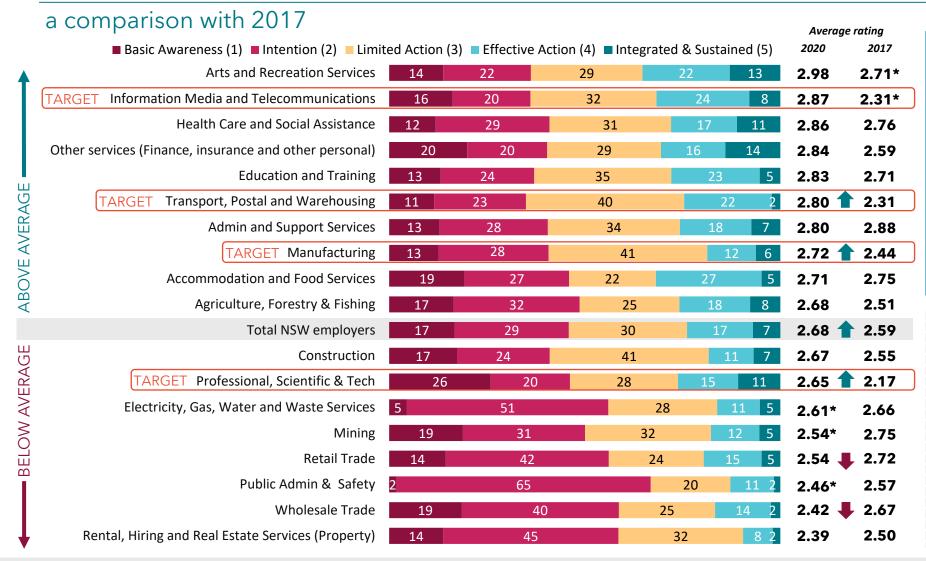
a comparison with 2017



- The improved segment average in NSW (2.59 in 2017 to 2.68 in 2020) is being driven by significantly more medium sized businesses taking effective or integrated mental health action in their workplace (23% in 2017 to 35% in 2020).
- Larger entities continue to have greater presence in the effective action and integrated & sustained segments, with indicative rises having occurred since 2017 (30% to 44%).



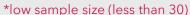
employer segments: industry



• Three of the four target industries had significant improvements in their segment averages since 2017; they are the only industries to see a significant improvement over this period (Information, media and telecommunications rose, but this cannot be significant due to a low sample in 2017).

What the segment ratings tells us:				
Basic Awareness	Little/no focus on mental health			
Intention	Some focus on mental health			
Limited Action	Only focuses on mental health when an incident occurs			
Effective Action	Targeted and proactive on mental health			
	Mental health policy that is embedded across the business with tailored and			

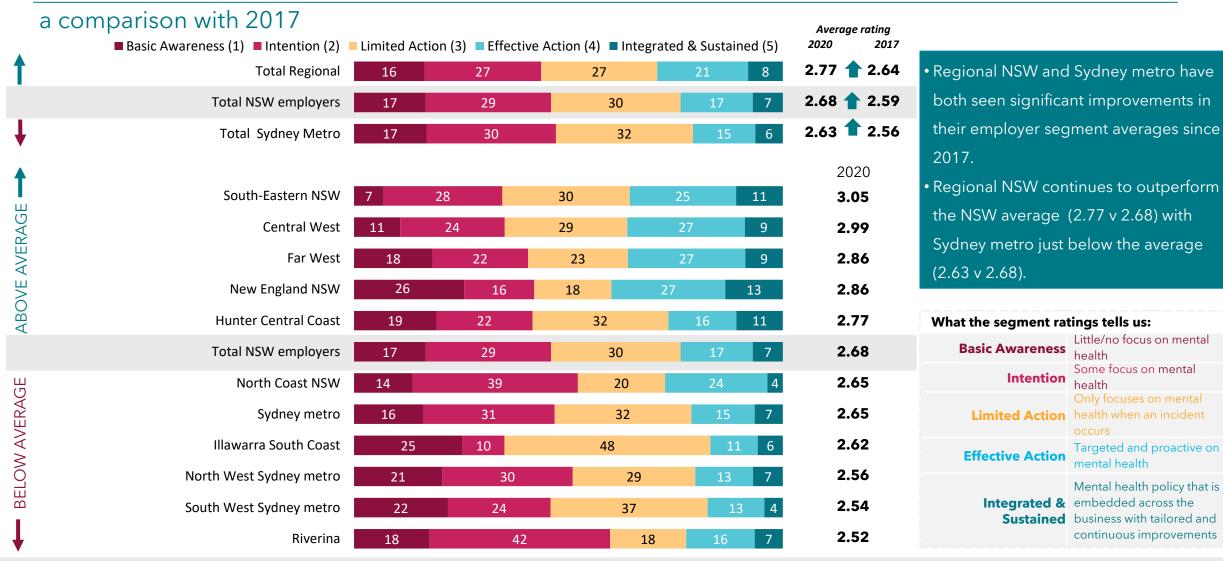
continuous improvements



Base: NSW employers (senior management / HR roles); 2020 n=4,002; 2017: n =2,000; samples vary per industry **Significance:** two tailed test of difference at a 95 per cent level of confidence [♣ / ♠ significantly less/more than 2017]



employer segments: Sydney metro vs regional NSW





2020 employer metrics vs. 2017

There has been a significant improvement in most of the 42-employer metrics since 2017. The greatest improvement has been among the worst performing metrics of 2017 while the remaining top metrics have seen minimal improvement since 2017

remaining top metrics have seen minimal improvement since 2017.							
Best performing metrics in 2020 (mean results)	2020	2017			2020	2017	Change
Consults workers about health and safety	3.63	3.49	0.14		3.47	3.37	0.10
Report the safety consultation results to management	3.57	3.49	0.08	Organisation evaluates the support services quality and improves them	3.46	3.17	0.29
Organisation's safety culture is everyone's responsibility	3.57	3.61	-0.04	Managers are trained to prevent and manage stigma around workers health	3.46	3.30	0.16
Report the safety consultation results to workers	3.56	3.44	0.12	Resources allocated to prevent incidents and manage safety	3.46	3.30	0.16
Managers cooperate with workers to identify risks to inform WHS strategies	3.55	3.53	0.02	Workers can access WHS support with clinically trained professionals	3.46	3.34	0.12
Consults workers to identify workplace risks/hazards	3.54	3.49	0.05	Managers are trained in designing safe workplaces	3.46	3.38	0.08
Managers support and commit to worker safety and wellbeing	3.54	3.51	0.03	Managers promote use of support services	3.46	3.38	0.08
The types of WHS incidents are measured/recorded	3.54	3.53	0.01	Organisation links use of support services to its WHS KPIs	3.45	3.15	0.30
Tailored WHS promotions relating to risks present in your workplace	3.53	3.31	0.22	Training to build leaders' ability to prevent and manage the workers' health	3.45	3.35	0.10
Designs work to improve safety and wellness outcomes	3.53	3.41	0.12	Information is provided about outsourced support services when requested	3.45	3.36	0.09 👚
Workers have compulsory induction training	3.51	3.39	0.12	Worker training programs to prevent and manage the health of workers	3.45	3.42	0.03
Undertake activities and communications that promote WHS	3.51	3.43	0.08	Organisation monitors the use of support services	3.44	3.17	0.27
Processes for prevention efforts for workplace illnesses and injuries	3.50	3.48	0.02	Workers have access to self-service health tools	3.44	3.26	0.18
Workplace illness and injury prevention activities informed by data	3.49	3.34	0.15	Workers trained to support for their fellow workers regarding WHS	3.43	3.24	0.19 👚
A WHS or wellbeing strategy	3.49	3.38	0.11	Managers know the best language and approach when dealing with WHS	3.43	3.43	0.00
Workers have access to internal or external support	3.49	3.40	0.09 👚	Organisation monitors if workers use internal/external WHS support services	3.42	3.16	0.26
Managers proactively identify where there are risks of injury	3.49	3.48	0.01	Key performance indicators for workplace health and safety	3.42	3.32	0.10
Managers and workers put their training into practice	3.48	3.39	0.09 👚	Managers make it normal for workers to use support services	3.42	3.39	0.03
A health and safety and worker wellbeing policy	3.48	3.41	0.07	Workers have access to peer support programs	3.41	3.18	0.23
Workers have training programs that make them aware of workplace risks	3.48	3.46	0.02	Workers have training programs on stigma reduction around ill health	3.40	3.22	0.18 👚
Managers adjust the design of work to minimise risk of injury	3.48	3.52	-0.04	Has a vision for worker health and wellbeing	3.37	3.41	-0.04
-							

Base: NSW employers (senior management / HR roles); 2020 n=4,002; 2017: n =2,000 **Significance:** two tailed test of difference at a 95 per cent level of confidence [♥/ ★ significantly less/more than 2017]

Strongest improvement since 2017

Weakest change since 2017

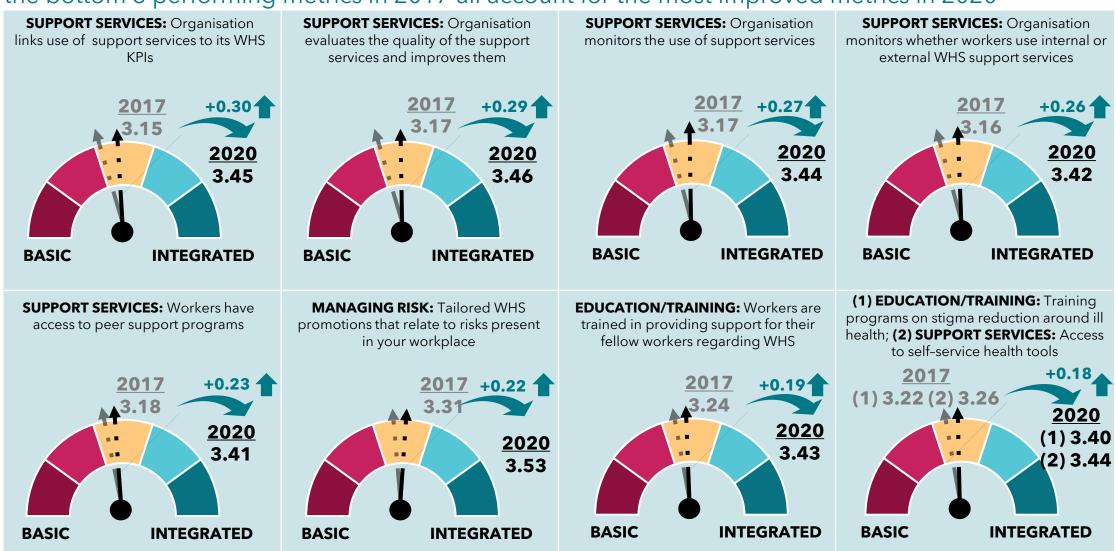






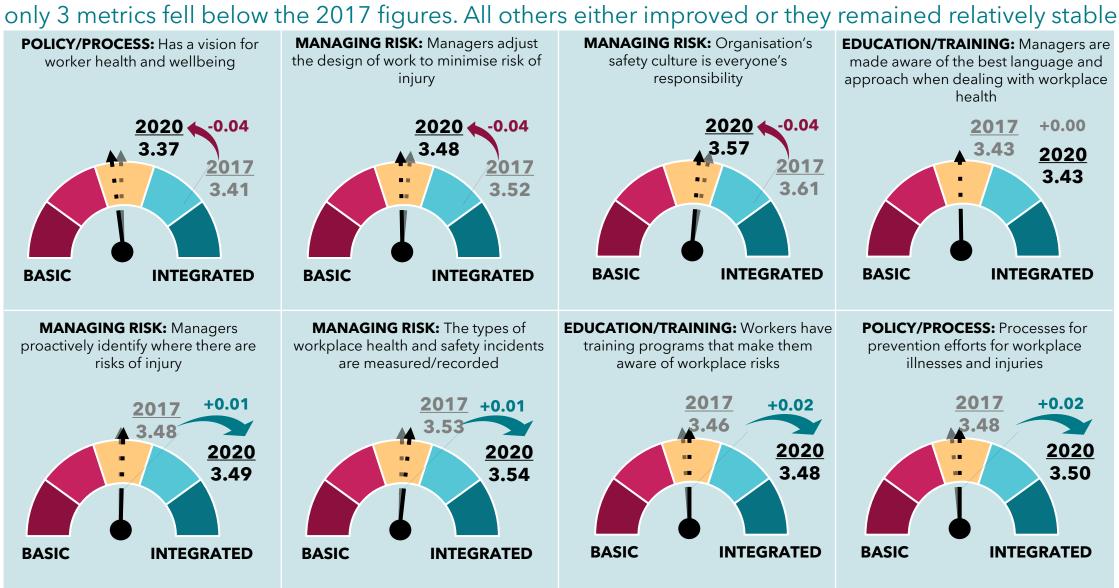
2020 employer metrics with the most positive increases

the bottom 8 performing metrics in 2017 all account for the most improved metrics in 2020



