

# Depression in the Workplace:

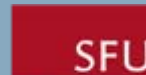
## From Research to Policy and Practice

Dr. T. Larry Myette  
Director, Strategic Workplace Health  
Healthcare Benefit Trust  
larrym@hbt.bc.ca



BC Mental Health &  
Addiction Services

An agency of the Provincial Health Services Authority



SIMON FRASER UNIVERSITY  
CENTRE FOR APPLIED RESEARCH IN  
MENTAL HEALTH AND ADDICTION  
FACULTY OF HEALTH SCIENCES



CIHR IRSC  
Canadian Institutes of  
Health Research Institut de recherche  
en santé du Canada

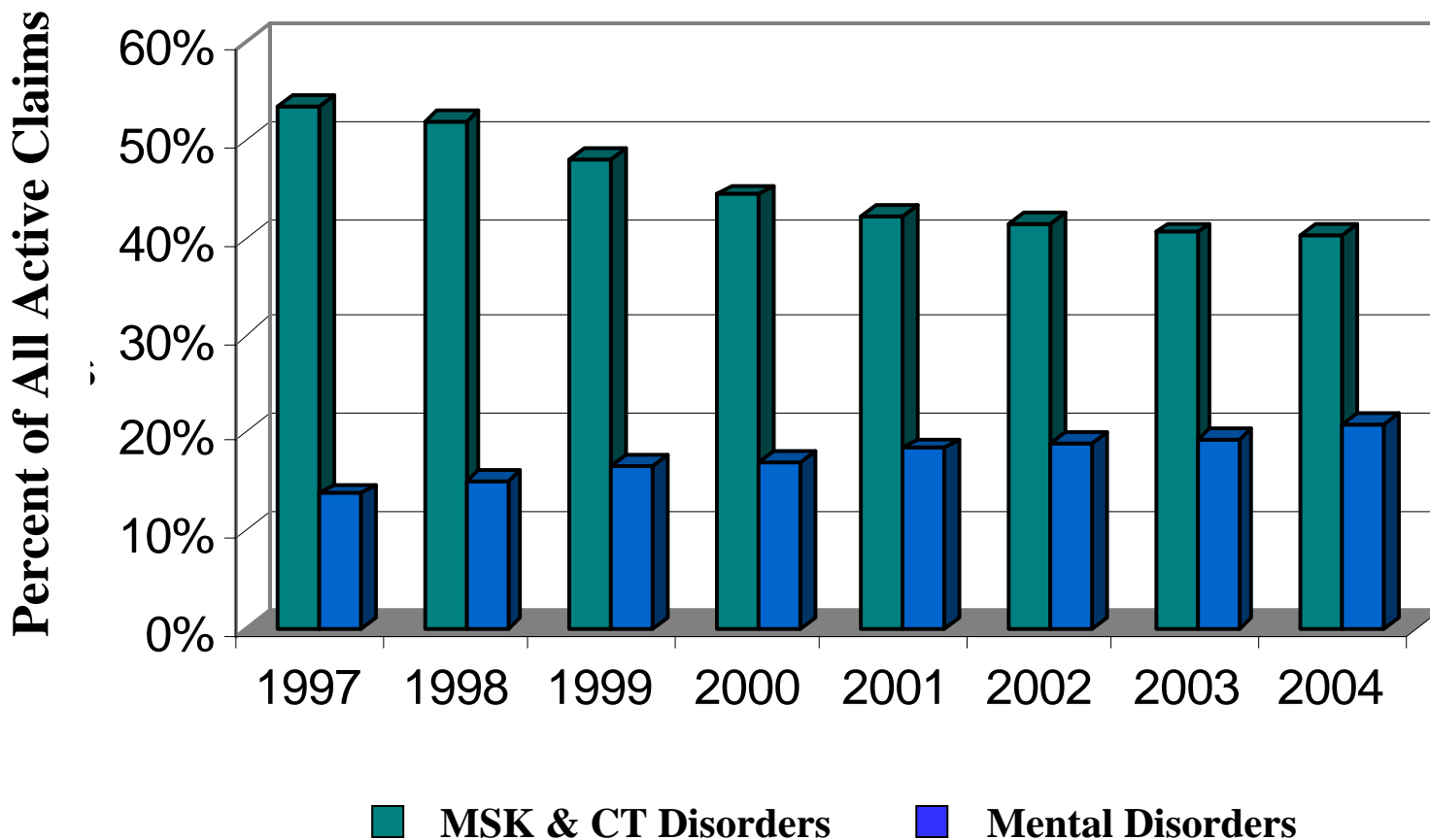
# Healthcare Benefit Trust

- ❑ Established as a not-for-profit health and welfare trust in 1979
- ❑ Provides group health and welfare benefits for healthcare and community social services
- ❑ Benefits include Group Life, Accidental Death and Dismemberment, Long Term Disability, Extended Health and Dental
- ❑ Provides an Early Intervention Service in accordance with collective agreements
- ❑ Over 600 member organizations in BC and Yukon
- ❑ Over 75,000 eligible employees



