

Evaluation report – executive summary

October 2016



A new
approach to
line manager
mental well-being
training in banks



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Executive summary

For many organisations there is now an overwhelmingly convincing argument that healthy workers are also more effective in delivering business outcomes, with employers developing workplace interventions to prevent ill health and promote well-being of their staff. Within this agenda, mental health is of particular focus for organisations, as one in four individuals in the UK will experience a mental health problem each year,¹ which may result in short-term and long-term absence from work, as well as some loss of productivity. The economic turbulence and uncertainty of the recent past have put a spotlight on the issue in the financial services industry, recognised as a sector in which employees are likely to experience high levels of work-related stress.

Bank Workers Charity and Mind mental well-being training pilot

To support the improvement of mental health of workers in financial services in the UK, the Bank Workers Charity and Mind have developed a 12-month line manager training programme, consisting of two pre-recorded training sessions, 12 webinars and access to a digital toolkit and resources on mental health management. The programme aimed to increase participants' awareness of the signs of low mental health in their teams and their ability to support staff appropriately. As line managers are

known to have critical influence on the quality of work experience of their direct reports,² improvement in managers' behaviours was expected to have a positive contribution to their direct reports' mental health levels.

Measuring impact: evaluating the effectiveness of the programme

The CIPD was commissioned by the Bank Workers Charity and Mind to conduct an independent evaluation of the impact of the course, piloted in four UK-based retail banks from 2014 to 2016. The training was offered primarily to managers working in call centres, as this type of environment has previously been linked to a high incidence of poor mental health and work-related stress by the Bank Workers Charity. A sample of line managers also participated from a non-retail bank setting. In each participating organisation we conducted pre- and post-training surveys and focus groups with managers participating in the training and their direct reports.

During the evaluation, managers were asked to provide self-assessments of their ability to recognise signs of poor mental health and to respond appropriately. Their responses were then qualified by direct reports' assessment of their managers' attitudes and behaviours. Additionally, we asked the direct reports to reflect on their levels of

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¹ MIND. (2016) *Mind key statistics*. Available at: <http://www.mind.org.uk/information-support/types-of-mental-health-problems/statistics-and-facts-about-mental-health/how-common-are-mental-health-problems/> [Accessed 13 June 2016].

² BUPA. (2013) *Bupa healthy minds survey: 2013*. Available at: <http://www.hrreview.co.uk/hr-news/well-being/well-being-news/managers-too-stressed-to-support-junior-staff-with-their-stress/49654> [Accessed 13 June 2016].

job satisfaction, mental health and the wider organisational culture, to test whether changes in managers' behaviours were associated with changes in employees' experiences at work. To separate the impact of the training course from any changes that may have happened in organisations over the course of the pilot, we compared the responses of trained managers and their direct reports with the responses of a 'control group' of colleagues who did not participate in the training.

Impact of the training on managers' attitudes and behaviours

Managers' ability to deal with low levels of mental health was measured both through managers' own accounts, as well as through the feedback from their direct reports.

The evaluation found that at the end of the course, managers were better at spotting the signs of poor mental health (Figure 1), and clearer on their

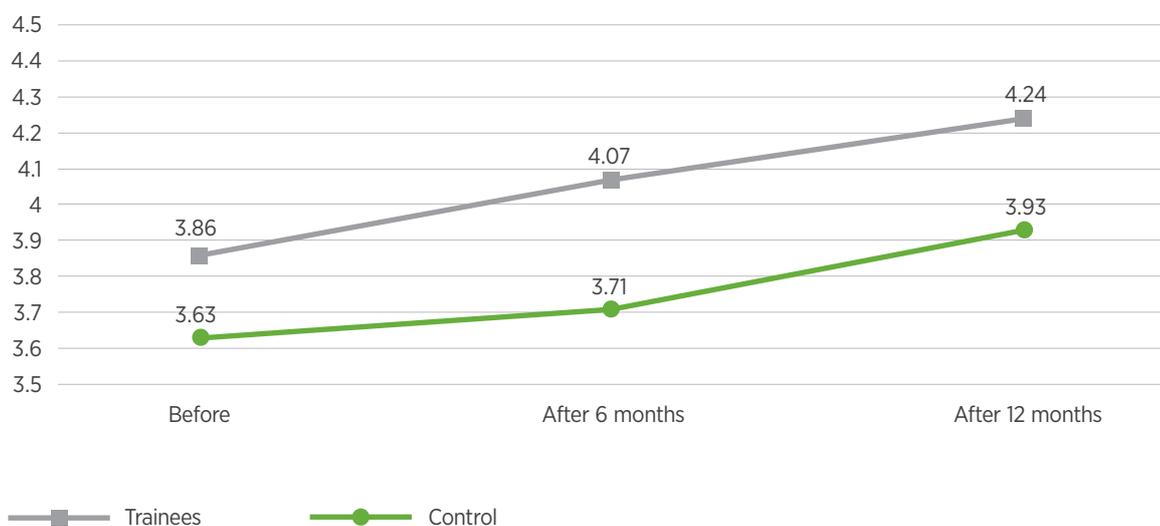
responsibilities concerning employees' mental health in the workplace. Additionally, we observed an improvement in trained managers' knowledge of dealing with poor mental health in the first six months of the course, compared with no change in the control group. These findings were confirmed by the direct reports of trained managers, who reported a modest but positive increase in their managers' ability to deal with poor mental health, and were more comfortable speaking to their manager about mental health issues after six months of the programme. Positive changes in line management quality in the trained group indicate that the training course is fit to reach its objectives in the first six months of the programme.