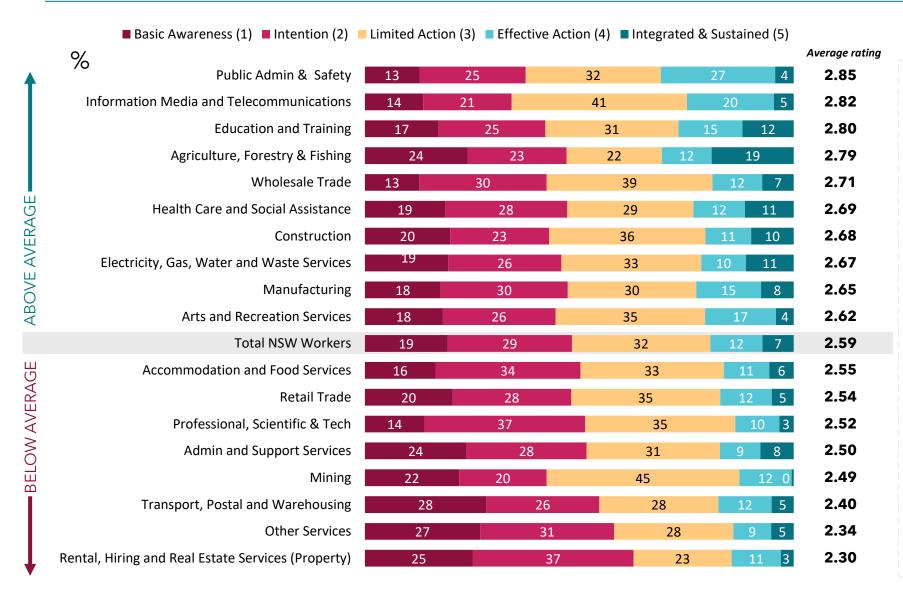


2020 employer metrics with the least movement





2020 worker segments: industry



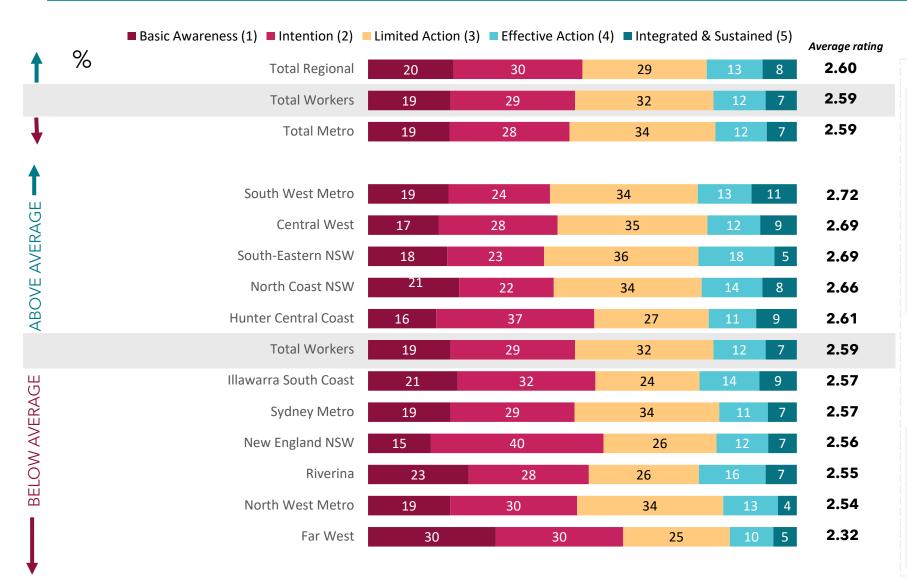
Little/no focus on mental health Some focus on mental health Some focus on mental health Only focuses on mental health when an incident occurs Targeted and proactive on mental health	What the ratings tells us:				
Limited Action Limited Action Limited Action Limited Action Fffective Action	on mental				
Limited Action health when an incident occurs Targeted and proactive	n mental				
Fttective Action ~					
on mental health					
Integrated & Sustained Mental health policy that is embedded across the business with tailored and continuous improvements	across the tailored us				

Rating scales: there is a calibration of the worker survey scale to 'match' the employer survey scale to make comparisons. This normalisation of the scaling of the two overall scores occurs according

to:	Employer Score	Worker Score
Basic Awareness	<84	<22
Intention	85-126	23-36
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2020 worker segments: Sydney metro vs regional NSW



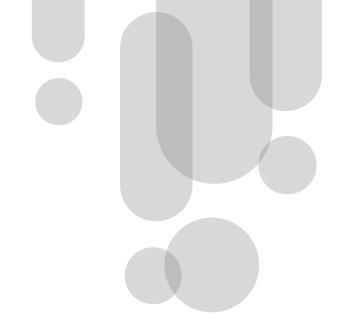
What the ratings tells us:				
Basic Awareness	Little/no focus on mental health			
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Limited Action	Only focuses on mental health when an incident occurs			
Effective Action	Targeted and proactive on mental health			
Integrated & Sustained	Mental health policy that is embedded across the business with tailored and continuous improvements			

Rating scales: there is a calibration of the worker survey scale to 'match' the employer survey scale to make comparisons. This normalisation of the scaling of the two overall scores occurs according to:

to:	Employer Score	Worker Score
Basic Awareness	<84	<22
Intention	85-126	23-36
Limited Action	127-168	37-59
Effective Action	169-200	60-69
Integrated & Sustained	>200	70



3 mentally healthy performance ratings



3a management ratings



policy and process responses to mental health

ratings of NSW employers (senior management / HR roles)

1								Mean sco	res
4	■ Don't know ■ Basic Awareness (1) ■ Intention (2) Limite	ed Action (3) E f	fective Acti	on (4) Integrated	& Sustained (5)	2020	2017	SHIFT
	Processes for prevention efforts for workplace illnesses and injuries	3 10	12	19	33	23	3.50	3.48	0.02
	A workplace health and safety or wellbeing strategy	4 10	11	19	34	22	3.49	3.38	0.11
	Workplace illness and injury prevention activities informed by organisational data	5 10	12	19	31	23	3.49	3.34	0.15
	A health and safety and worker wellbeing policy	4 11	11	18	32	23	3.48	3.41	0.07
	A workplace health and safety strategy that is monitored	6 10	11	19	33	20	3.47	3.37	0.10
	Key performance indicators for workplace health and safety	6 10	13	18	33	20	3.42	3.32	0.10
	Has a vision for worker health and wellbeing	4 11	13	20	33	19	3.37	3.41	0.04



culture and risk management for mental health

ratings of NSW employers (senior management / HR roles)

					Mean s	cores	
■ Don't know ■ Basic Awareness (1) ■ Intention (2) Limit	ted Action (3)	■ Effective A	ction (4) Integrated	& Sustained (5)	2020	2017	SHIFT
Consults workers about health and safety	4 8 10	19	33	27	3.63	3.49	0.14
Organisation's safety culture is everyone's responsibility	4 9 10	17	37	23	3.57	3.61	0.04
Report the safety consultation results to management	5 8 10	21	31	24	3.57	3.49	0.08
Report the safety consultation results to workers	6 8 10	21	33	22	3.56	3.44	0.12
Managers that cooperate with workers to identify risks to inform workplace health and safety strategies	4 9 10	20	32	24	3.55	3.53	0.02
Managers support and commit to worker safety and wellbeing	4 9 11	18	33	25	3.54	3.51	0.03
The types of workplace health and safety incidents are measured/recorded	5 9 12	19	31	25	3.54	3.53	0.01
Consults workers to identify workplace risks/hazards (using informal meetings, surveys etc)	4 9 10	19	34	23	3.54	3.49	0.05
Tailored workplace health and safety promotions that relate to risks present in your workplace	6 8 10	22	32	22	3.53	3.31	0.22
Designs work to improve safety and wellness outcomes	4 8 12	20	34	22	3.53	3.41	0.12
Undertake activities and communications that promote worker health and safety	5 8 12	21	29	24	3.51	3.43	0.08
Managers proactively identify where there are risks of injury	4 10 11	19	33	23	3.49	3.48	0.01
Managers adjust the design of work to minimise risk of injury	4 12 10	19	33	23	3.48	3.52	0.04

C1. [single response per row] Next, how do you rate the way your organisation manages risk in the workplace to ensure mental health? **Base:** NSW employers (senior management / HR roles); 2020 n=4,002 NB: mean results are calculated excluding don't know results



raising awareness and educating about mental health

ratings of NSW employers (senior management / HR roles)

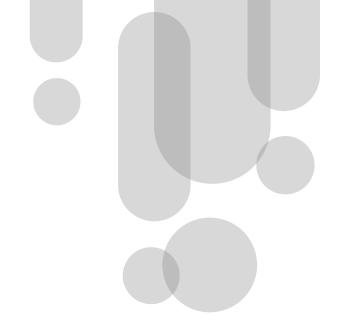
						Mear	n scores	
■ Don't know ■ Basic Awareness (1) ■ Intention (2) Limited Action	n (3)	Effective A	ction (4)	■ Integrated & S	fustained (5)	2020	2017	SHIFT
Workers have compulsory induction training	7 1	0 11	18	30	24	3.51	3.39	0.12
Workers have training programs that make them aware of workplace risks	7 9	13	17	32	22	3.48	3.46	0.02
Managers and workers put their training into practice	6 9	12	20	31	22	3.48	3.39	0.09
Managers are trained in designing safe workplaces (e.g. designing roles to minimise exposure to psychosocial risks etc)		0 12	18	31	21	3.46	3.38	0.08
Managers are trained in how to prevent and manage stigma around workers health	7 1	0 12	18	33	20	3.46	3.30	0.16
There is training that builds leaders' capability to prevent and manage the health of workers	8	9 12	20	30	21	3.45	3.35	0.10
Workers have training programs that build capability to prevent and manage injuries at work	7 9	13	19	32	20	3.45	3.42	0.03
Managers are made aware of the best language and approach when dealing with workplace health	7 1	1 11	19	33	19	3.43	3.43	0.00
Workers are trained in providing support for their fellow workers regarding workplace health and safety		0 11	21	32	19	3.43	3.24	0.19
Workers have training programs on stigma reduction around ill health	9	9 13	21	30	19	3.40	3.22	0.18



support services for mental health

ratings of NSW employers (senior management / HR roles)