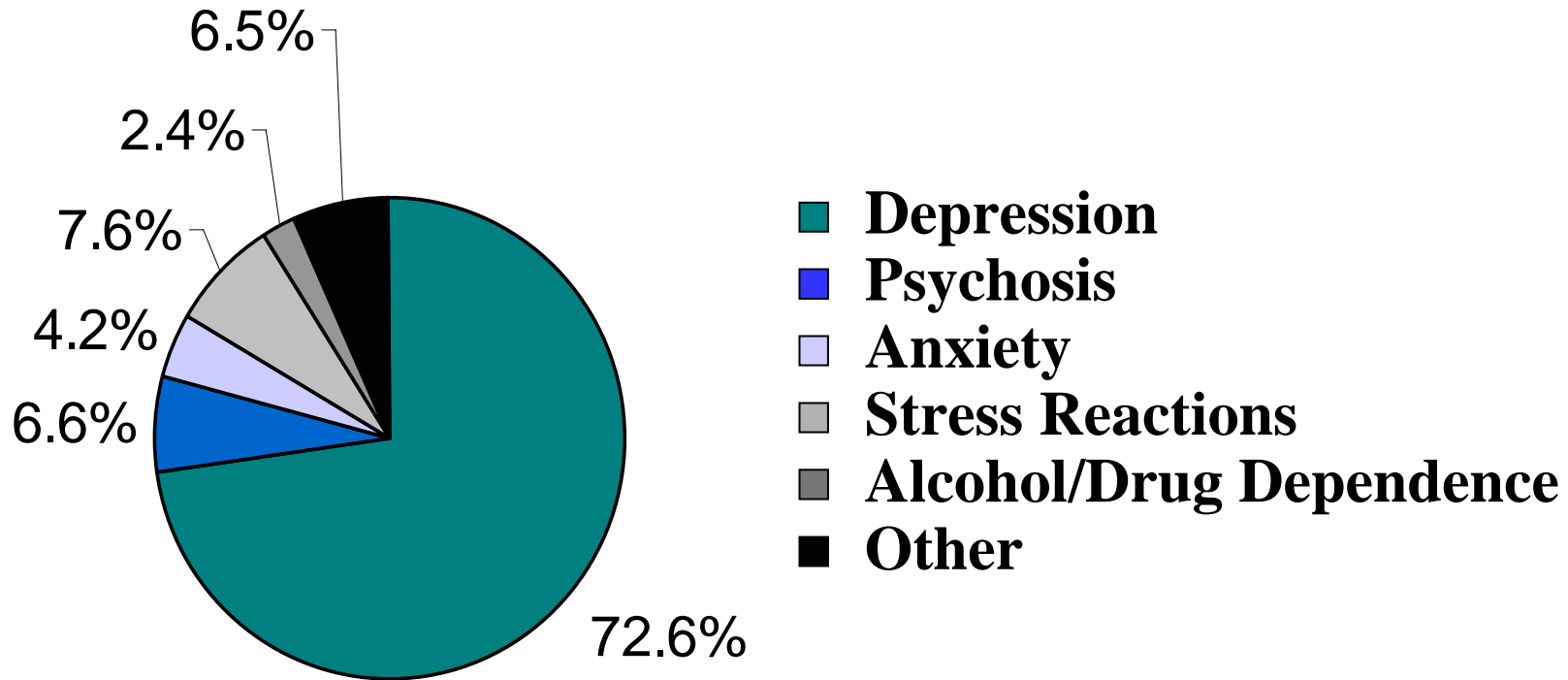
# The Evidence

□ Healthcare Active LTD Claims



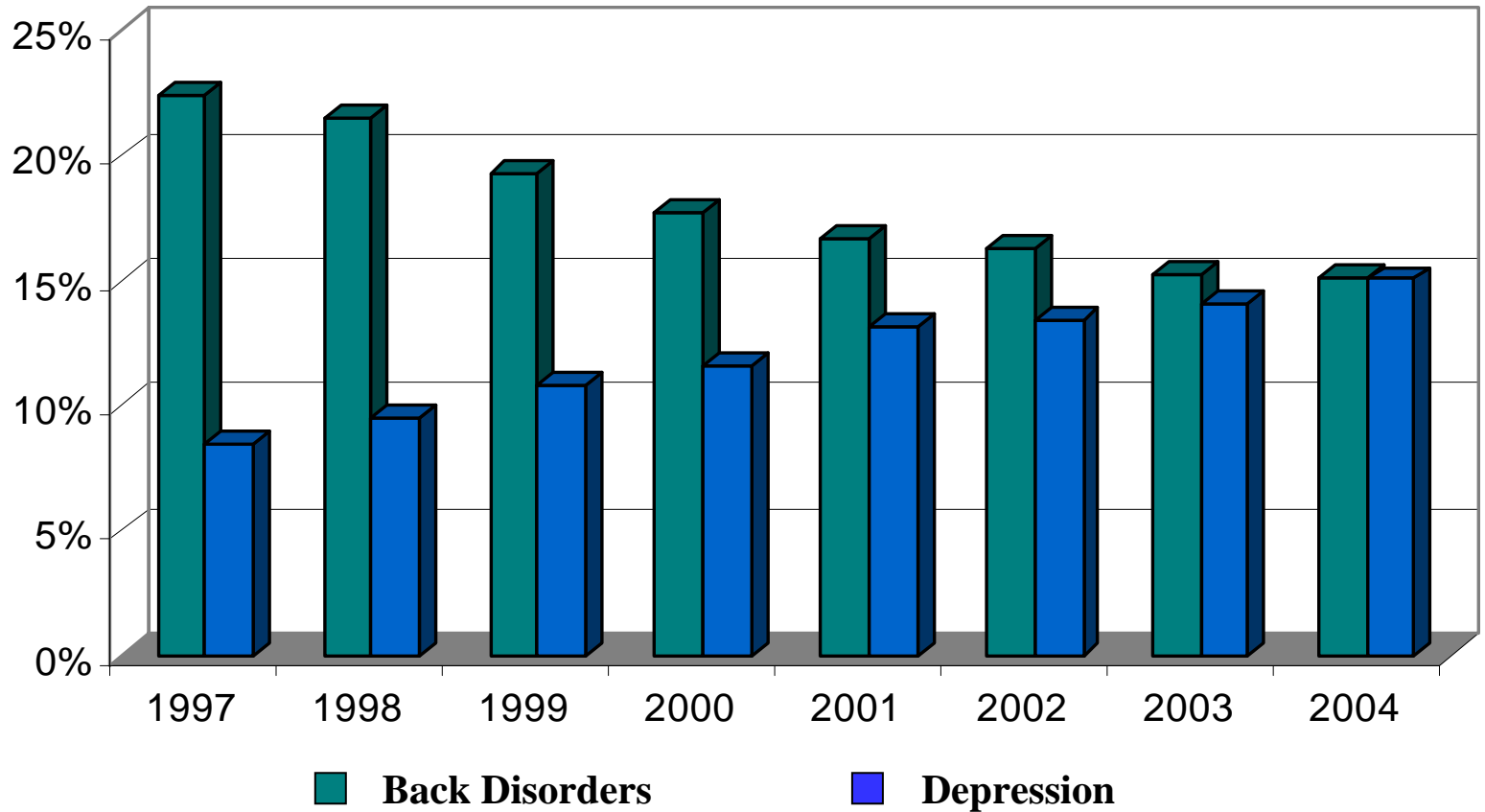
# The Evidence

## Healthcare Active LTD Claims - Mental Disorders



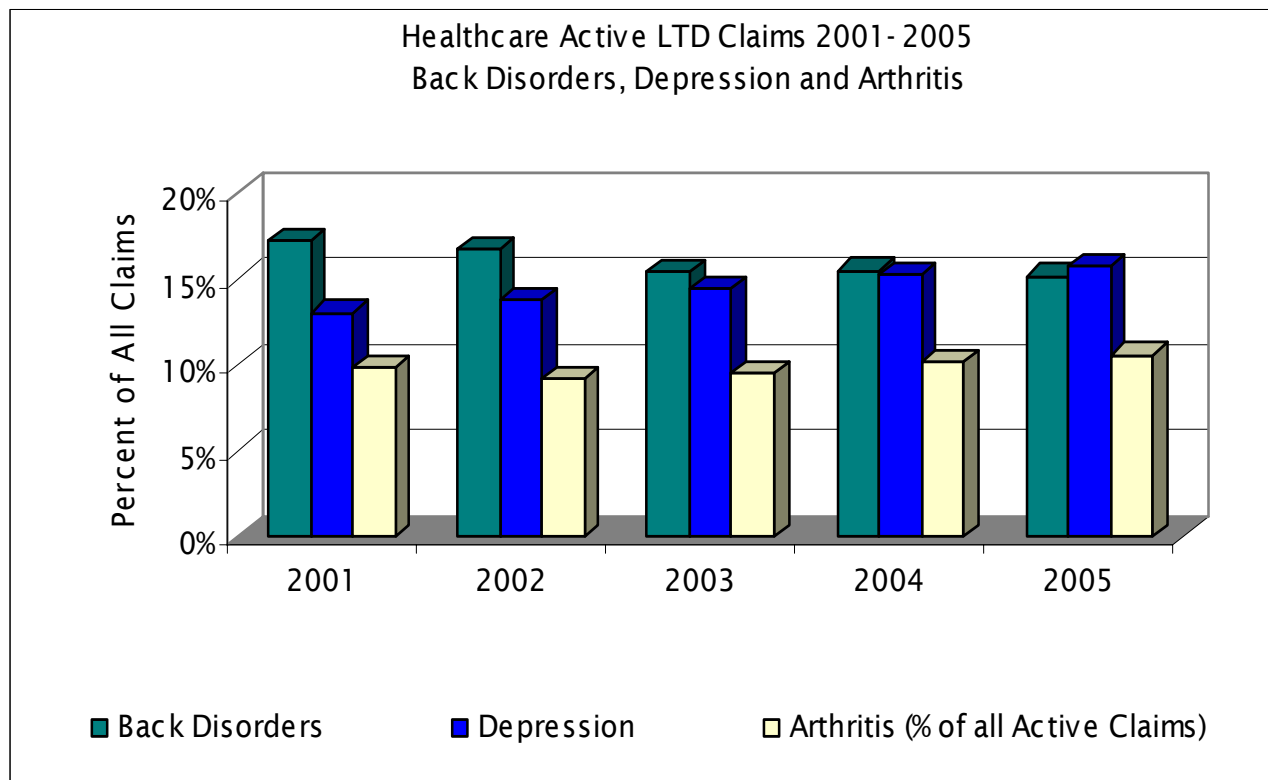