In an interview, one participating manager explained that as a result of the training, colleagues were more aware of the issues and were making an effort to spot signs of poor mental health:

'As a result of the training, any time that you talk about mental health, it makes people stop and think about how they view mental health, and how they deal with issues. I think [the training has] promoted more of an awareness and an understanding.'

However, the differences between the trained and control groups disappeared towards the end of the programme. This may be associated with a number of factors, including the length of the course and higher manager dropout rates from the study in the second half of the year, low visibility of manager capability in mental health management to some of the direct reports, as well as knowledge-sharing between the trained and control manager groups. It is possible that the course may have a longer-term positive impact on the quality of line management beyond the initial six months, if these factors are addressed.

Figure 1: Awareness of signs of poor mental health (average scores, self-reported by managers on a 5-point scale)



‘We are very pleased to have taken part in the pilot training. The research findings have helped us better understand the positive impact that mental health training can have for managers and their teams, and how we can get it right. We hope our participation in the study will benefit others who are looking to deliver training in this area.’

Lisa Mayocchi, Wellbeing Lead, Bank of England

‘We found that attitudes towards mental health problems were improving in participating organisations, with the reported levels of mental-health-related discrimination on the decline.’

Impact of the training on employees’ experiences at work

As quality of line management can have both positive and negative impact on employees’ experiences at work, the evaluation also considered employees’ perceptions of their jobs and the work environment, levels of self-reported mental health, and overall attitudes to mental health in participating organisations.

We found that attitudes towards mental health problems were improving in participating organisations, with the reported levels of mental-health-related discrimination on the decline (Figure 2). Additionally, employees of trained managers were more likely to access help for mental health problems, if required, and were more comfortable talking to their line managers about mental health. Such open conversations are encouraging, as they can facilitate earlier intervention for mental health problems.

Improvement in managers’ ability to deal with poor mental health was further associated with positive changes in employees’ ability to discuss mental health openly, their perceptions of their jobs, and higher levels of self-reported mental health at work. These findings confirm the critical influence that line managers have on the attitudes of their teams. Evidently, despite working in the same bank, employees’ experience of the organisational environment differed, depending on how skilled their line manager was in dealing with poor mental health problems.

At the end of the pilot programme, teams commented more positively on the overall approach of their organisations, supported and stimulated by the attention to the issue brought about by the training:

‘The sentiment of a colleague being at the heart of everything we do is even stronger now than it was when we started this pilot.’

Figure 2: Attitudes to mental health in participating organisations (%)



I know the pilot is geared towards mental health, but the whole colleague health and well-being strategy is strengthened right across the bank.'

At the same time, the study found that there were no changes in employees' absence levels, presenteeism, and employee turnover intentions that could be directly linked to the quality of line management.

Managers' experience of the face-to-face training and e-learning modules

This evaluation found high levels of learners' satisfaction with the course. Almost all (99%) managers agreed or strongly agreed that their knowledge of mental health has increased as a result of the training, and that the session was useful in terms of their work needs. Additionally, seven out of ten participants thought the trainer was 'excellent', and the remaining managers said he was 'very good' or 'good'.

Similarly, 98% of managers agreed or strongly agreed that the content of the online modules was relevant to their role. Minor revisions to the content and length of the modules were suggested by those taking part in the focus groups. Nearly nine in ten were able to apply the lessons from the online training in their day-to-day jobs, although some have still expressed preference towards face-to-face sessions for learning about mental health management. Some dropout from online module participation was noted towards the end of the programme, which may be associated with the course being spread over 12 months.

One line manager believed that the very presence of the training programme, presenting an opportunity to learn about mental health, was a positive indicator of the topic moving out of the realm of taboo and being discussed more openly:

'I think it is a really good starting point ... the fact there are speakers and it is being talked about for me feels like this barrier between it being talked about and being embedded [is going]. It is a great start, but there is more to do.'

