RETURNING TO A SHARED WORKSPACE:
A psychological toolkit for transitioning to a new normal
ABOUT THE CANADIAN MENTAL HEALTH ASSOCIATION, ONTARIO

The Canadian Mental Health Association (CMHA) operates at the local, provincial and national levels across Canada. The mission of CMHA Ontario, a not-for-profit, charitable organization, is to improve the lives of all Ontarians through leadership, collaboration, and the continual pursuit of excellence in community-based mental health and addictions services. Our vision is a society that embraces and invests in the mental health of all people. We are a trusted advisor to government and actively contribute to health systems development through policy formulation and recommendations that promote positive mental health for all Ontarians. Our 28 local CMHA branches, together with other community-based mental health and addictions service providers, serve approximately 500,000 Ontarians each year.

ABOUT MENTAL HEALTH WORKS

Mental Health Works is a social enterprise of CMHA Ontario. We are person centred, evidence based, and solutions focused. Our mission is to make mental health work for employers and employees from coast to coast, in both English and French. The recognition and willingness to address workplace mental health is greater than ever, but we acknowledge there is much more to be done. MHW is dedicated to advancing the field of workplace mental health through skills enhancement training, awareness education, and stigma reduction.

ABOUT BOUNCEBACK ONTARIO

BounceBack is a free skill-building program managed by CMHA. It is designed to help adults and youth 15+ manage low mood, mild-to-moderate depression and anxiety, stress and worry. Delivered over the phone with a coach and through online videos, participants get access to tools that support them on their path to mental wellness. BounceBack was first developed by Dr. Chris Williams, a medical doctor and psychiatrist, as well as a professor at the University of Glasgow. The program was first adopted by CMHA British Columbia in 2008 and piloted in Ontario in 2015. By October 2017, BounceBack was launched across the province as part of the Ontario government’s investment in structured psychotherapy services. Since then, over 8,000 primary care providers have referred over 35,000 clients to BounceBack.

ABOUT CENTRE FOR INNOVATION IN CAMPUS MENTAL HEALTH

The Centre for Innovation on Campus Mental Health (CICMH) is a partnership project involving Colleges Ontario, the Council of Ontario Universities, the Ontario Undergraduate Student Alliance, the College Student Alliance and the Canadian Mental Health Association, Ontario Division. CICMH’s mission is to engage and support Ontario’s colleges and universities in their commitment to student mental health and well-being. CICMH creates and disseminates evidence-based, implementation-ready tools and education to those who deliver front-line mental health services to post-secondary students. CICMH also provides an essential platform for everyone involved in supporting post-secondary student mental health and well-being to build relationships and work together.

DISCLAIMER

This document is a resource, intended to define key terms and provide recommendations. It is not meant to be prescriptive and may not be applicable to everyone. CMHA Ontario recognizes the information in this document may be subject to change and each organization has specific needs. As a result, policies and procedures may vary. This document is not intended to provide legal or clinical advice.
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A TOOLKIT TO HELP YOU TRANSITION BACK INTO A SHARED WORKSPACE: AN INTRODUCTION

Returning to a Shared Workspace: A psychological toolkit for transitioning to a new normal is a guide to support the mental health of individuals as they plan safe transitions back into their employer’s shared workspaces, and designed to help employers as they develop policies and procedures for supporting staff returning to a shared workspace.

This toolkit is part of an effort to support the mental health needs of Ontarians and promotes principles of positive mental health and well-being while encouraging the use of additional supports. Initially published in 2020, this guide has been updated to reflect the changing needs of Ontarians and has been reviewed and informed by diverse perspectives, including clinical leaders from the mental health and addictions community across Ontario.

This toolkit aims to serve employees and employers across a variety of sectors. Readers are encouraged to use this as a guide to understand how their mental health and the mental health of their colleagues has been affected by the pandemic and to explore strategies to support themselves and others as the transition to shared workspace occurs. While this document can support everyday practices and the development of policy, it is not intended to provide legal or clinical advice.

This toolkit aims to provide meaningful guidance on how to support mental health concerns with respect to the pandemic for a variety of organizations. The suggestions provided are meant to enhance the supports available to individuals during this challenging transition. The toolkit is not meant to be used in place of a mental health professional, but rather to provide psychoeducation on mental health concerns. Readers are encouraged to seek additional supports as they self-identify their needs.