# The Evidence

## Healthcare – Percent of Active LTD Claims



# The Evidence

## Healthcare – Percent of Active LTD Claims



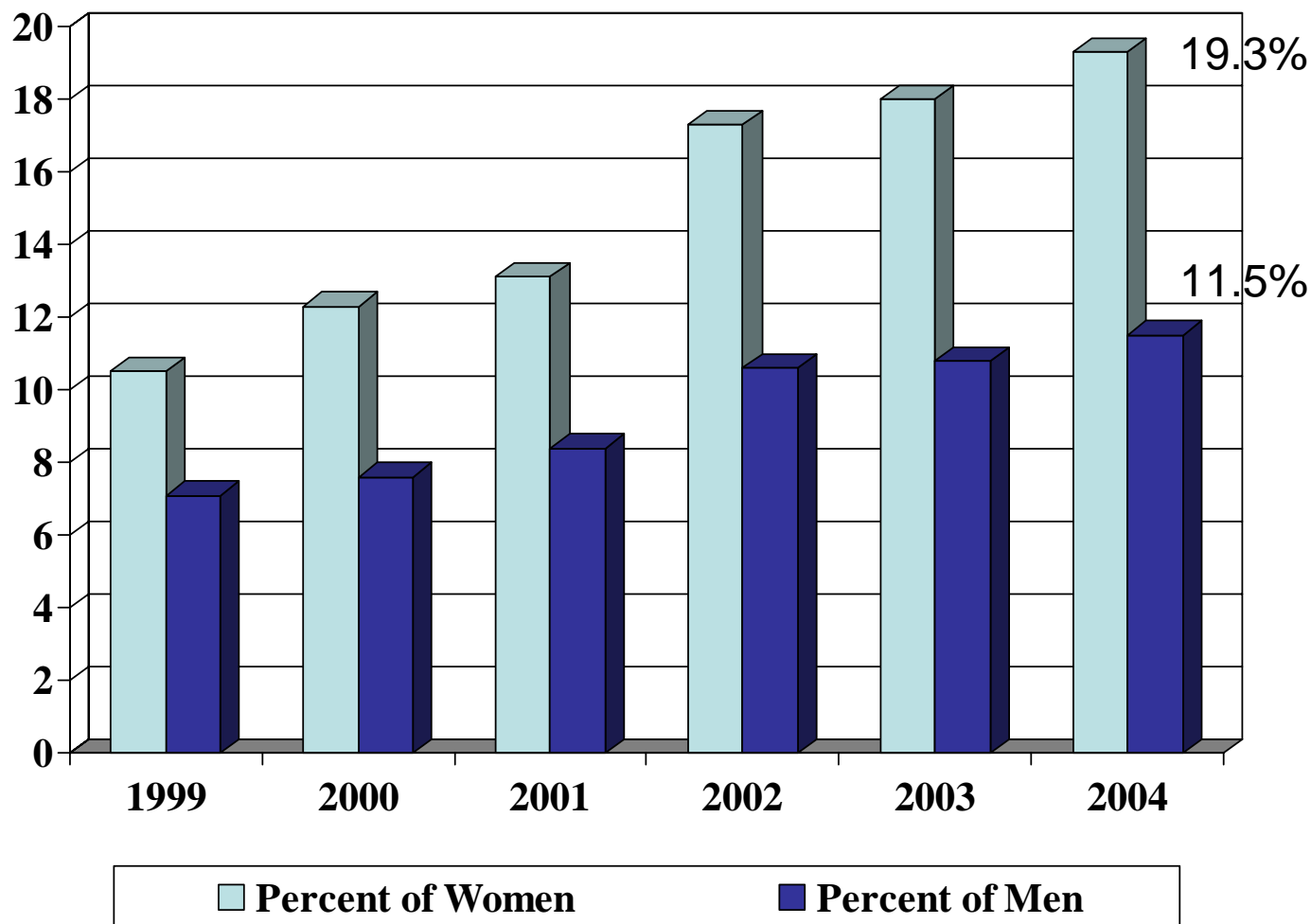
# The Evidence

## A Catalyst for Action

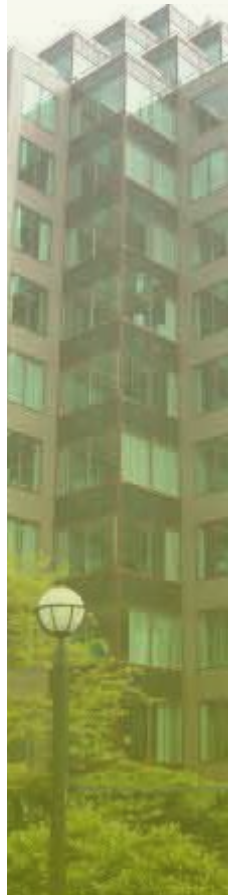