Mean scores 2020 2017 **SHIFT** ■ Don't know ■ Basic Awareness (1) ■ Intention (2) Limited Action (3) ■ Effective Action (4) ■ Integrated & Sustained (5) 3.49 3.40 0.09 33 21 Workers have access to internal or external support Organisation evaluates the quality of the support services and improves 3.46 3.17 0.29 8 11 31 19 Workers have access to workplace health and safety support services with 3.46 3.34 0.12 9 9 12 20 30 clinically trained professionals 3.30 Resources allocated to prevent incidents and manage safety 32 21 3.46 0.16 Managers promote use of support services 3.46 3.38 0.08 29 21 Information is provided about outsourced support services when 31 21 3.45 3.36 0.09 requested Organisation links use of support services to its workplace health and 8 12 29 20 20 3.45 3.15 0.30 safety KPIs Organisation monitors the use of support services 18 32 19 3.44 3.17 0.27 Workers have access to self-service health tools 19 31 20 3.44 3.26 0.18 Organisation monitors whether workers use internal or external workplace 19 32 19 3.42 3.16 0.26 health and safety support services Managers make it normal for workers to use support services 20 20 3.42 3.39 0.03 3.41 3.18 0.23 10 22 19 Workers have access to peer support programs

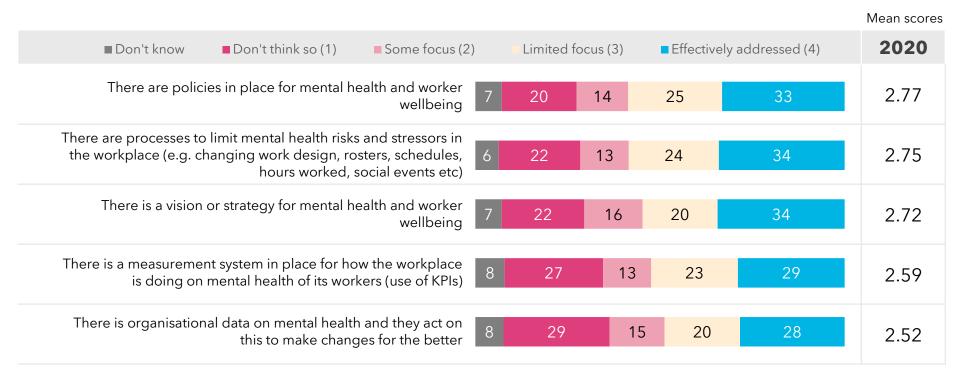


3b supervisor ratings



policy and process responses to mental health







culture and risk management for mental health



er revisaper visers					Mean scores
■ Don't know ■ Don't think so (1) ■ Some focus (2) Limited	focus (3)	■ Effective	ly address	sed (4)	2020
Has managers in place that are easy to talk to and approachable about mental health and worker wellbeing		15	24	37	2.86
Has a positive mental health culture that is seen as everyone's responsibility	5 19	14	24	38	2.84
Consults with workers to identify workplace pressures and risks (i.e. using informal meetings, surveys, etc)		14	25	35	2.78
Promotes mental health and worker wellbeing at work (for example workers are made aware of issues like bullying and harassment, team work is encouraged to reduce stress, conflict resolution is taught etc)	7 21	13	25	34	2.78
Has managers that think about the workloads, tasks, and responsibilities of workers to minimise mental health risks		17	21	35	2.77
Consults workers about mental health and worker wellbeing	6 22	15	25	33	2.73
Has leaders that proactively identify where there are mental health risks	6 23	3 15	22	34	2.72
Undertakes activities and communications that promote mental health and wellbeing (i.e. encouraging us to take walks during lunchtime, meditation sessions etc)		3 16	21	34	2.69



raising awareness and educating about mental health





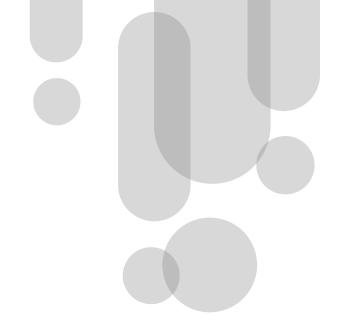


Yes scores

support services for mental health



Organisation gives me access to support services outside of this organisation for	2020 47.6%
	47.6%
mental health and worker wellbeing that the organisation has made known to us	171070
The organisation has managers who promote the use of support services for mental health	47.5%
The organisation evaluates and improves the quality of support services it provides 15 38 47	47.1%
Organisation gives me access to internally available support services, that are not only trained in mental health, but I have been told I can access for this reason (e.g. First aiders, OHS officers, union reps etc)	45.6%
Organisation gives me access to internally available support services for mental health and worker wellbeing that the organisation has made known to us	44.2%
Organisation gives me access to peer support programs 12 44 44	43.6%



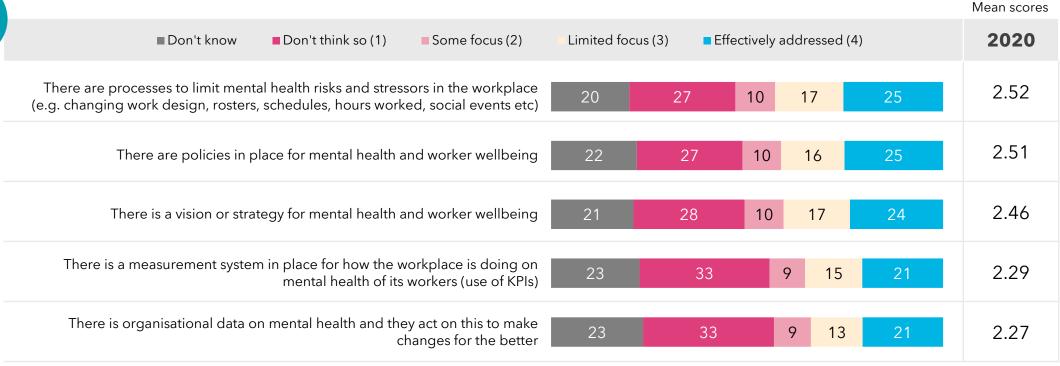
3c worker ratings



policy and process responses to mental health

ratings of NSW workers

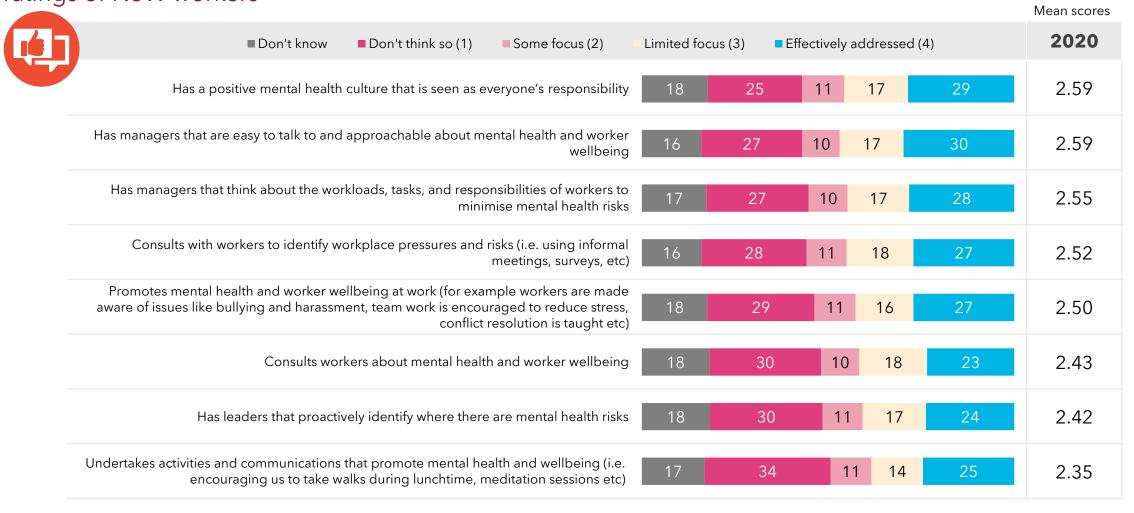






culture and risk management for mental health

ratings of NSW workers

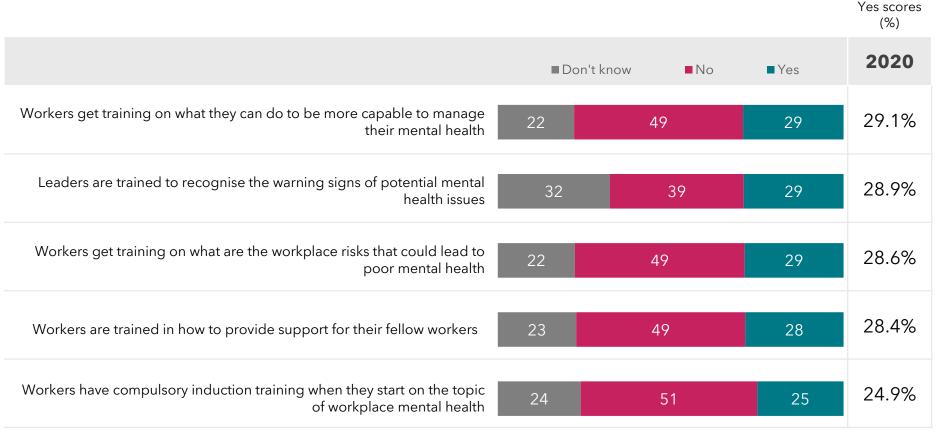




raising awareness and educating about mental health

ratings of NSW workers





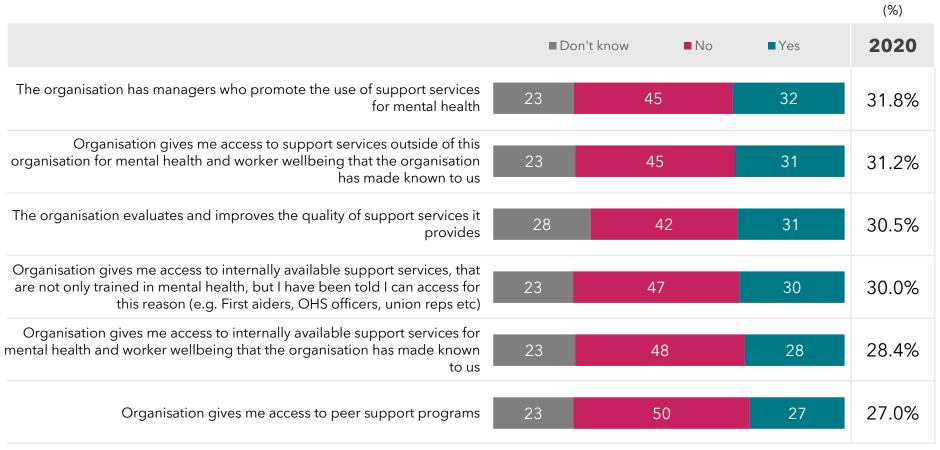


Yes scores

support services for mental health

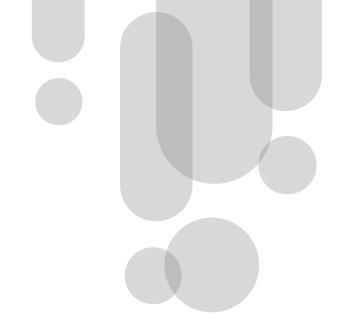
ratings of NSW workers







mental health experience



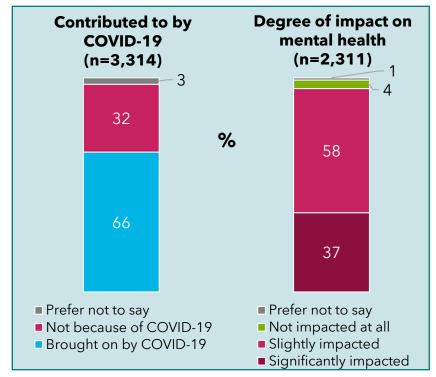
4a management ratings



worker mental health in the last 12 months

employers report a considerable proportion of their workforce felt mentally unwell in the last 12 months