WHAT TO EXPECT

As the economy re-opens and workplaces begin to consider what this means for them and their employees, anxiety about returning to our previous ways of working and engaging with others is natural and expected. In response, Canadian Mental Health Association (CMHA) Ontario, in partnership with Mental Health Works, BounceBack Ontario and the Centre for Innovation in Campus Mental Health, created this toolkit to support employees currently working from home and struggling with thoughts about returning to the workplace. For employers, this toolkit asks them to consider the different elements that need to be addressed as part of return-to-work planning.

This toolkit contains information about the common symptoms individuals may experience as they think about returning to their workplace and guides readers through coping strategies. Several examples are provided throughout, and additional resources are hyperlinked where possible. The toolkit also provides employers with guidelines that may help them take their employees’ mental health into consideration as they plan for a return to the workplace. Readers of this toolkit are encouraged to read both the employee and employer sections to fully understand the steps needed to create a psychologically safe return to the workplace.
RETURNING TO A SHARED WORKSPACE
DURING THE PANDEMIC: MENTAL HEALTH
CONSIDERATIONS FOR EMPLOYEES

Since March 2020, Ontarians have experienced an unprecedented shift in their way of life. Due to the 2019 novel coronavirus (COVID-19), we have had to alter how we work with colleagues, communicate with loved ones, and enjoy activities of daily living. The nature of the pandemic, including waves of infection and prolonged stay-at-home orders, have had a cumulative impact and it is understandable that COVID-19 has taken a toll on our mental health.

In May 2021, a public opinion poll commissioned by CMHA Ontario showed that only a third of Ontarians (35 per cent) consider their current state of mental health as ‘very good’ or ‘excellent,’ a significant decrease from 52 per cent as recorded in May 2020. Additionally, more than one quarter of Ontarians (27 per cent) are using more substances to cope, in line with a poll commissioned by the Canadian Centre on Substance Use and Addiction, where 25 per cent of Canadians said they are drinking more while at home due to the pandemic. Perhaps not surprisingly, rates of stress, anxiety and depression during the pandemic are also worse than ever, with nearly 80 per cent of Ontarians expressing the belief that we’ll be in a serious mental health crisis post-pandemic.3

For some, our changing reality may be even more challenging than the pandemic itself. While news about the pandemic has been difficult to hear and cope with, it came with fairly clear guidance from public health authorities around how to physically distance and alter our behaviours, and where to go for more direction and information. In the early months of the pandemic, many believed this would be a short-term situation. The fact that we are still living with and may continue to live with the pandemic for the foreseeable future is exhausting. Complicating matters, we continue to process a variety of mixed messages around fluctuating case counts, vaccine accessibility and hesitancy, job security, and re-opening the economy. Safety concerns among schools and childcare centres have also complicated many parents’ ability to focus on work, especially work performed outside of the home. These complex challenges have created feelings of fear, anxiety, and frustration on top of the difficult emotions we have already been coping with while staying at home.

It is important to keep in mind that everyone responds differently to the effects of a pandemic and that feelings can be fluid. Our experiences may change over time, and the guidance provided in this toolkit may be helpful for some, and not others. If you are not able to relate to this content or find it doesn’t meet your needs, please work with a mental health professional to determine what support would be most helpful.
How has the pandemic affected us?

For many of us, COVID-19 has taken up significant emotional energy. It has left us with limited focus, motivation, and ability to deal with stress. Our bodies are constantly in pursuit of balance, a state of homeostasis. When we feel hot, our bodies produce sweat to cool down. When we lack sleep, our bodies slow down to accommodate the lower energy we will be able to expend. And when we are stressed, our bodies find ways to respond to the stressors. COVID-19 is itself a stressor, which has then created additional stressors in our lives. A stressor is anything in the outside world that can knock us out of balance, and a stress response is our body’s attempt to re-create balance.⁵

A stressor can also be the anticipation of our body being shifted off balance. In certain cases, we are able to see things coming and our body – based on anticipation alone – can create an intense stress response.

Adjusting to working from home is an example of a stressor, while thinking about returning to our workspaces during the pandemic is an example of an anticipated stressor.