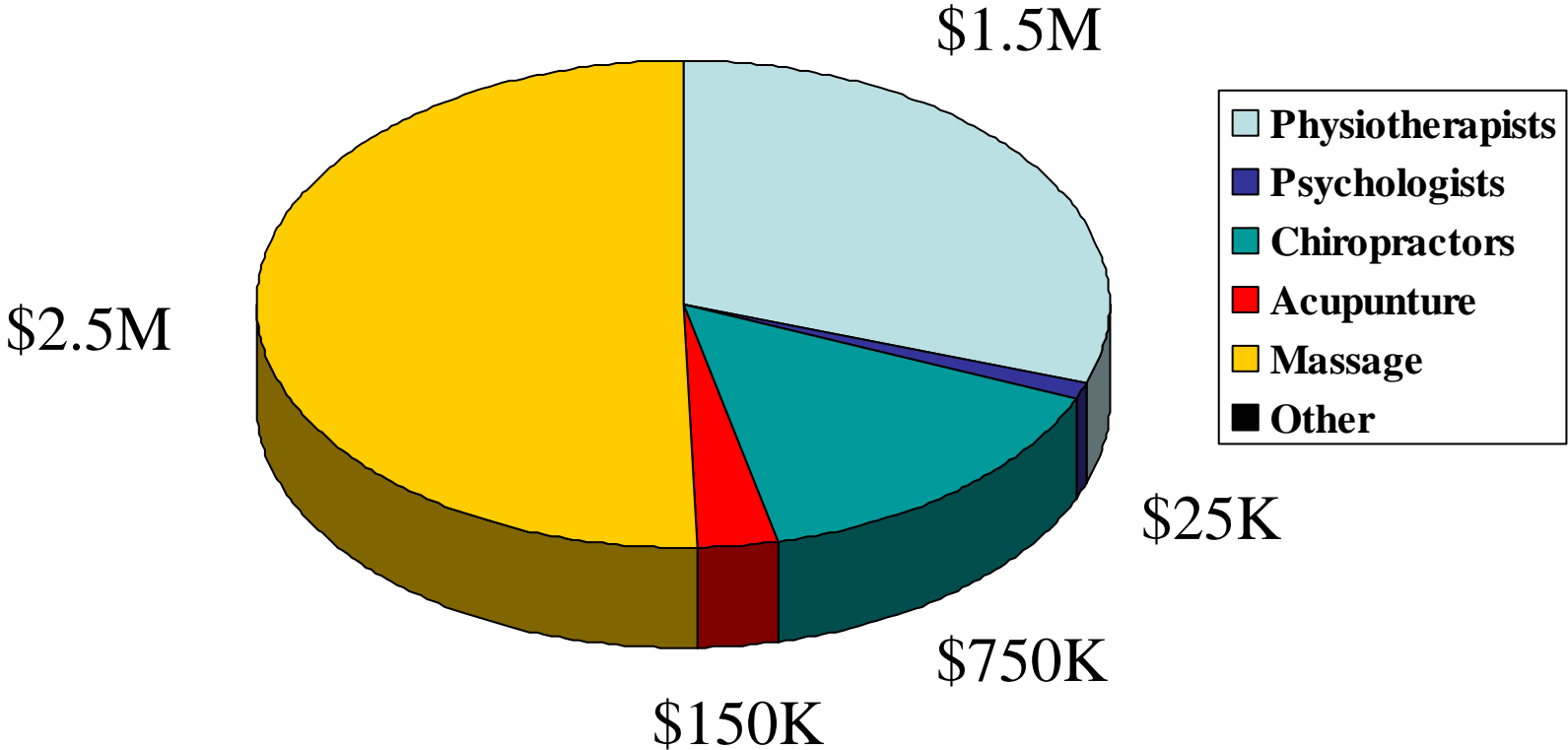
- ❑ Depression in the Workplace Collaborative
- ❑ The “Blue Book” – <http://www.carmha.ca>
- ❑ Global Business and Economic Roundtable for Mental Health and Addictions
- ❑ BC Business and Economic Roundtable for Mental Health and Addiction
- ❑ Numerous conference presentations and workshops
- ❑ Consulting services
- ❑ Policy – MOH, Out of the Shadows
- ❑ ACOEM Depression in the Workplace Project
- ❑ Healthcare Leaders Discussion Paper  
<http://www.hbt.bc.ca>