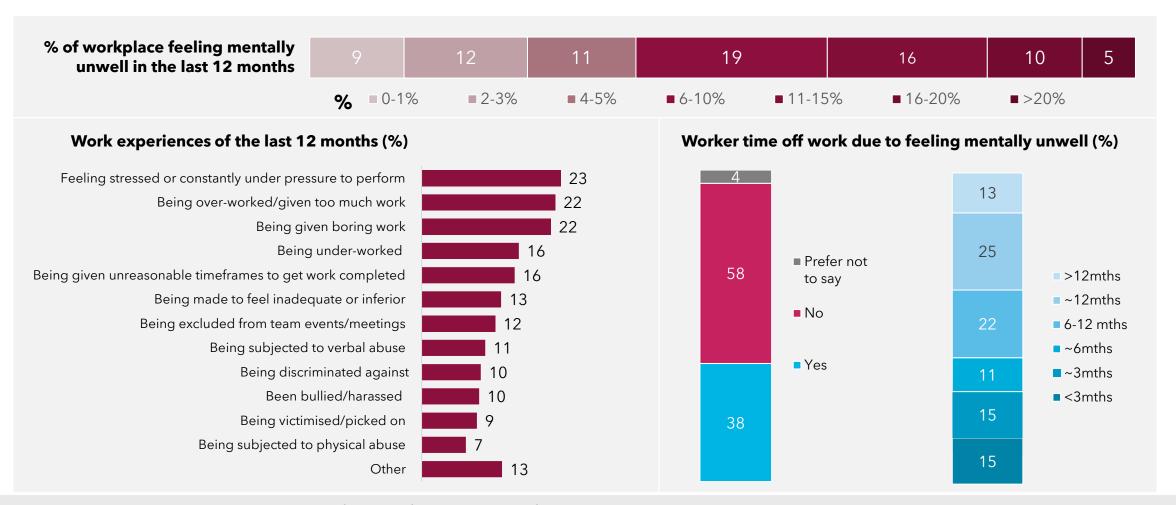
QF1. [single response] In the last 12 months, what percentage of your workforce have reported feeling mentally unwell due to the workplace? Base: NSW employers (senior management/HR roles) n=4,002 **QF1a.** [single response] Was this brought on by the COVID-19 experience? Base: NSW employers (senior management/HR roles) stating % workforce mentally unwell in the last 12 months n=3,314 **QF1b.** [single response] To what degree has COVID-19 impacted workers' mental health and wellbeing? Base: NSW employers (senior management/HR roles) stating worker mental health impacted by COVID-19 n=2,311

QF2. [single response] In the last 12 months, has your workplace had a positive impact on workers mental health? Base: NSW employers (senior management/HR roles) n=4,002



mental health experience of workers

38% of employers say some workers have taken time off due to feeling mentally unwell over the last 12 months



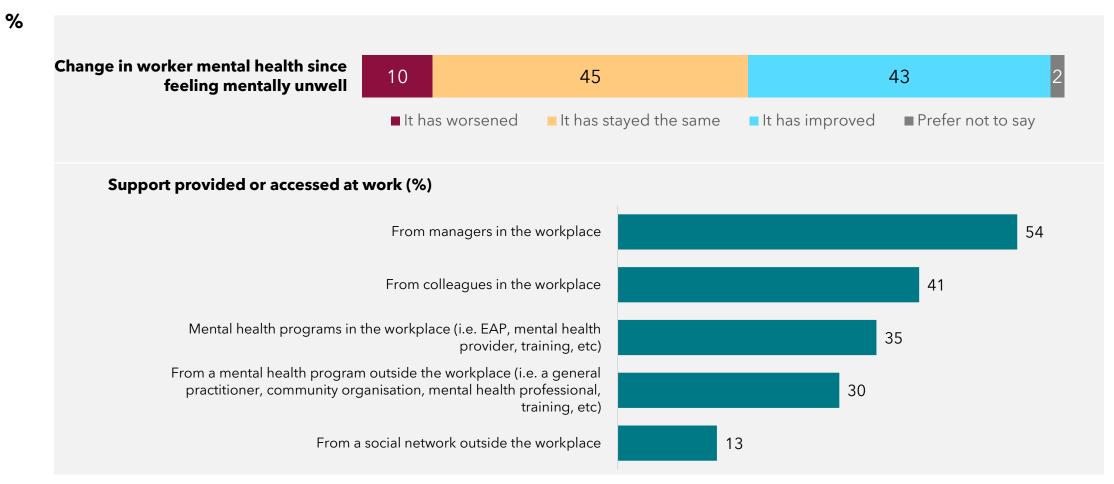
QF1. [single response] In the last 12 months, what percentage of your workforce have reported feeling mentally unwell due to the workplace? Base: NSW employers (senior management/HR roles) n=4,002 **QF4.** [multiple response] To the best of your knowledge, please indicate which of the following experiences, if any, your workers have experienced at work in the last 12 months? Base: NSW employers (senior management/HR roles) n=3,731

QF5a. [single response] Have workers had to take time off work due to feeling mentally unwell in the workplace? Base: NSW employers (senior management/HR roles) n=4,002 **QF5b.** [single response] How long ago was that? Base: NSW employers (senior management/HR roles) stating workers had time off work due to mental health n=2,085



support and improvements for those feeling unwell

employers indicate workers feeling mentally unwell have improved (43%), stayed the same (45%) and worsened in 10% of cases. Support came, in the main, from managers (54%) and colleagues (41%)



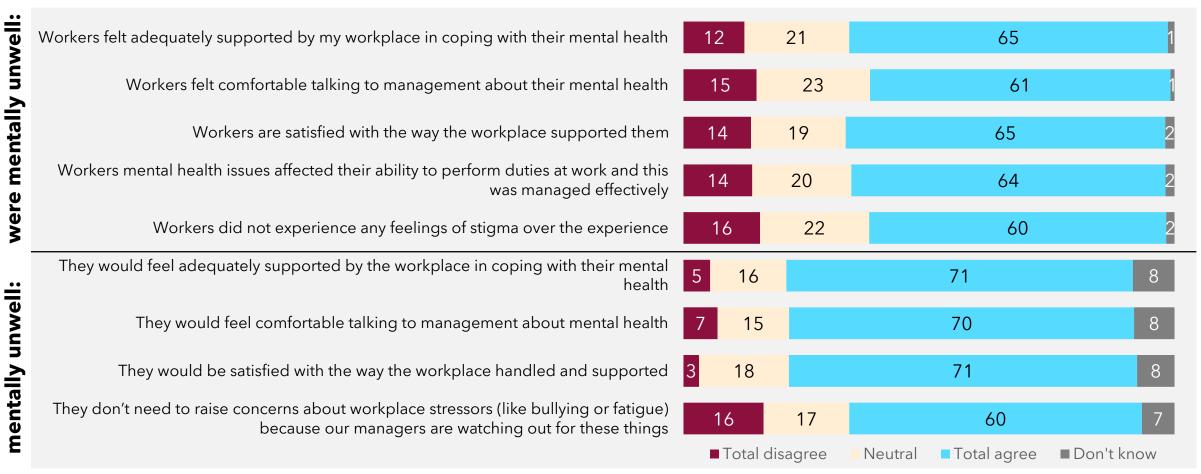
QF3. [single response] What change, if any, has there been in your workers mental health since they felt mentally unwell? Base: NSW employers (senior management/HR roles) stating % workforce mentally unwell in the last 12 months n=3,314 **QF3a.** [multiple response] What support, if any, has been provided or accessed by workers since they felt mentally unwell? Base: NSW employers (senior management/HR roles) stating workforce mental health improved OR workplace has a positive impact on mental health n=2,778

workplace response for those feeling unwell

For workers who

IF workers felt

employers rate their theoretical response to workers feeling mentally unwell more positively than when it actually occurs



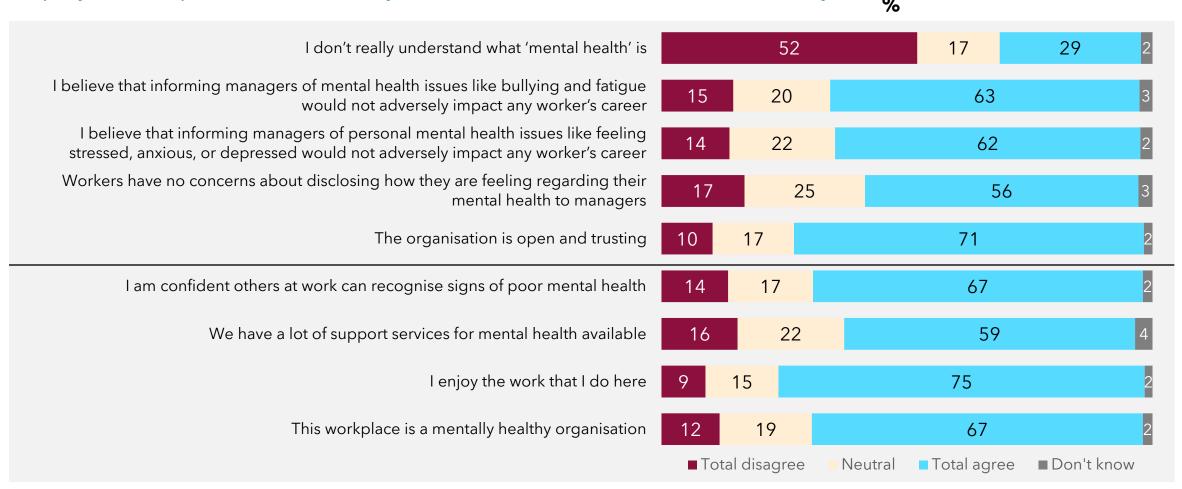
QF6a. [single response per row] Thinking about workers who are feeling mentally unwell, rate your organisation on the following statements on the scale below. Base: management stating % workforce mentally unwell in the last 12 months n=3,314

QF6b. [single response per row] Imagine a worker had a mental health issue at your workplace. How would you rate the following statements based on your opinion about the way your workplace would act? Base: management stating none of their workforce mentally unwell in the last 12 months n=688



attitudes to mental health and wellbeing

employers are split on whether they understand what mental health actually is



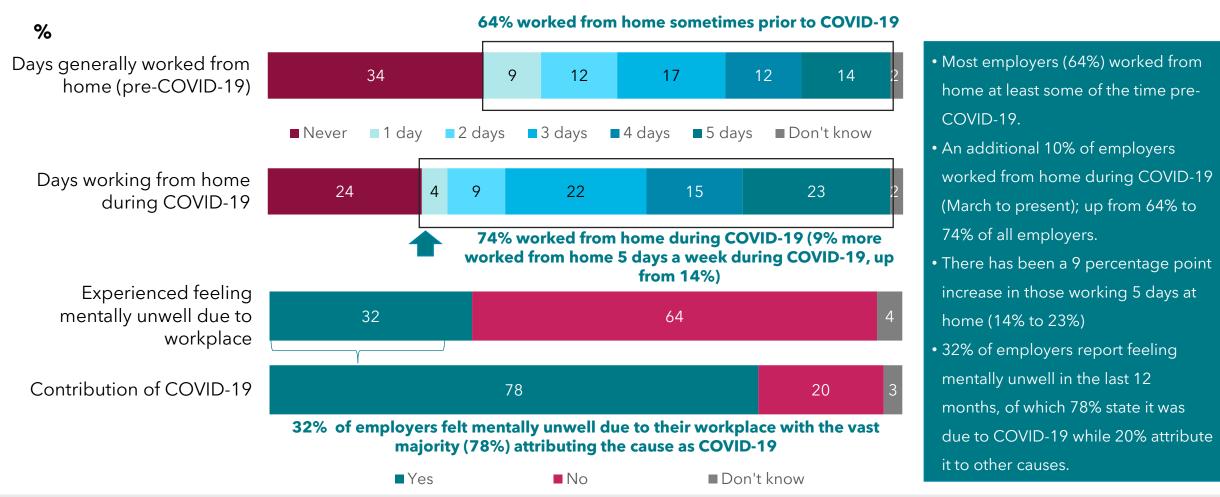
QF7. [single response per row] Please rate the following statements based on how much you agree or disagree, using the scale from 1 to 5 as displayed below.