Stress responses look different for everyone. For example, one common stress response is substance use. As noted earlier, a quarter of Ontarians spoke about increasing their use of substances during the pandemic, and while some may be consuming without it resulting in any significant harms, using substances to cope may create challenges for others.⁶ Consider the spectrum of substance use pictured below.⁷

### Spectrum of Substance Use

**Beneficial Use**
- Use that has positive health, social or spiritual effects
- e.g. medical psychopharmaceuticals, coffee/tea to increase alertness; moderate consumption of red wine; sacramental use of ayahuasca or peyote

**Casual/Non-problematic Use**
- Recreational, casual, other use that has negligible health or social effects

**Problematic Use**
- Use that begins to have negative consequences for individual, family/friends or society
- e.g. impaired driving; binge consumption; harmful routes of administration

**Chronic Dependance**
- Use that has become habitual and compulsive despite negative health and social effects
We face stressful events daily and our body’s response mechanisms come naturally. Consider the example of walking through the woods and coming across a bear. We are wired to either fight, flee or freeze in the face of this acute stressor. When faced with chronic stressors, however, where we create worry about stressful events for a prolonged time, we are using the same response mechanisms in our body. This is because:

- The body uses a surprisingly similar set of responses to a broad array of stressors
- If stressors go on for too long, (i.e., chronic), they can make you physically sick

When we activate the stress response out of fear of something that turns out to be real, we appreciate this skill that has allowed us to prepare our defenses early, which can be quite protective. However, turning on these responses for a prolonged period impacts our mental health significantly. With COVID-19, our stress responses have already been turned on for some time and now we are shifting from surviving at home during the pandemic to thinking about surviving while returning to our shared workspaces during the pandemic.

As conversations about returning to shared workspaces emerge, you may experience emotions such as anxiety, stress, panic and worry. You may also experience trouble with your sleep, appetite, and interactions with colleagues and friends. These reactions are normal and expected. In this toolkit, we explore ways to understand these reactions, cope as our place of work evolves, and express your concerns to others.

The toolkit is informed by principles of cognitive behavioural therapy (CBT); a structured, time-limited, problem-focused, and goal-oriented form of psychotherapy. First developed in the 1960s by Dr. Aaron Beck, CBT has been shown to be effective in over a thousand research studies. CBT helps people identify their thoughts, challenge those thoughts and learn skills to achieve improvements in mood, functioning and well-being. CBT is based on the cognitive model, which states that, “the way that individuals perceive a situation is more closely connected to their reaction than the situation itself.” This suggests the thoughts that enter our mind during a situation influence our emotional, behavioural and physiological reactions. (While CBT is one approach to dealing with stress, there are other healing practices that may work better for you.)
THE COGNITIVE TRIAD

This triad is informed by the cognitive model and acts as the foundation of CBT, which demonstrates the connection between our thoughts, feelings, and action. Specifically, it shows how our thoughts impact our feelings, which influence how we behave/what we do. This creates a cyclical effect, where our actions then further impact our thoughts, leading to other feelings or emotions and creating more behaviours.

In the image below, arrows display the direction in which these flow. You may notice this process does not have an end point. This means our thoughts impact our feelings, resulting in actions which then create more thoughts, once again impacting our feelings, creating more actions, and so on. This process is also sometimes referred to as a “vicious cycle.”

Consider the following example: Your employer announces they are creating a plan for how staff will start returning to your shared workspace.

**Thought:** “I’m going to be infected by COVID-19 when I go back to the office.”

**Feeling:** Your heart might start racing; palms might get sweaty. You may be feeling anxious, stressed, worried or sad.

**Behaviour:** You might cope by connecting with your colleagues, expressing your concerns to your loved ones, turning to the news for more information or having a drink later that evening.

**Next thought:** “I can’t believe they are calling us back into work so soon.” This will then lead to more feelings and behaviours, contributing toward that vicious cycle we referred to above.

Notice, the very first step was the thought. If we had started with a different thought, such as “I hope my employer will take measures to increase safety,” then our feelings and behaviours may have looked very different.

Our lives comprise a series of positive, neutral and negative events. We interpret these events with a series of thoughts that continually flow through our minds, our “internal dialogue.” Our feelings are created by these thoughts and not the actual events. All experiences must be processed through our brain and given a conscious meaning before we experience an emotional response. The premise underlying the cognitive triad is that once you develop awareness of these connections within yourself, you can start addressing this cycle.