# Further Evidence Utilization of Antidepressants

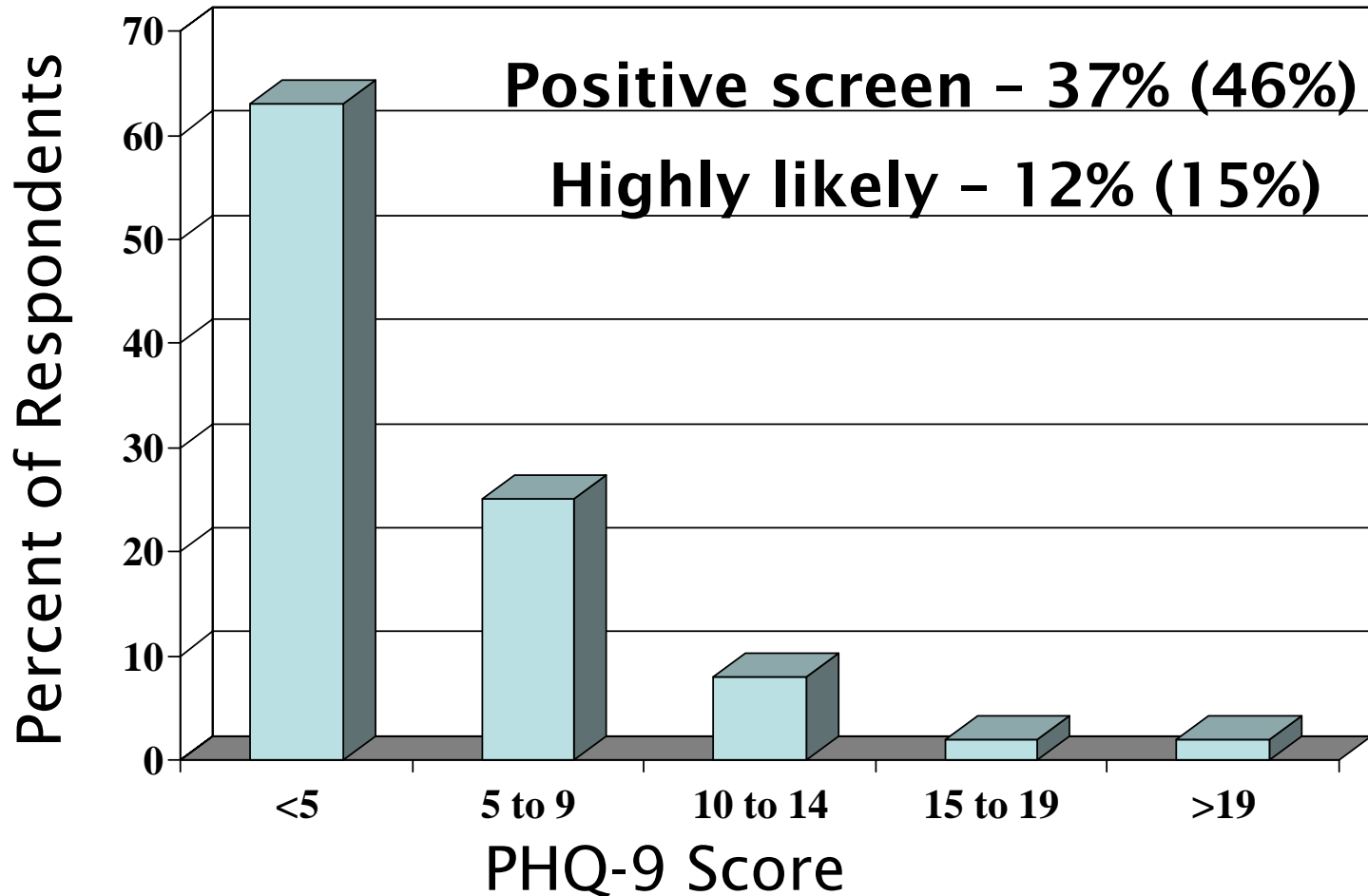


# Further Evidence Extended Health Benefits Design



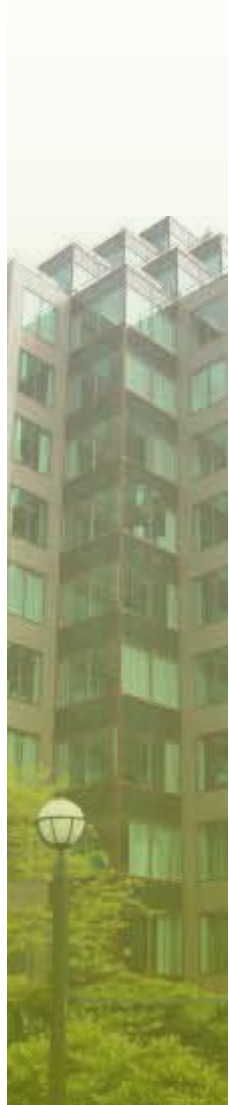
# Further Evidence

## Employee Health Survey – PHQ-9



# PHSA Executive Management Series

- ❑ Clinical course of depression
- ❑ Occupational implications of depression
- ❑ Business case for managing depression in the workplace – the health productivity framework
- ❑ Comprehensive integrated intervention strategy
- ❑ Management system approach for developing and executing strategy
- ❑ Executive leadership



# PHSA Executive Management

## Recommendations:

- ❑ Establish a permanent Corporate Wellness Executive Sub Committee and Wellness Action Committees at all major functional units
- ❑ Develop a corporate wellness policy that is consistent with organizational values and supportive of organizational goals
- ❑ Articulate guiding principles and ensure that they are applied at all levels
- ❑ Develop and implement a corporate strategy to manage depression in the workplace at PHSA
- ❑ Develop 1 - 3 year Executive Plan
- ❑ Develop a budget



# PHSA Executive Management

## Recommendations:

- Create a supportive culture/environment
- Adopt a participative problem solving approach with union involvement in all action committees
- Conduct a formal current situation assessment as a basis for the development of Corporate and major functional unit health profiles
- Conduct evidence-based planning using information from current situation assessment
- Develop a formal communication strategy
- Apply quality management principles (measure, record, monitor, improve) and delineate roles, responsibilities and accountabilities to Executive



# PHSA – HBT Partnership

- ❑ Workplace health consulting
- ❑ Employee Health Survey
- ❑ Feeling Better Now™
- ❑ Early Intervention Program
- ❑ LTD, EHB





# HBT Employee Health Survey

- Physical risk factors
- Psychosocial risk factors
- Personal health risk factors  
and readiness to change
- PHQ-9
- Stanford Presenteeism Scale-12
- Demographics

# Integrated Workplace Depression Management

## Prevention

- Health risk management
  - employee/organization
- Evidence-based program development/benefit design
- Mental health promotion
  - Resiliency training
  - Time/stress management
- Supportive HR policies
  - Conflict resolution
  - Work-life balance
  - Recognition/reward
- Supportive leadership and management/supervision
- Education and training
- Healthy workplace strategy

