Mental Health Tick Assessment Submission

**Notes on completion**

This accreditation is focussed on your employees, volunteers, apprentices, interns and contractors. Depending on your situation, it may also potentially include clients/service users/students, however be aware that this is not the primary focus.

Submissions are assessed based on the response on the Assessment Submission form and the submitted evidence. In addition, the assessor may conduct interviews with individuals from across the organisation. The overall outcome will be based on where the majority of judgements sit. This process is internally verified by the Mental Health Tick in accordance with our Assessment and Verification Policy before the final outcome is confirmed.

The Mental Health Tick Action Plan (<https://mentalhealthtick.com/wp-content/uploads/Optional-Mental-Health-Tick-Action-Plan.docx>) or the NICE Quality standard service improvement template can help to track the qualitative and quantitative evidence of impact of strategy and can be submitted as evidence towards this assessment.

Please rate each criterion against how well you think you are meeting the organisational standards (Bronze, Silver, Gold). Please see the organisational standards and evidence suggestions at <https://mentalhealthtick.com/wp-content/uploads/Mental-Health-Organisational-Standards.pdf>

# Awareness

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| **Standard** | **Response** | **Evidence submitted** | **Self-assessment rating** |
| 1.1 There is a written strategy, based on a clear ethical and value-based statement, for mental health and wellbeing across the organisation being implemented. |  |  |  |
| 1.2 The organisation delivers the strategy through a systematic process involving a continuous improvement cycle, including in response to the ongoing impact of the pandemic. |  |  |  |
| 1.3 Mental wellbeing is an integral part of the health and safety of the organisation, including in post-pandemic safety measures. |  |  |  |
| 1.4 Leaders and managers recognise the impact of mental health and wellbeing for their team(s) and their organisation. |  |  |  |
| 1.5 Individuals recognise their own mental state and feel safe to express or use strategies to deal with negative states. |  |  |  |
| 1.6 Mental health and wellbeing is monitored across the organisation, including the impact of initiatives, resources, training and services. |  |  |  |

# Culture

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| **Standard** | **Response** | **Evidence submitted** | **Self-assessment rating** |
| 2.1 There is a designated leader, coordinator or coordinating committee for mental health and wellbeing, supported by champions and managers across the organisation (for smaller organisations the leader may be supported with external advice or support). |  |  |  |
| 2.2 The mental health and wellbeing strategy is referenced and embedded in other key organisational policies and procedures, such as whistleblowing, diversity, bullying and harassment or equality. |  |  |  |
| 2.3 Mental health and wellbeing initiatives are based on evidence and developed with a business case to make it sustainable if effective, outcomes are measured and monitored. |  |  |  |
| 2.4 Staff at all levels and in all circumstances are engaged in the development, deployment and monitoring of the mental health and wellbeing strategy, including unions, or minority groups, such as ethnicity groups, LGBT+, low-paid and contractors. |  |  |  |
| 2.5 Leaders and managers recognise their role in supporting the wellbeing of all employees (including minority groups, home workers and those affected by the pandemic). |  |  |  |
| 2.6 Operational policies and procedures reflect the importance of mental health and wellbeing for individuals and the organisation (e.g. response, return and recovery phases of the pandemic). |  |  |  |
| 2.7 Community, national or international mental health and wellbeing events are seen as part of a year-round cycle or a celebration of the organisation’s commitment, rather than a one-off awareness event. |  |  |  |

# Training and Development

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| **Standard** | **Response** | **Evidence submitted** | **Self-assessment rating** |
| 3.1 A range of training, resources and services is available for staff at universal, individual self-help and targeted support levels, including access to Employee Assistance Programmes (EAP) and Occupational Health as relevant. |  |  |  |
| 3.2 Training, resources and services are provided on the basis of an evidence base and the effectiveness monitored. |  |  |  |
| 3.3 Universal provision at a minimum includes awareness training of mental health difficulties, stress and emotional skills/coping. |  |  |  |
| 3.4 Training and resources cover topics designed to address stigmas and prejudice around mental health, such as discrimination or unconscious bias training.  |  |  |  |
| 3.5 Leaders and managers receive training covering supporting mental health difficulties, the wellbeing of individuals, stress risk assessment and their leadership/management styles. |  |  |  |
| 3.6 Roles across the organisation are screened for high levels of stress and those identified are then risk assessed and supportive mechanisms put in place, including supervision as appropriate.  |  |  |  |

# Interviews

We will provide you with a link to a web-based form for staff, volunteers and contractors to be able to volunteer to be interviewed. This must be shared internally and we will randomly select an appropriate number of interviewees depending on the size of your organisation.