**KEY POINTS:**

- Our thoughts impact our feelings and behaviours
- Our thoughts can create a vicious cycle, making it hard to create change
- It is possible to break this cycle

Our thoughts are informed by years of experience and observation that, with time and practice, become automatic responses to the external environment. These automatic responses are experienced by everyone and are informed by the thinking styles we identify with most.
DIFFERENT THINKING STYLES THAT CAN BE UNHELPFUL

Also known as “cognitive distortions,” the thinking styles below show how the thoughts that can lead us to experience negative emotions most often contain distortions. The premise for these thinking styles is our emotions and behaviours are often not based on accurate perceptions of reality but are often the products of how we have processed our environment and thoughts about it.

UNHELPFUL THINKING STYLES

<table>
<thead>
<tr>
<th>Black and white thinking</th>
<th>Evaluating our environment and experiences in extremes – things are either good or bad, a success or a failure. Most events call for explanation somewhere in between.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overgeneralization</td>
<td>Using words like “always” or “never” to describe situations or events. We overgeneralize when we are not taking all aspects of a situation or event into consideration.</td>
</tr>
<tr>
<td>Mental filter</td>
<td>Paying attention to only the unpleasant things that happen and ignoring the good ones. Filtering prevents us from looking at all aspects of a situation and drawing on more balanced conclusions.</td>
</tr>
<tr>
<td>Disqualifying the positive</td>
<td>Transforming our neutral or positive experiences into negative ones. This is not about ignoring positive events and focusing on the negative ones. Rather, it is about our ability to cleverly switch anything good into bad.</td>
</tr>
<tr>
<td>Mind reading</td>
<td>Believing we know what others are thinking – we will assume they are thinking the worst of us.</td>
</tr>
<tr>
<td>Fortune-telling</td>
<td>Predicting that things will turn out badly when in reality we cannot predict the future.</td>
</tr>
<tr>
<td>Catastrophizing</td>
<td>Imagining the worst possible thing is about to happen and predicting we will not be able to cope with the outcome.</td>
</tr>
<tr>
<td>Emotional reasoning</td>
<td>Taking our emotions as evidence for the truth. Because things feel negative, we assume they really are.</td>
</tr>
<tr>
<td>“Should” statements</td>
<td>Telling ourselves how we “should,” “must,” or “ought” to feel and behave. However, telling ourselves this does not mean this is actually how we feel and behave, resulting in our feeling anxious and disappointed with ourselves and/or others around us.</td>
</tr>
<tr>
<td>Labelling</td>
<td>Talking to ourselves in mean ways and using a single negative word to describe ourselves. This is unhelpful and unfair and does not consider that we are too complex to be summed up in one label.</td>
</tr>
<tr>
<td>Personalization</td>
<td>A tendency to assume responsibility for a negative event when there is no basis for doing so.</td>
</tr>
</tbody>
</table>

The negative emotions we feel are a direct result of negative thoughts. Sometimes, the emotions can feel so instant and overpowering that we have trouble identifying what caused them or how we got there. In these cases, the negative thoughts have become automatic, or ANTs – automatic negative thoughts.
Consider the following example:
During a virtual all-staff meeting, Sarita hears a member of the management team say they have started discussing how employees will return to company headquarters. Upon hearing this, Sarita immediately thinks, “How can they consider bringing us back so soon?” These thoughts lead into emotions of worry, panic, and confusion. Sarita then starts messaging her colleagues and confidantes to ask if they heard this as well and if they have more information. As expected, most of the colleagues she messages are in the same position as they have all heard this news for the first time together. This results in a mass feeling of panic, anger, and animosity toward the management team and, specifically, the individual who brought this news up in the first place. Sarita may feel distracted from her work the rest of the day, spend more time discussing this topic with her colleagues, or do something to make herself feel better in the short term. Sarita may also experience presenteeism, which is when an employee is physically present at work but not fully present mentally. These are normal reactions to a situation such as this. However, are they helpful for Sarita?

In this scenario, some of the unhelpful thinking styles that may be underlying Sarita’s self-talk include black and white thinking, catastrophizing and fortune telling.

In order to challenge the thoughts that are emerging from these thinking styles, Sarita will want to ask herself the following questions:

Is it reasonable to think that the management team will make plans that could put the staff’s health and safety at risk?

What is the evidence for thinking that the staff will be brought back into the office “soon?”

What is the evidence against management creating a safe transition plan?

What are the chances that all staff will be asked to come in at the same time and in a very short time frame?