QF8. [single response per row] Thinking about your workplace culture. Please rate the following statements based on how much you agree or disagree, using the scale from 1 to 5 as displayed below. Base: total management n=4,002



how many more employers worked from home during COVID-19?

An additional 10% of employers reported working from home during COVID-19 and those that worked from home increased the number of days worked at home



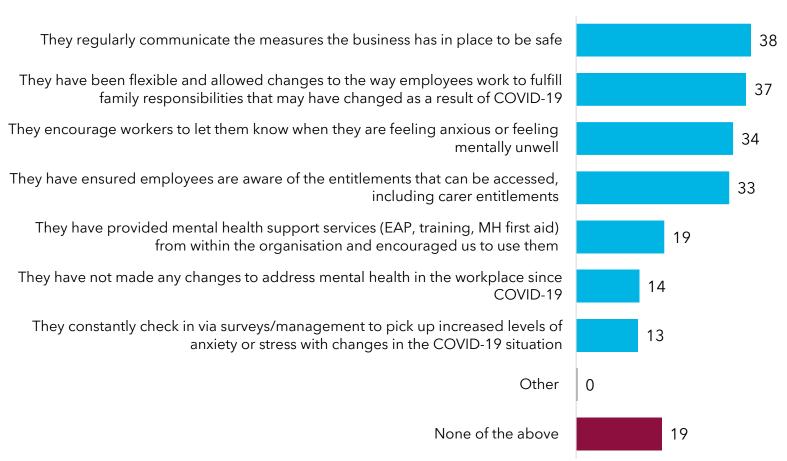
- QG1. During the COVID-19 period (March to now); about how many days a week, if any, have you generally worked from home? [S/R] Base: NSW employers (senior management/HR roles) n=4,002
- **QG2.** Irrespective of COVID-19, about how many days a week, if any, did you generally work from home? [S/R] Base: NSW employers (senior management/HR roles) n=4,002 **QG3.** In the last 12 months, have you experienced feeling mentally unwell due to your workplace? [S/R] Base: NSW employers (senior management/HR roles) n=4,002



workplace support for mental health during COVID-19

Of the 24% of employers who never worked from home during the COVID-19 period:



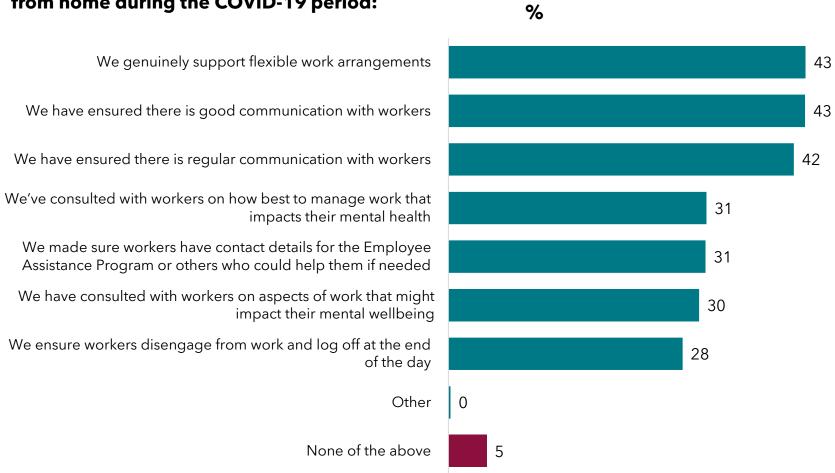


- 14% of employers report their workplace made no changes to address mental health during the COVID-19 period and another 19% said none of the suggested measures in the survey were implemented.
- Like workers, employers state that regular communication on COVID-Safe plans was the most common change (by 38%), followed by greater flexibility for family responsibilities and the encouragement to notify the business when feeling anxious or unwell (37%).

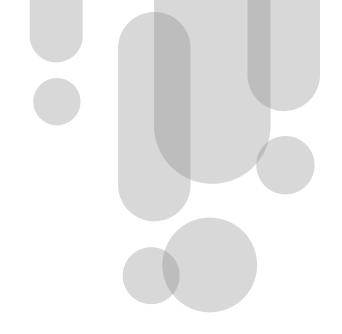


working from home support for mental health during COVID-19

Of the **74%** of employers who did work from home during the COVID-19 period:



- 43% of those employers who worked from home indicate their workplace genuinely supports flexibility and good communication with workers, followed by 42% ensuring there is regular communication.
- Only 3% of workplaces consulted with workers on aspects of work that might impact their mental wellbeing and only 28% of workplaces are ensuring workers disengage at the end of the day when working at home.

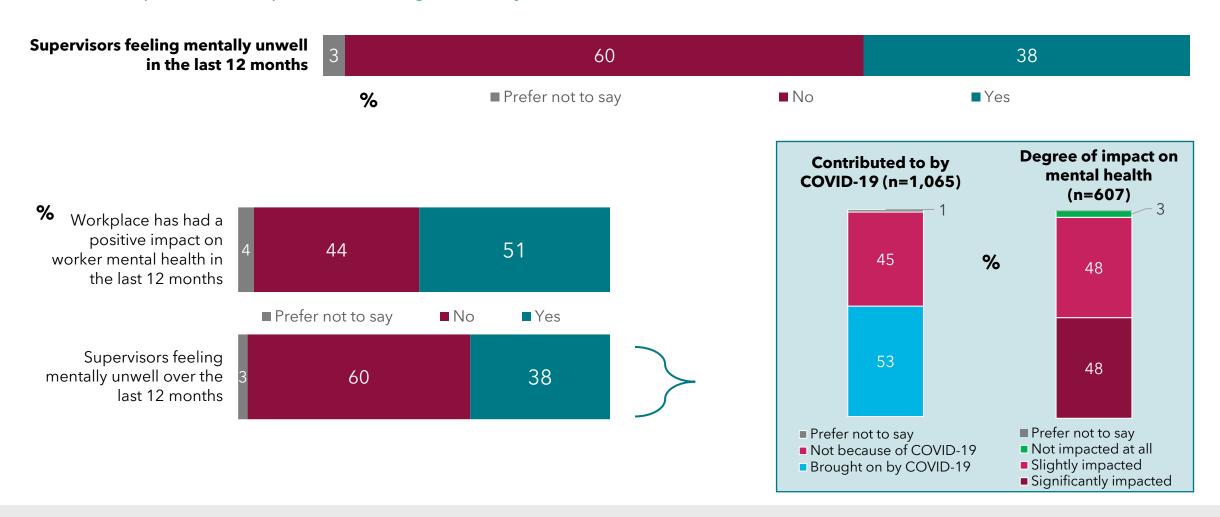


4b supervisor ratings



supervisor mental health in the last 12 months

38% of supervisors reported feeling mentally unwell in the last 12 months



QF1. [single response] In the last 12 months, have you experienced feeling mentally unwell due to your workplace? Base: NSW supervisors n=2,737

QF1a. [single response] Was this brought on by the COVID-19 experience? Base: NSW supervisors who responded mentally unwell in the last 12 months n=1,065

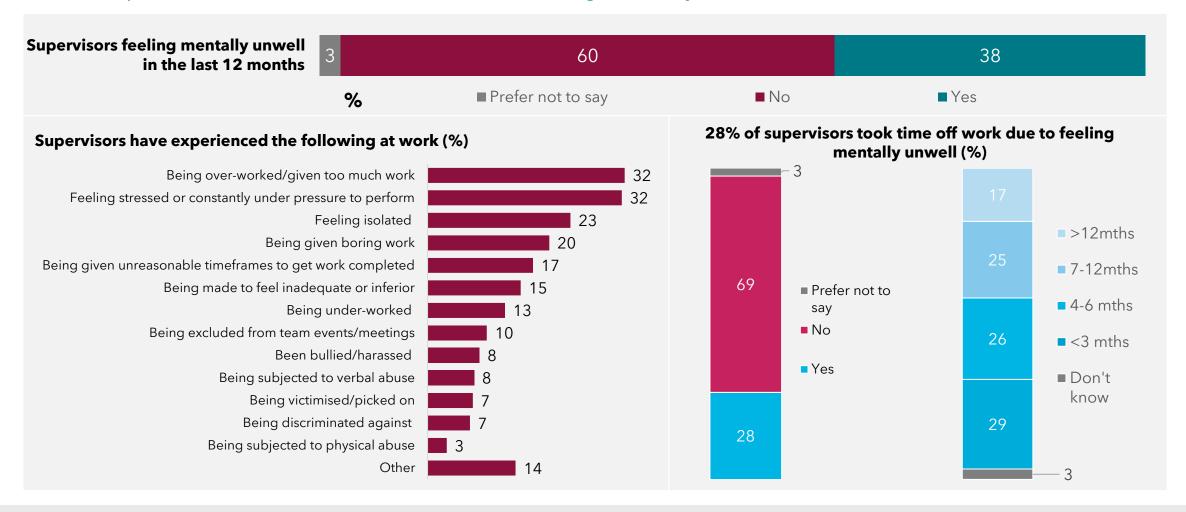
QF1b. [single response] To what degree has COVID-19 impacted your mental health and wellbeing? Base: NSW supervisors who stated mental health impacted by COVID-19 n=607

QF2. [single response] In the last 12 months, has your workplace had a positive impact on your mental health? Base: NSW supervisors n=2,737



mental health experience of supervisors

28% of supervisors have taken time off due to feeling mentally unwell over last 12 months



QF4. [multiple response] Please indicate which of these experiences, if any, you have experienced at work in the last 12 months. Base: NSW supervisors n=2,737

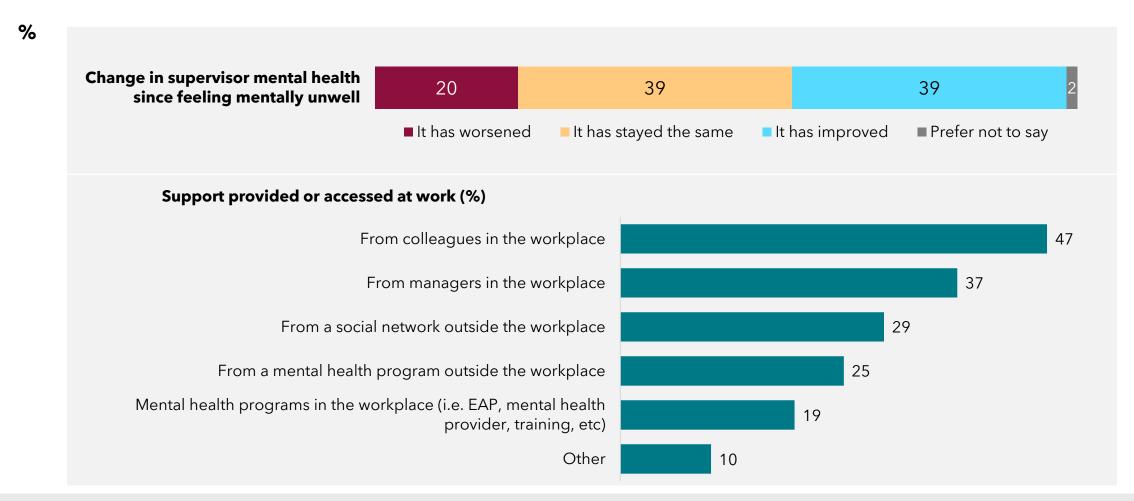
QF5a. [single response] Have you ever taken time off work due to feeling mentally unwell in your current workplace? Base: NSW supervisors n=2,737