Overall, the combination of face-to-face and online training was effective for most managers, with 87% saying they would recommend the face-to-face session to others, and 85% saying the same about the online modules at the end of the programme. This feedback on the course is encouraging, as positive learning experiences can engage participants with the content of the course, and support putting new knowledge into practice.

Recommendations

Across the participating organisations, the pilot course has made a clear positive contribution to line managers' ability to deal with poor mental health and direct reports' experiences at work. Furthermore, in some instances, the course itself acted as a stimulus for starting wider conversations about workplace well-being, raising debates about the quality of current provision, as well as the role and importance of senior leadership in the well-being and mental health debate. These findings point to the value of investment in line manager

training for improving workforce mental health and preventing mental health problems.

The evaluation highlighted several specific strengths of how the pilot training programme was organised. These were:

- delivery of the face-to-face training by an expert, and ability to discuss real-life scenarios about managing poor mental health in the workplace
- practical information incorporated in face-to-face and online elements of the course
- bespoke elements focusing on organisation-specific policies and support pathways delivered as part of the training
- alignment of the training with wider organisational well-being initiatives.

There are clear opportunities to improve the programme further by addressing some concerns of participating line managers, and refining the key learning outcomes following the conclusion of the pilot. In light of the findings of this study, we believe there are a number of ways that the strengths of the programme can be built upon, through alterations to its design and some aspects of the content.

‘We want every TSB Partner to feel healthy and well. That means both physically and mentally. The training provided to our line managers through the mental health line manager development initiative gave us a great opportunity to really focus on supporting our line managers to better understand the issues relating to mental health problems and equipping them with the skills to identify and support anyone with their mental health wellbeing. The results of this training have helped TSB understand the added effectiveness of dealing with mental health in the workplace in a pro-active way and will shape our future approach in this space. This pioneering initiative for TSB has supported our aim in promoting positive culture change in the banking sector.’

Catherine Diamond, Culture and Engagement, TSB

Recommendation 1 – Encourage peer-to-peer learning through mental health ‘champions’ and lesson-sharing

Line managers recommended that the programme should include a greater element of peer-to-peer learning, by creating opportunities to share best practice. These sessions could focus specifically on the live issues relevant to the type of job roles performed by employees and organisational culture – for example, developing practical solutions for dealing with stress in high-performance environments and in call centre settings. There was strong consensus from participants that the face-to-face sessions of the pilot provided a unique opportunity to explore and discuss mental health issues with colleagues. Reconfiguring the format of the course and elements of content to include more peer-to-peer learning sessions may, therefore, increase the impact of the intervention.

Recommendation 2 – Widen participation across the banks

It was clear from the evaluation that line managers were experiencing positive change in their awareness of mental health issues in the workplace and their ability to deal with poor mental health as a result of the pilot. A logical build on this is to widen participation within the banks beyond the areas targeted in the pilot, in order to provide the same standard of mental health management across the organisation. This could also be aligned with other organisational initiatives in the well-being area.

Recommendation 3 – Update course format based on trainees’ experiences

We found that the combination of face-to-face and online learning fit the needs of line managers, but several specific aspects of the e-learning programme could be improved. We recommend that the training is split into smaller-sized modules, which managers would be able to access on a more frequent basis, depending on the particular issue they are dealing with at that moment. This could also contribute to a more condensed learning experience, preventing learning fatigue and participant dropout. A further build on the e-learning programme would be additional face-to-face sessions to help to embed the learning, for example, at the halfway point and at the end of the course.

Recommendation 4 – Adapt content to help raise awareness of mental health issues among employees without managerial responsibilities

The next iteration of the pilot should look to improve the awareness of mental health issues and ability to cope with mental health problems, not just among line managers, but their teams as well. While some of the direct reports in the pilot reported greater ability to cope with poor mental health, the degree of impact was low. This is to be expected given that the current intervention focused specifically on line manager behaviours and attitudes, and did not include content or resources tailored for teams. In the future the training could provide additional resources for line managers to hold meetings about workplace mental health with their teams, for example, or encourage line managers to share existing content with their direct reports more explicitly.

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About this report

This is the report of an independent evaluation commissioned by the Bank Workers Charity and Mind into the mental health training pilots in financial services developed and delivered in collaboration with Mind. The report was authored by Dr Ksenia Zheltoukhova and Edward Houghton, Research Advisers at the CIPD.

This work is the culmination of a two-and-a-half-year investigation into the impact and efficacy of the training pilots in the UK banking sector, and was developed with the help of many experts and practitioners at BWC, Mind, and across the participating UK banks. The authors would particularly like to thank the many focus group and survey participants who shared

their highly personal and unique experiences so openly with the evaluation team, without whom this research could not have been conducted.

Participating banks

The following banks participated in the pilot study:

- Barclays
- Lloyds Banking Group
- TSB
- The Bank of England



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