What is the worst thing that would happen if the management team has begun discussing this transition?

How is worrying about this helping me?

Thinking through these questions can help Sarita step back and consider whether her thoughts are based on facts or feelings. Feelings are not facts, and should not be the basis for our reactions, especially during such challenging circumstances. We encourage everyone to use these questions to reflect on their thoughts, feelings, and behaviours. This exercise is helpful to walk through as it can help you better organize your inner thoughts and create opportunities to mobilize into action with a different frame of mind.
KEY POINTS:

- Take pauses and ask yourself:
  1. Is the information you have complete?
  2. Is the information you have accurate?
  3. Is the thought you are having about X true? Is it based on the evidence or based on previous thoughts and/or feelings?

- Your employer is required to provide certain accommodations and may be willing to provide additional support. However, they cannot do anything unless you are forthcoming about your needs.

Ideally, you would like to feel comfortable and ready to speak with your employer about your concerns. This can be difficult to do, even if they have articulated a detailed plan that includes how they will address individual concerns. Some tips you can use in your conversation are described below.17

Remember: while an employer has a requirement to provide certain accommodations, they cannot do so if employees are not forthcoming about their needs.

TIPS FOR SPEAKING WITH YOUR EMPLOYER

Start the conversation: Sometimes, even the most astute manager will not notice when something is wrong. Start the conversation by asking for a meeting in private. Do not feel like you need to disclose everything but let them know you may need some additional support as plans for returning to the workspace are outlined. You can also use this time to confirm your understanding of communicated plans and share your concerns.

Focus on effects: Focus on what would make your workspace more conducive to your wellbeing and develop a plan. For example, you might consider a graduated re-entry into the workspace with shorter hours and days and gradual increases over time.

Make an appointment with your health care professional: Ask your healthcare provider for their input on your concerns and needs and what an effective return to a shared workspace might look like for you. If formal accommodation outside of your employer’s plan and policies seems warranted, remember to request documentation that states any limitations.

Be forthcoming: If you feel safe doing so, give as much context as possible to your supervisor so they can help you craft an appropriate plan. Sometimes it takes a few attempts. It is important to let your supervisor know when the plan needs to be updated.

Participate in check-ins: Let your manager know on a regular basis how things are going. Participating in check-ins, even if informal, is a great way to manage your plan.

Take care: Take care of yourself. Sometimes the best thing is taking some time away in order to focus on your care or assess your path forward. Speak with your supervisor about sick-leave policies and supports outside the workspace, such as benefit plans and employee assistance programs.

In addition to these strategies, it is important we make time to actively practice self-care. Self-care strategies can include finding ways to be physically active or to self-soothe, so we have ways to improve our emotional experience when feeling distressed. The activities listed below can help reduce the intensity of any distress you may be feeling and can increase feelings of mindfulness.
WHEN TO SEEK ADDITIONAL SUPPORT FROM A MENTAL HEALTH PROFESSIONAL

Experiencing symptoms of poor mental health and struggling with how to manage these symptoms are a normal and expected response when thinking about returning to your employer’s shared workspace. And there are resources available to help you process your feelings during this time.

That said, sometimes, even after actively trying to reduce our stress and anxiety, we continue to struggle. In these cases, you may wish to reach out for support from a mental health professional. Some signs to notice include:

- Continued changes in sleep
- Changes in appetite
- Negative impacts on personal relationships
- Increased feelings of sadness
- Excessive worrying
- Hesitation to connect with existing support networks/systems
- If using substances:
  - Experiencing a loss of control over the amount or frequency of use
  - Continuing to use substances despite negative consequences
  - Craving and feeling a compulsion to use

It is important to note the timeframe of these feelings and symptoms. If they persist for weeks at a time, it may be helpful to seek additional support from a mental health professional. Your organization may even have an Employee Assistance Program (EAP) that you can access for additional support.
RETURNING TO A COMMON WORKSPACE AFTER A PANDEMIC:  
THE EMPLOYER PERSPECTIVE

Just as members of your staff are experiencing anxiety in relation to the pandemic and returning to shared workspaces, so too might senior leadership as they consider how to prepare their workspaces for the foreseeable future. For many of us, the shift from virtual to in-person operations may be inevitable. While some organizations may have flexibility on when this must be implemented, others may not and will act fairly quickly to both prepare their workplace as safe spaces and provide staff the reassurance they need to feel comfortable with this transition.