QF5b. [single response] How long ago was that? Base: NSW supervisors stating they had time off work due to mental health n=796



support and improvements for those feeling unwell

supervisors indicate their mental health has improved (39%), stayed the same (39%) and worsened in 20% of cases. Support came in the main from colleagues (47%) and then their managers (37%)



QF3. [single response] What change, if any, has there been in your mental health since you felt unwell? Base: NSW supervisors stating mentally unwell in the last 12 months n=1,065 **QF3a.** [multiple response] What support, if any, has been provided or accessed since you felt mentally unwell? Base: NSW supervisors stating workforce mental health improved OR workplace has a positive impact on mental health n=1,548

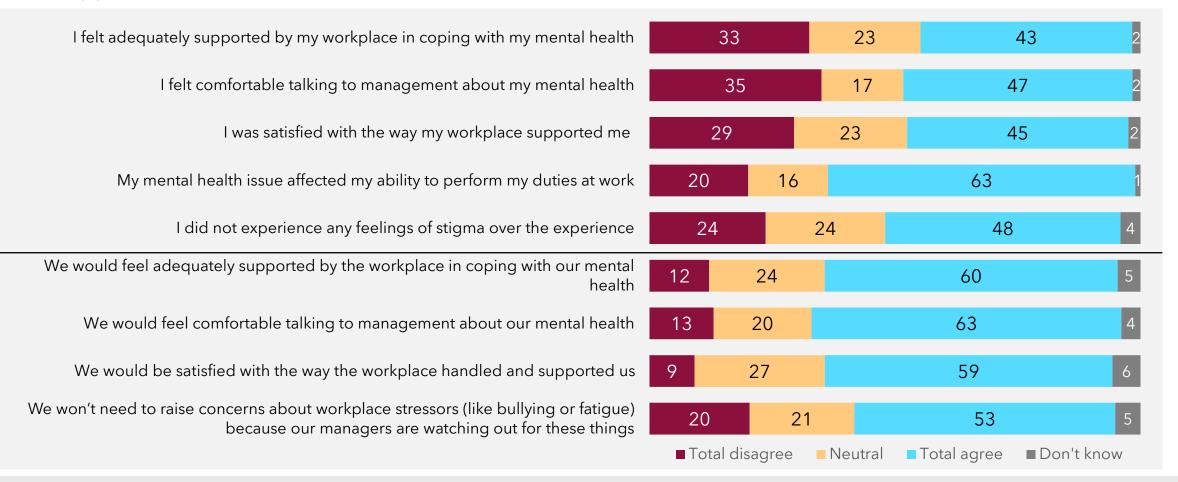
For supervisors who felt mentally unwell:

f supervisors felt mentally unwell:

workplace response for those feeling unwell



supervisors rate the theoretical response of their workplace to their mental health more positively than what happened when it occurred



QF6a. [single response per row] Thinking about your experience of feeling mentally unwell, rate the following statements on the scale below. Base: NSW supervisors stating mentally unwell in the last 12 months n=1,065

QF6b. [single response per row] Imagine you or a work colleague had a mental health issue at your current workplace. How would you rate the following statements based on your opinion about the way your workplace would act? Base: NSW supervisors stating they weren't mentally unwell in the last 12 months n=1,605



attitudes to mental health and wellbeing

supervisors are also split to some degree on whether they understand what mental health is



QF7. [single response per row] Please rate the following statements based on how much you agree or disagree, using the scale from 1 to 5 as displayed below.

Base: NSW supervisors n=2,737

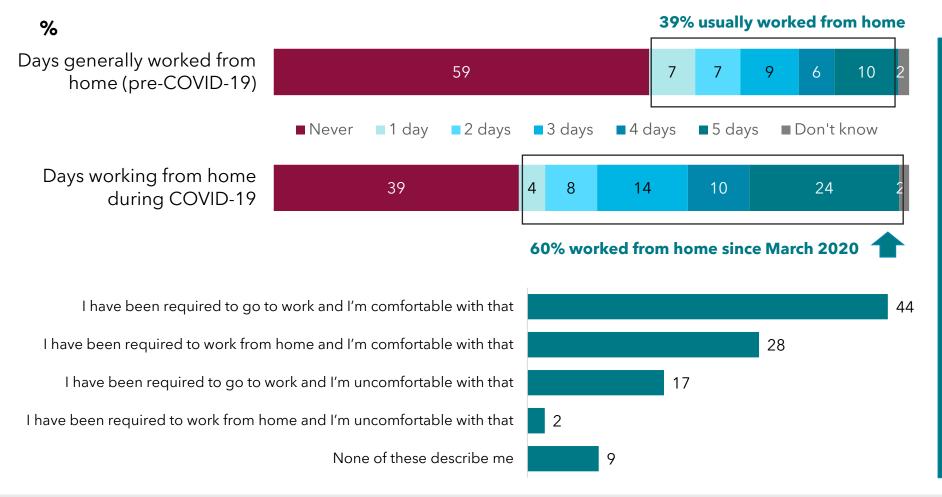
QF8. [single response per row] Thinking about your workplace culture. Please rate the following statements based on how much you agree or disagree, using the scale from 1 to 5 as displayed below. Base: NSW supervisors n=2,737

54



how many more supervisors worked from home during COVID-19?

An additional 21% of supervisors worked from home during COVID-19 and more supervisors worked more days at home



- 39% of supervisors worked from home at least some of the time pre-COVID-19.
- An additional 21% of supervisors indicate they have worked from home at least 1 day a week since March; up from 39% to 60% of all supervisors.
- There has been a 14 percentage point increase in those working 5 days a week at home (10% to 24%).
- 44% of supervisors were required to go to work since March and they are comfortable with it while 17% are uncomfortable with it.

QG1. During the COVID-19 period (March to now); about how many days a week, if any, have you generally worked from home? [S/R] Base: NSW supervisors n=2,737

QG2. Irrespective of COVID-19, about how many days a week, if any, did you generally work from home? [S/R] Base: NSW supervisors n=2,737

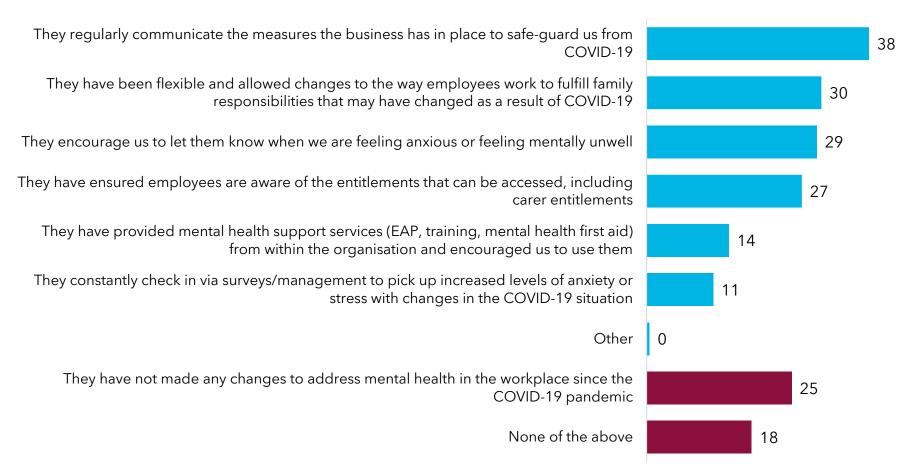
QG3. Which of the following best describes the way you have had to work during COVID-19? [S/R] Base: NSW supervisors n=2,737



workplace support for mental health during COVID-19

Of the **39**% of supervisors who never worked from home during the COVID-19 period:

%

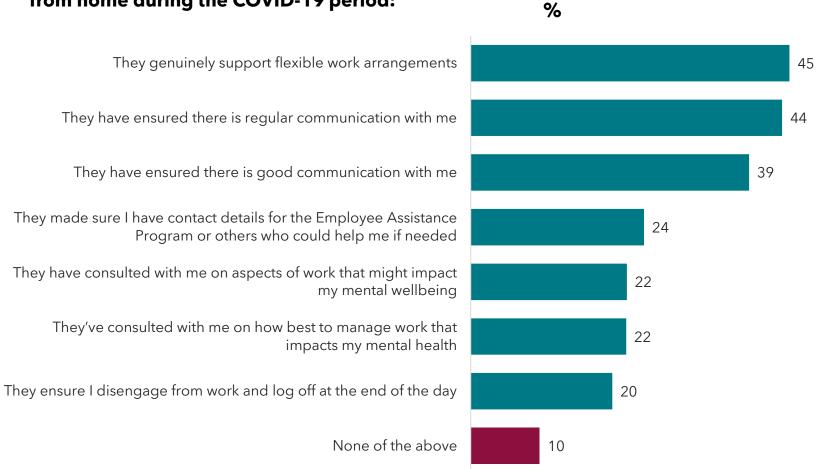


- 25% of supervisors report their workplace made no changes to address mental health during the COVID-19 period and another 18% said none of the suggested measures in the survey.
- Supervisors state that regular communication on COVID-Safe plans was the most common change (by 38%), followed by greater flexibility for family responsibilities and the encouragement to notify the business when feeling anxious or unwell (30%).

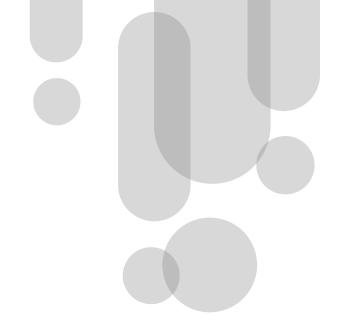


working from home support for mental health during COVID-19

Of the **60**% of supervisors who did work from home during the COVID-19 period:



- 45% of those supervisors who worked from home indicate their workplace genuinely supports flexibility, followed by 44% ensuring there is regular communication.
- Only 20% of workplaces are ensuring supervisors disengage at the end of the day when working at home and only 22% are consulting with supervisors on how to manage work that impacts mental health.

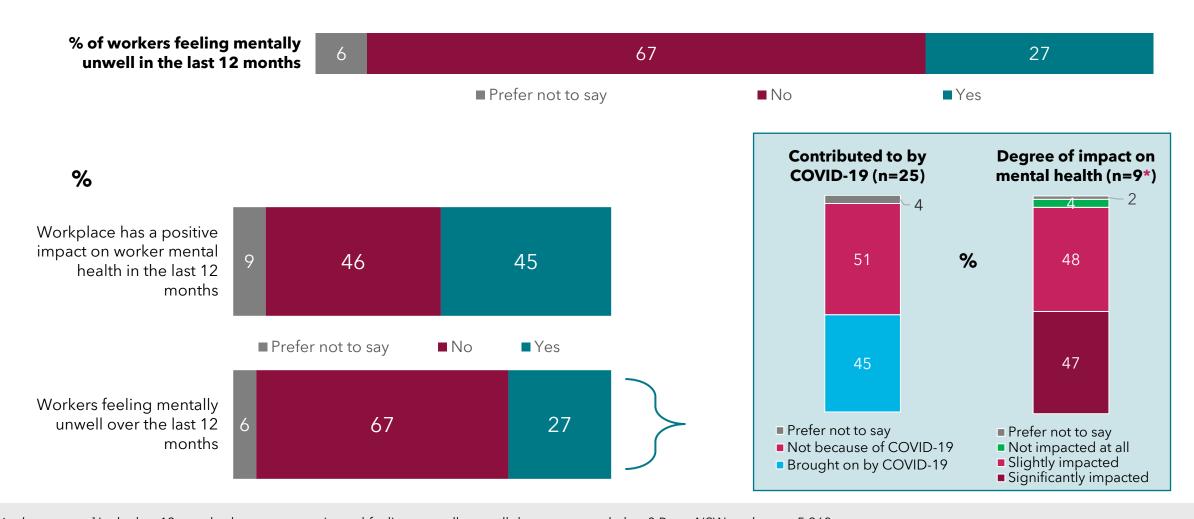


4c worker ratings



worker mental health in the last 12 months

27% of workers experienced feeling mentally unwell in the last 12 months



QF1. [single response] In the last 12 months, have you experienced feeling mentally unwell due to your workplace? Base: NSW workers n=5,268