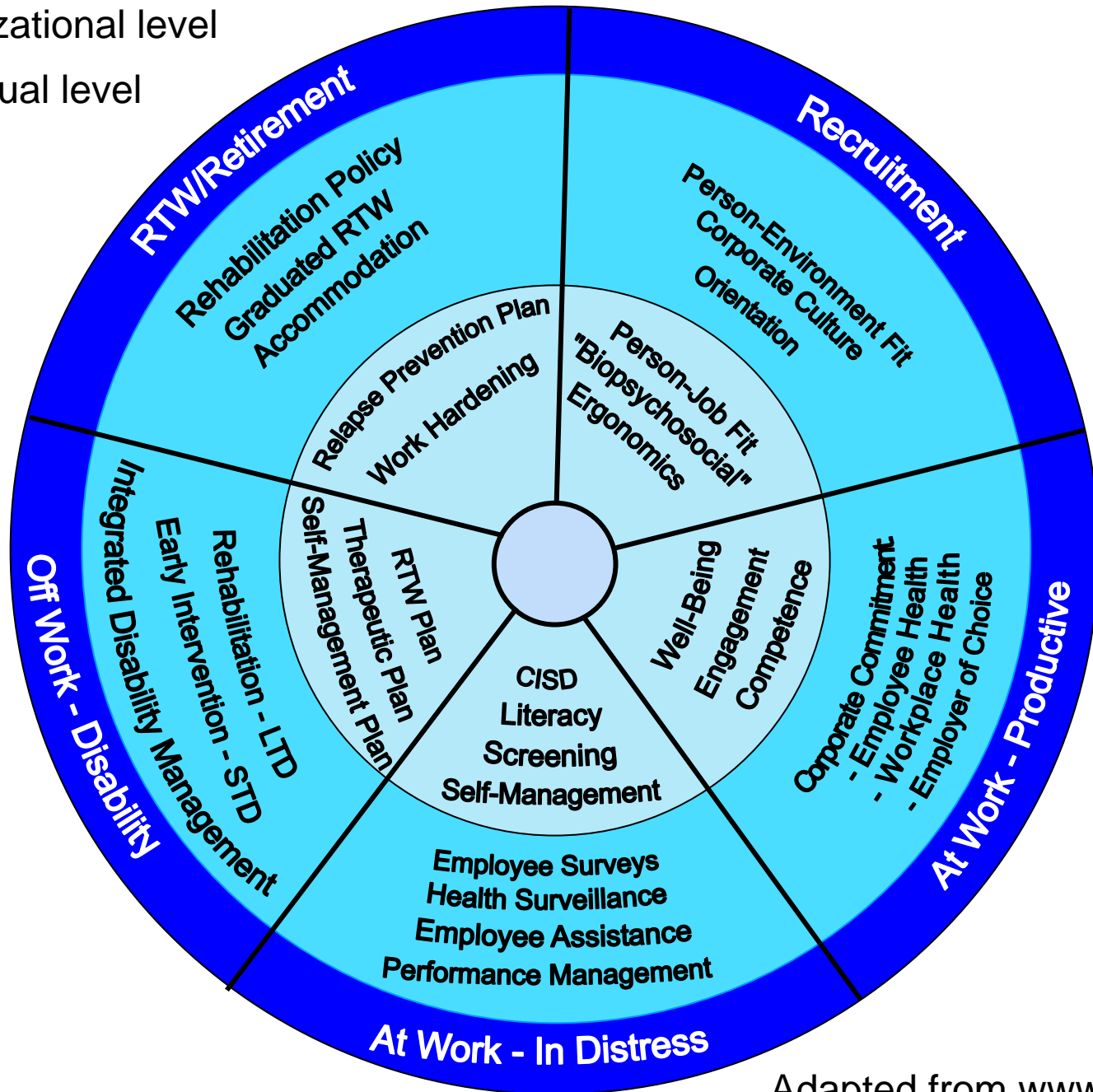
## Early Intervention

- Performance management
- Medical surveillance
- EAP depression screening, assessment, referral  $\pm$  tmt.
- Self care program
- Acute and chronic stress management
- Early RTW program - Case management, practice guidelines, modified work
- Enhanced access to MHPs Preferred provider network, shared-care or IME
- Employee satisfaction surveys

## Disease/Disability Management

- Disability management - Case management, practice Guidelines, mental job analysis, functional capacity assessment, IME
- Task/job modification
- Vocational rehabilitation
- Preferred provider network or shared-care to increase access to MHPs
- Relapse (RTD) prevention
- LTD depression screening
- Program Evaluation (CQI) Trend & economic analysis
- Research

- Organizational level
- Individual level



# Barriers to Putting Research into Practice

- ❑ Competing priorities
  - health of patients vs employees
  - health and productivity framework
- ❑ Lack of integration – HR and OHS
- ❑ Mental health literacy and stigma
- ❑ Traditional views – chronic diseases not work-related
- ❑ Insufficient employee health data
- ❑ Turnover of stakeholders
- ❑ Timeframes – operations vs research