Although employee well-being is everyone’s responsibility, there is an important role for leadership within an organization. Proper leadership practices can make employees more comfortable with disclosing mental health and/or addictions-related difficulties. Maintaining a workspace culture built on trust, honesty and fairness creates an environment conducive to positive mental health and enables staff to raise concerns with management.19

Remember, just as no two people are the same, an adequate response to a mental health concern related to COVID-19 will not be identical for any two people. We recommend employers adopt a person-centred approach to addressing these concerns with staff and we encourage building a focus on psychological health and safety into organization-wide business plans. This means considering the impact of workspace processes, policies and interactions on the psychological health and safety of all employees.

Responding effectively to mental health concerns requires meeting employees where they are, rather than imposing a solution or prescriptive plan. You are working with staff to develop a solution that is appropriate for their needs and the workspace.

RETURN TO THE OFFICE

Employees prefer to work:

- 30% Fully remote
- 51% Hybrid of remote and in office
- 19% Fully in office
Remote-only concerns:

- 39% Weaker co-worker relationships
- 21% Fewer career advancement opportunities
- 16% Decreased productivity while at home

Return-to-office wish list:

1. Ability to set preferred work hours
2. Commuting expenses
3. Personal office space
4. Relaxed dress code
5. Employer-provided childcare

1 in 3 professionals currently working from home would look for a new job if required to return to the office.

In planning employees’ return to a common workspace, have you:

- Strived to create an atmosphere in which employees are comfortable discussing their questions and concerns?
- Created opportunities to collaborate with employees on the proposed plans?
- Created flexibility within the organization’s plans and policies for employees to determine their own return plan that meets their needs and circumstances?
- Created a system for recording requests by employees, and communicated the steps you have taken to address them?
- Required employees to provide the information reasonably required to execute a request for formal accommodation?
- Informed employees that any costs associated with formal workspace accommodations, such as physician notes or assessments, will be covered by the employer?
- Developed a protocol for employees unable to return to the workspace?
- Ensured the plans and policies identify the employer’s duties to your employees?
- Ensured plans and policies identify the duties of your employees, and have clearly communicated them?
- Considered how these plans and policies will be shared with all staff?
TIPS FOR SPEAKING WITH YOUR EMPLOYEES

Effectively supporting employees’ mental health as they transition back to the workspace requires working from a place of compassion. Some tips to keep in mind: 21

Build trust: Always maintain integrity and confidentiality. At every opportunity, share information about the plans in progress with your teams, and request that they share their feedback and concerns with you. Where possible, share your own concerns as well and how you are coping personally.

Make time to talk: If you have only one or two employees at a time, overlap their shifts by a few minutes to encourage employees to talk to each other, and to you. This builds the team and helps everyone know they are not alone in their concerns.

Encourage participation: To increase your employees’ personal commitment, encourage their participation in consultation processes. Consider creating a planning committee that includes members of staff, so they can be part of the discussion and decision-making. Or consider circulating an anonymous survey to gather feedback from staff, including those not comfortable speaking during large virtual meetings.

Be specific: When sharing plans, provide as much detail as you can. Staff will feel safer if you can provide specific information based on the latest research evidence, so include hyperlinks to the actual research, too.

Respect privacy: When an individual has had a private conversation with you, be sure not to disclose this during larger meetings or to management not directly overseeing the employee. Not everyone wants their mental health status or personal accommodation requests disclosed. In this vein, don’t ask a member of staff whether they are struggling with their mental health. Instead, ask whether there are any problems that are interfering with their work, or if they will be able to perform all the essential duties of their job.

Educate employees: Just because you ‘get it’ does not mean other staff do. Ensure your team and others are educated on mental health concerns related to COVID-19 and know how to access professional supports if they wish.

Be positive: Create morale-boosting measures and opportunities to have fun together where possible, such as online games etc.

Be proactive: Take the time to talk about the importance of employee mental health. This sets the conditions for conversations to occur, cements your commitment as a leader to employee wellbeing, and introduces the protective factor of psychosocial support into the work environment. Know, and understand, that you are part of an informal support network for all employees.