QF1a. [single response] Was this brought on by the COVID-19 experience? Base: NSW workers who responded mentally unwell in the last 12 months n=1,696

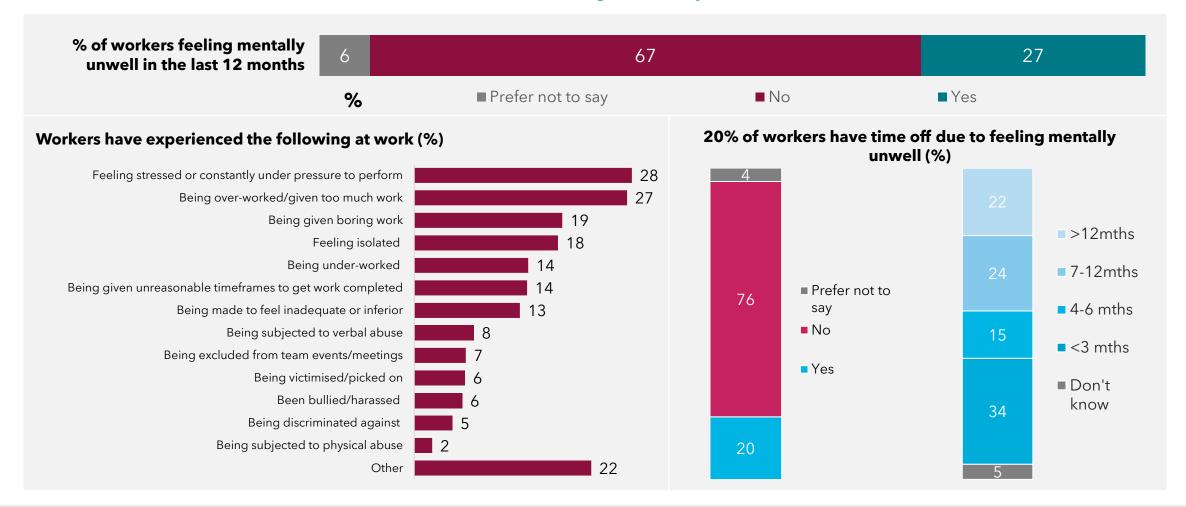
QF1b. [single response] To what degree has COVID-19 impacted your mental health and wellbeing? Base: NSW workers who stated mental health impacted by COVID-19 n=731

QF2. [single response] In the last 12 months, has your workplace had a positive impact on your mental health? Base: NSW workers n=5,268



mental health experience of workers

20% of workers have taken time off because of feeling mentally unwell in the last 12 months



QF4. [multiple response] Please indicate which of these experiences, if any, you have experienced at work in the last 12 months. Base: NSW workers n=5,267

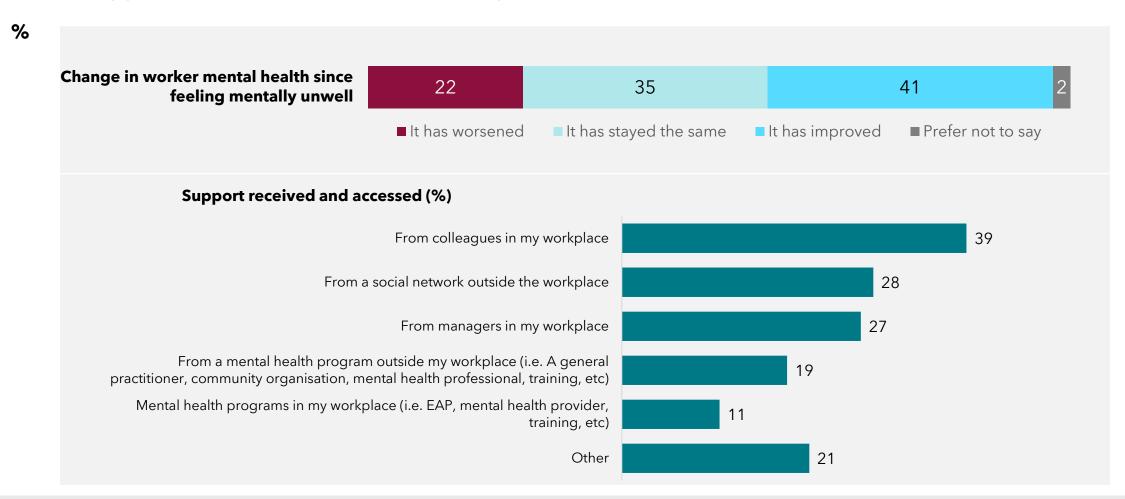
QF5a. [single response] Have you ever taken time off work due to feeling mentally unwell in your current workplace? Base: NSW workers n=5,268

QF5b. [single response] How long ago was that? Base: NSW workers stating they had time off work due to mental health n=1,281



support and improvements for those feeling unwell

workers indicate their mental health has improved (41%), stayed the same (35%) and worsened in 22% of cases. Support came in the main from colleagues (39%) and then from social networks outside work (28%)



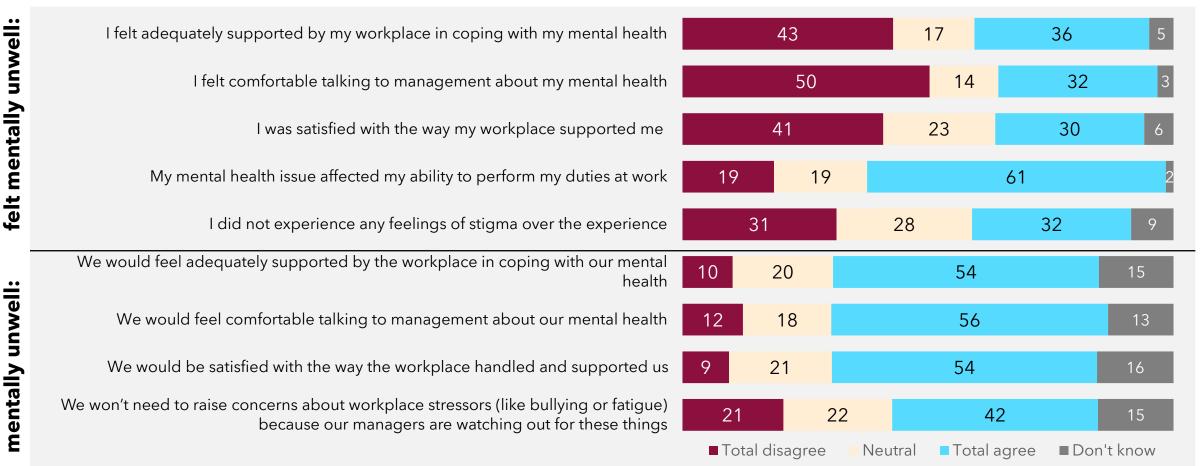
QF3. [single response] What change, if any, has there been in your mental health since you felt unwell? Base: NSW workers stating mentally unwell in the last 12 months n=1,696 **QF3a.** [multiple response] What support, if any, has been provided or accessed since you felt mentally unwell? Base: NSW workers stating workforce mental health improved OR workplace has a positive impact on mental health n=2,649

workplace response for those feeling unwell

For workers who

If workers felt mentally unwell:

workers rate the theoretical response of their workplace to their mental health more positively than what happened when it occurred



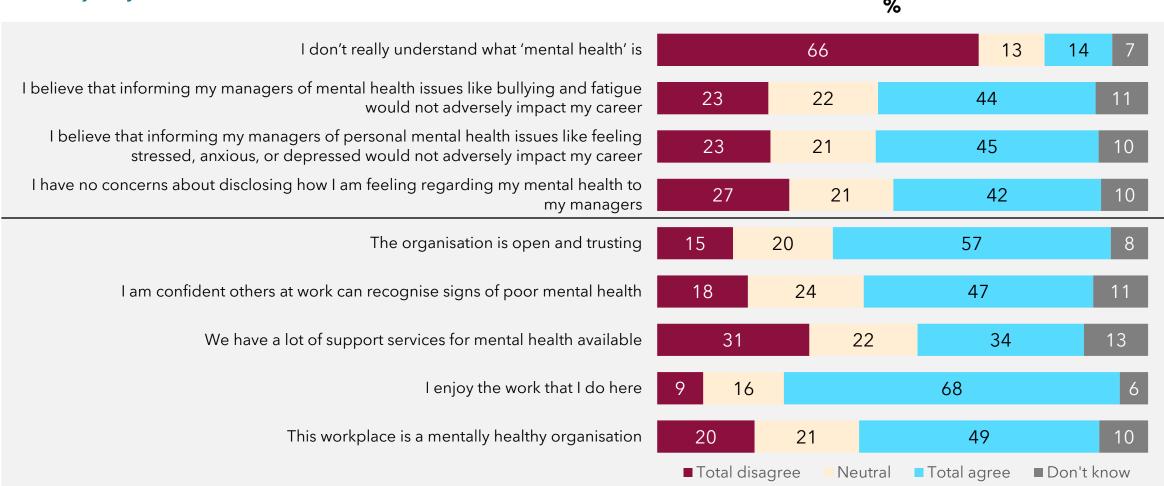
QF6a. [single response per row] Thinking about your experience of feeling mentally unwell, rate the following statements on the scale below. Base: NSW workers stating mentally unwell in the last 12 months n=1,696

QF6b. [single response per row] Imagine you or a work colleague had a mental health issue at your current workplace. How would you rate the following statements based on your opinion about the way your workplace would act? Base: NSW workers stating they weren't mentally unwell in the last 12 months n=3,301



attitudes to mental health and wellbeing

the majority of workers don't understand what mental health is



QF7. [single response per row] Please rate the following statements based on how much you agree or disagree, using the scale from 1 to 5 as displayed below.

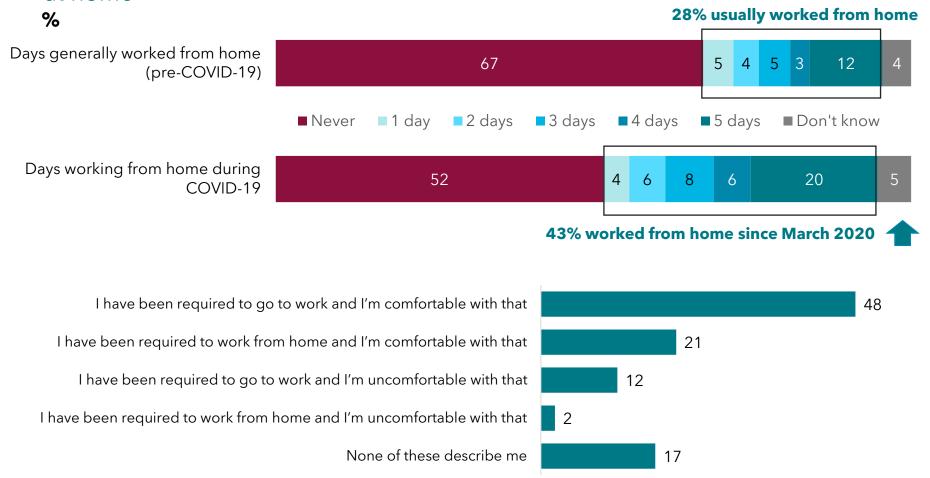
Base: NSW workers n=5,268

QF8. [single response per row] Thinking about your workplace culture. Please rate the following statements based on how much you agree or disagree, using the scale from 1 to 5 as displayed below. Base: NSW workers n=5.268

63



An additional 15% of workers reported working from home during COVID-19 and most worked more days at home



- 28% of workers worked from home at least some of the time pre-COVID-19.
- An additional 15% of workers indicate they have worked from home at least 1 day a week since March; up from 28% to 43% of all workers.
- Those working 5 days a week at home rose from 12% to 20%.
- 48% of workers have been required to go to work since March and they are comfortable with it while 12% are uncomfortable with being required.