Acknowledge grief and loss: We need to address the elephant in the room. This has been a very trying time for everyone. Individuals have experienced tremendous losses during the pandemic and not just the loss of family members, but existential losses such as relationships, a sense of freedom, and trust in the system. To move forward, we need to name the grief we have all experienced and validate the feelings that come with these losses.
CREATING A PSYCHOLOGICALLY HEALTHY AND SAFE WORKSPACE

Management is responsible for creating and fostering an environment that is healthy and safe – physically and psychologically – for all staff. The National Standard for Psychological Health and Safety in the Workspace (the Standard) is a free resource that organizations can use to develop a management system that cares for the psychological well-being of staff. Part prevention and part promotion, it is unique among standards developed by the Canadian Standards Association (CSA) Group. We encourage you to use the innovative best practices within the Standard, adopted by private and public sectors, to support employees as they return to shared workspaces during the pandemic.

A RECENT STUDY BY DELOITTE FOUND THAT FOR EVERY $1 SPENT ON MENTAL HEALTH PROMOTION OR INITIATIVES IN THE WORKSPACE, PARTICIPATING ORGANIZATIONS SAW A $1.63 RETURN ON INVESTMENT. A SUPPLEMENTARY PIECE TO THE STANDARD, ASSEMBLING THE PIECES, PROVIDES ADDITIONAL TOOLS NEEDED TO BEGIN THE IMPLEMENTATION PROCESS, WHETHER YOU ARE LOOKING TO ROLL OUT THE STANDARD IN ITS ENTIRETY, OR SIMPLY ADDRESS PARTICULAR AREAS OF PSYCHOSOCIAL RISK.

The Mental Health Commission of Canada (MHCC) has also produced a comprehensive review of organizations that began to implement the Standard and found many saw dramatic improvements in productivity and satisfaction. As a business case, you can reference the MHCC Case Study Research Report to provide the groundwork for beginning the journey in your organization.

CMHA Branches, provincial Divisions, and our National office are also ready to assist with training opportunities for interested leadership through our Mental Health Works program. A nationwide social enterprise of CMHA Ontario, Mental Health Works provides tailored, capacity-building workshops and consultations to organizations looking to improve and protect employee mental health, while also realizing the fiscal benefits of mental health promotion. Mental Health Works’ Accommodation Guide for Managers and Staff is a resource intended to support employers and employees with the often difficult conversations that arise around workplace mental health. To contact your local CMHA Branch, visit: https://cmha.ca/find-your-cmha
TELECOMMUTING AND REMOTE WORK

Many organizations have decided to give employees the flexibility to work from home temporarily as they resume normal operations. As technology has become more effective, some organizations are able to continue operations remotely. While providing a choice may alleviate some of the anxiety associated with returning to a shared workspace, it introduces new concerns and challenges. As you gradually plan the return, conduct a flexible business resumption plan, or encourage some staff to continue remote work, you may wish to consider the following:

Make the time for regular check-ins. For staff who are not attending the office regularly – or at all – recognize that some extra effort needs to be taken to ensure they feel connected to management and the rest of the team. Set up regular calls to demonstrate your commitment to their decision.

Ensure remote workers can equitably participate in meetings. In advance of team meetings, be sure to check that the set up will allow remote participants to contribute and feel just as included as others attending in person.

Encourage breaks, monitor time and be open. It is easy for staff or management to work longer hours when at home. This may include checking or sending emails late at night, not taking stretch breaks, and not taking vacation time. Set clear expectations and encourage staff to take time off if they are eligible. Make an explicit effort to show that off-hours work and overtime aren’t expected if they aren’t needed.

Provide support. Staff may be struggling with a multitude of competing responsibilities such as childcare, elder care, noise in the home or interrupted connectivity. These are unique stressors not seen in most workspaces, and thus staff may require additional support to manage their stress. Explore creative ways to offer team building and group activities to remote workers, and improve access to benefits.

YOUR OWN WELL-BEING

Whether you are a business owner, manager or senior executive, it is important to realize that you too need and deserve a psychologically healthy and safe work environment. By taking care of yourself, you are better able to respond to concerns raised by your staff. Clear leadership comes from clear expectations for one’s own self, so take the time to recognize when you would benefit from some support or need a break. The benefits of doing this are healthier management, healthier staff and a work environment that is better able to innovate. Some recommendations:

Practice mindfulness. Mindfulness is the awareness that arises when we pay attention, non-judgmentally, to what is happening in the present moment. This includes events happening externally in the world, as well as internally inside each of us. Practicing mindfulness helps us appreciate the small joys in life and combat negative thoughts by mitigating our negative responses to stress. Your responsibilities can be incredibly taxing. Introducing moments of mindful practice into your day-to-day routine supports you when responding to crises. Reading a book, being present and mindful while sitting down for lunch or focusing on your surrounding while going for a walk are all examples of everyday mindfulness practices. More involved practices may include experiencing ‘full body scan,’ guided meditations or mindfulness-based therapies. Check out this CICMH webinar on mindfulness for tips and techniques to start.
**Build a support network.** Seek out other leaders and learn from their experiences, actions, and innovation. Since we are all learning how to navigate this moment in history together, there is no shortage of people interested in connecting and learning from each other. If you are feeling isolated, reach out to your network and form peer groups that can help one another navigate these changes.

**Build a team.** Every employee and manager in your organization is a leader in some way. As you begin the “return-to-work” process, acknowledge this by building a team that will help to initiate the process and see it through to completion. Your guidance is irreplaceable, but by seeking out help from internal resources you will get there quicker, safer and in more creative ways.

**Communicate intent, not task.** Trust in your team will lead to success. There may be solutions to problems you haven’t thought about, and by communicating your intent you provide the freedom of initiative to the people who will help the organization get closer to the finish line. By not micromanaging results, you instill a sense of trust and respect within the workforce while also allowing you to shift focus to other emergent concerns.

**Be kind to yourself.** Practice ‘contemplative acts of self-compassion’ daily. Give yourself the permission to feel a bit lost, worried or stressed. Acknowledge that many are feeling this way, and that it is ok to take a moment to just breathe. A brief pause does not mean you are inactive. It means you are readying yourself for the next bound. Replenish yourself: In times of stress, we often forget to care for ourselves. Remind yourself of the protocol on a flight: we need to first put the oxygen mask on ourselves and then help those around you. If you do not allow yourself to practice self-care and be replenished, it will be impossible to care for those around you.

**Consider the Seven Domains of Wellness (below).** This wheel acknowledges that there several healing practices for stress. Research shows that a balance among the Seven Dimensions of Wellbeing leads to a fuller, more satisfying life.

![Seven Domains of Wellness](image-url)
REFERENCES


3 Supra, note 1, Canadian Mental Health Association, Ontario. (2020).

4 Adapted from a graphic from Dr Deb Thompson: Our Brains on COVID-19: https://www.linkedin.com/pulse/our-brains-covid-19-deb-thompson/


7 Ibid.


12 Ibid.

13 Ibid.


18 Ibid.

19 Ibid.


21 Ibid.


23 Centre for Youth Wellness: https://centerforyouthwellness.org/resources/
APPENDIX A: ADDITIONAL RESOURCES

Government of Ontario
Guideline on developing a COVID-19 workplace safety plan
A guide for employers on developing a plan to work safely, with information on controls that need to be put into place to make the workplace safer for everyone.

Ministry of Labour, Training and Skills Development
Resources to prevent COVID-19 in the workplace
A webpage dedicated to sector-specific guidelines and posters to help protect workers, customers and the general public from COVID-19 in Ontario.

Public Health Ontario
COVID-19 Public Resources
Resources and fact sheets to support with containing COVID-19.

Mental Health Works
A nationwide social enterprise of CMHA Ontario, Mental Health Works provides tailored, capacity-building workshops and consultations to organizations looking to improve and protect employee mental health, while also realizing the fiscal benefits of mental health promotion.

ConnexOntario
A centralized, consistently updated, repository of resources available to all Ontarians. ConnexOntario can connect you with mental health and addictions resources, and provides 24-7, real-time support through its chat and phone services.

Togetherall
A free online peer-to-peer support service that offers immediate online assistance to people struggling with mild-to-moderate anxiety and depression. Patients can be referred to Togetherall and register themselves.

BounceBack
A free skill-building program managed by CMHA. BounceBack is designed to help adults and youth 15+ manage low mood, mild-to-moderate depression and anxiety, stress and worry. Delivered over the phone with a coach and through online videos, participants get access to tools that support them on their path to mental wellness.

The Ontario Caregiver Association
The Ontario Caregiver Organization (OCO) supports Ontario’s 3.3 million caregivers: people who provide physical and emotional support to a family member, partner, friend or neighbour. The OCO acts as their one point of access to information, so they have what they need to be successful in their role.
# CMHA Ontario Branches

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