QG1. During the COVID-19 period (March to now); about how many days a week, if any, have you generally worked from home? [S/R] Base: NSW workers n=5,268

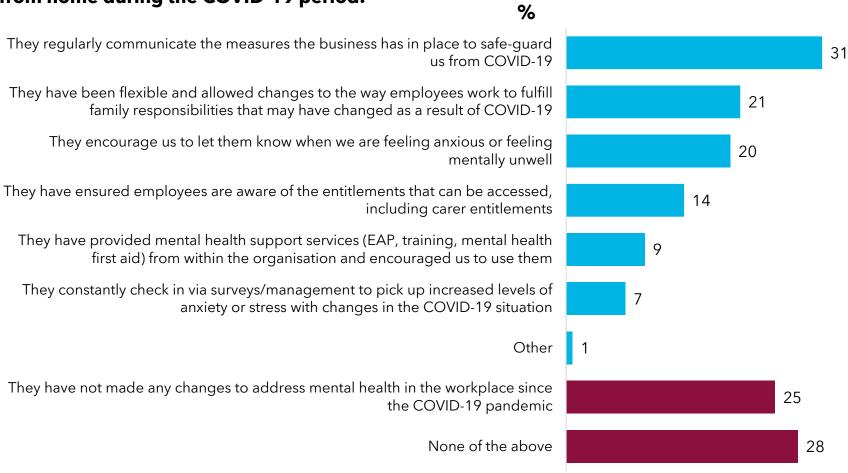
QG2. Irrespective of COVID-19, about how many days a week, if any, did you generally work from home? [S/R] Base: NSW workers n=5,268

QG3. Which of the following best describes the way you have had to work during COVID-19? [S/R] Base: NSW workers n=5,268



workplace support for mental health during COVID-19

Of the **52**% of workers who never worked from home during the COVID-19 period:

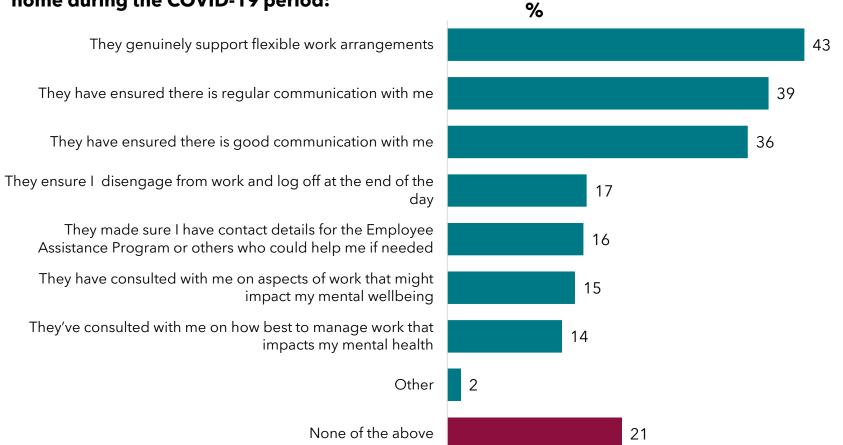


- 25% of workers report their workplace made no changes to address mental health during the COVID-19 period and another 28% said none of the suggested measures in the survey.
- Like supervisors, workers state that regular communication on COVID-Safe plans was the most common change (by 31%), followed by greater flexibility for family responsibilities and the encouragement to notify the business when feeling anxious or unwell (21%).



working from home support for mental health during COVID-19

Of the 43% of workers who did work from home during the COVID-19 period:



- 43% of those workers who worked from home indicate their workplace genuinely supports flexibility, followed by 39% ensuring there is regular communication.
- Only 14% of workplaces are consulting with workers on how to manage work that impacts mental health.



5 appendix

survey sample profile - employers unweighted

Location	n=	Business size	n=
Sydney Metro	2,306	Small	1,228
North West Metro	236	Less than 5	0
South West Metro	167	5 to 10	677
Hunter Central Coast	195	11 to 19	551
Illawarra South Coast	77	Medium	1,889
North Coast NSW	209	1110 01101111	-
South-Eastern NSW	448	20 to 49	525
New England NSW	200	50 to 99	723
Central West	91	100 to 199	641
Riverina	49	Large	885
Far West	24	200 or more	885

Туре	n=
A local government department/agency	596
A state government department/agency	583
A federal government department	208
A not-for-profit, religious, or community organisation	177
A private sector business	2,296
Other	86
Prefer not to say	56

Industry	n=
Agriculture, Forestry & Fishing	193
Mining	65
Manufacturing	348
Electricity, Gas, Water and Waste Services	101
Construction	227
Wholesale Trade	135
Retail Trade	400
Accommodation and Food services	118
Transport, Postal and Warehousing	121
Information Media and Telecommunications	465
Rental, Hiring and Real Estate Services (Property)	95
Professional, Scientific & Tech	418
Admin and Support Services	150
Public Admin & Safety	110
Education and Training	287
Health Care and Social Assistance	280
Arts and Recreation Services	104
Other services (Finance, insurance and other personal)	385

Tenure	n=
With the organisation	
<6 months	97
Between 6 and 12 months	388
1-3 years	965
4-5 years	941
More than 5 years	1,585
Prefer not to say	26
In their current role	
<6 months	237
Between 6 and 12 months	734
1-3 years	1,102
4-5 years	732
More than 5 years	1,150
Prefer not to say	47

survey sample profile - supervisors unweighted

Location	n=	Business size	n=
Sydney Metro	1636	Small	666
North West Metro	181	Less than 5	220
South West Metro	155	5 to 10	193
Hunter Central Coast	155	11 to 19	253
Illawarra South Coast	85	Medium	1322
North Coast NSW	125	20 to 49	395
South-Eastern NSW	162	20 to 49	373
New England NSW	73	50 to 99	429
Central West	99	100 to 199	498
Riverina	36	Large	749
Far West	30	200 or more	749

Туре	n=
A local government department/agency	180
A state government department/agency	292
A federal government department	136
A not-for-profit, religious, or community organisation	161
A private sector business	1,856
Other	53
Prefer not to say	59

The American	
Industry	n=
Agriculture, Forestry & fishing	40
Mining	32
Manufacturing	207
Electricity, Gas, Water and Waste Services	42
Construction	186
Wholesale Trade	86
Retail Trade	351
Accommodation and Food services	155
Transport, Postal and Warehousing	101
Information Media and Telecommunications	220
Rental, Hiring and Real Estate Services (Property)	52
Professional, Scientific & Tech	268
Admin and Support Services	92
Public Admin & Safety	81
Education and Training	212
Health Care and Social Assistance	235
Arts and Recreation Services	72
Other services (Finance, insurance and other personal)	305

Tenure	n=
With the organisation	
<6 months	78
Between 6 and 12 months	188
1-3 years	723
4-5 years	494
More than 5 years	1,234
Prefer not to say	20
In their current role	
<6 months	156
Between 6 and 12 months	415
1-3 years	896
4-5 years	414
More than 5 years	831
Prefer not to say	25

survey sample profile - workers unweighted

Location	n=	Business size	n=
Sydney Metro	2,815	Small	1,645
North West Metro	389	Less than 5	767
South West Metro	389	5 to 10	473
Hunter Central Coast	493	11 to 19	405
Illawarra South Coast	254	Medium	1,869
North Coast NSW	281	20+- 40	•
South-Eastern NSW	149	20 to 49	584
New England NSW	103	50 to 99	650
Central West	165	100 to 199	635
Riverina	129	Large	1,754
Far West	101	200 or more	1,754

Туре	n=
A local government department/agency	228
A state government department/agency	570
A federal government department	207
A not-for-profit, religious, or community organisation	452
A private sector business	3,375
Other	166
Prefer not to say	270

Industry	n=
Agriculture, Forestry & fishing	84
Mining	48
Manufacturing	237
Electricity, Gas, Water and Waste Services	83
Construction	249
Wholesale Trade	138
Retail Trade	624
Accommodation and Food services	239
Transport, Postal and Warehousing	261
Information Media and Telecommunications	254
Rental, Hiring and Real Estate Services (Property)	88
Professional, Scientific & Tech	381
Admin and Support Services	267
Public Admin & Safety	203
Education and Training	496
Health Care and Social Assistance	724
Arts and Recreation Services	141
Other services (Finance, insurance and other personal)	751

Tenure	n=
With the organisation	
<6 months	412
Between 6 and 12 months	445
1-3 years	1,539
4-5 years	672
More than 5 years	2,102
Prefer not to say	98
In their current role	
<6 months	508
Between 6 and 12 months	660
1-3 years	1,616
4-5 years	615
More than 5 years	1,742
Prefer not to say	127

data handling



Weighting of the data

The actual sample profile provides the unweighted responses. The results presented in the rest of the report is weighted to the population based on ABS data by ward area, age and gender.

Statistical significance - 5% at 95 per cent level of confidence

All tests for statistical significance have been undertaken at the 95 per cent level of confidence, and unless otherwise noted, any notation of a 'difference' between subgroups means that the difference discussed is significant at the 95 per cent level of confidence. When reporting significant differences in segments, (+x%; x%) represents the difference in % above total sample, and % of total sample respectively.

A red circle or green square around a value denotes that the result is significantly lower or greater (respectively) than that of the total sample for that question. E.g.



Treatment of means

Where responses are scale variables, for example 1 to 5 where 1 is disagree strongly and 5 is agree strongly, the mean is also calculated with the removal of don't know.

Rounding of figures - may result in anomalies of +/- 1%

All results have been rounded to the nearest whole percentage figure and anomalies of about +/- 1% may occur in charts i.e. total percentages for each bar add to 99%, or 100% or 101% due to rounding error.

Nett figures are also rounded - which may also result in anomalies

Nett results are also rounded after summing the separate proportions rather than simply summing two rounded figures (e.g. '% total agree'). For this reason, anomalies of about 1% sometimes occur between net results and rounded results shown in charts. For example, a proportion of 33.3% 'agree' rounds to 33%, and a proportion of 12.4% 'strongly agree' rounds to 12%. However, when combined to derive the total agree (i.e. agree plus strongly agree), 33.3% plus 12.4% equals 45.7%, which would be rounded to 46%. In this case, the results would be shown in a chart as 33% agree and 12% strongly agree, but the proportion reported as 'total agree' would be 46%.



data handling

Survey limitations

A limitation of the Mentally Healthy Workplaces in NSW Benchmarking Tool is that the survey relies on representatives' self-assessment of their workplace's performance and by association, their own performance as the highest-ranking decision maker in mental health and wellbeing (or WHS or HR).

Moreover, they completed the survey knowing it was being conducted on behalf of the workplace health and safety Regulator, SafeWork NSW. This may have resulted in a tendency to slightly overrate performance. To overcome this limitation the survey tried, wherever possible, to ask questions about observable behaviour rather than attitudes.

While this self-assessment survey may have produced a slight positive skew on the mental health performance ratings, this same tendency will continue to exist in subsequent evaluations of this Benchmarking Tool. Therefore, the results provide a solid benchmark for future comparison and evaluation.

Microbusinesses (1-4 employees) were excluded from the study as it was determined that workplaces of this size, particularly sole traders would require a significantly different survey and be unlikely to provide responses regarding workplace systems, policies and processes for mental health.





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Information on the latest laws can be checked by visiting the NSW legislation website www.legislation.nsw.gov.au

This publication does not represent a comprehensive statement of the law as it applies to particular problems or to individuals or as a substitute for legal advice. You should seek independent legal advice if you need assistance on the application of the law to your situation.

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