



Mental Health in the Workplace

Available information and information gaps

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- Risk identification and integrated reporting
- Absenteeism monitoring and management
- Health Assessments
- Extended sick leave applications
- Case Management
- Incapacity management
- Employment Equity assessments
- Disability sensitization and awareness
- Disability assessments
- Integrated Wellness Reporting

The Impact of Mental Health Issues on the Individual in the Workplace



Increased absenteeism, late-coming & longer breaks



Decline in Productivity



Lowered Concentration



Conflict in the workplace & erratic behaviour



Not meeting deadlines & targets



Workplace incidents & accidents

Availability of information

Data source structure	Source of information	<ul style="list-style-type: none">▪ Leave modules of the payroll system<ul style="list-style-type: none">• Leave modules not always integrated with payroll system – absenteeism reports may not be updated▪ Medical Aid claims data▪ Incapacity and Disability data▪ IOD data▪ Occupational Health Data▪ EAP data
Sick leave	1st 36 days – don't need to disclose diagnosis	<ul style="list-style-type: none">▪ Causes of absenteeism not known▪ No consent to do medical investigation▪ Doctors willing to disclose with consent as part of extended sick leave
Extended sick leave is not a right	1st 36 days – don't need to disclose diagnosis	<ul style="list-style-type: none">▪ Need to comply with policy conditions▪ Consent from employees▪ Can be declined after investigations
High level of under reporting		<ul style="list-style-type: none">▪ Not captured on system▪ On line system not used
		<ul style="list-style-type: none">▪ Readiness of Employee to disclose Mental Health condition is compromised

Mental health & stigma in the workplace - SADAG

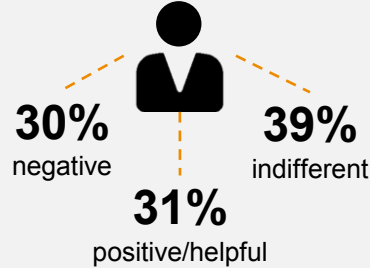
59%
aged 31-50



2 in 3 Disclosed their mental health condition to a co-worker

61% Disclosed to a manager supervisor

Manager's response to disclosure



Having a mental illness affects my:

Relationship	74%
Work performance:	72%
Capability:	49%
Leave day ¹ :	42%
Promotions:	33%

Treatment by a psychiatrist or a psychologist



16% none
13% psychologist

25% psychiatrist
46% both



I don't know of any colleague fired due to their Mental Illness

19% I fear being discriminated against if I disclose my Mental Illness

40% depression

21% bipolar

16% anxiety

Accessed company EAP services

46% NO

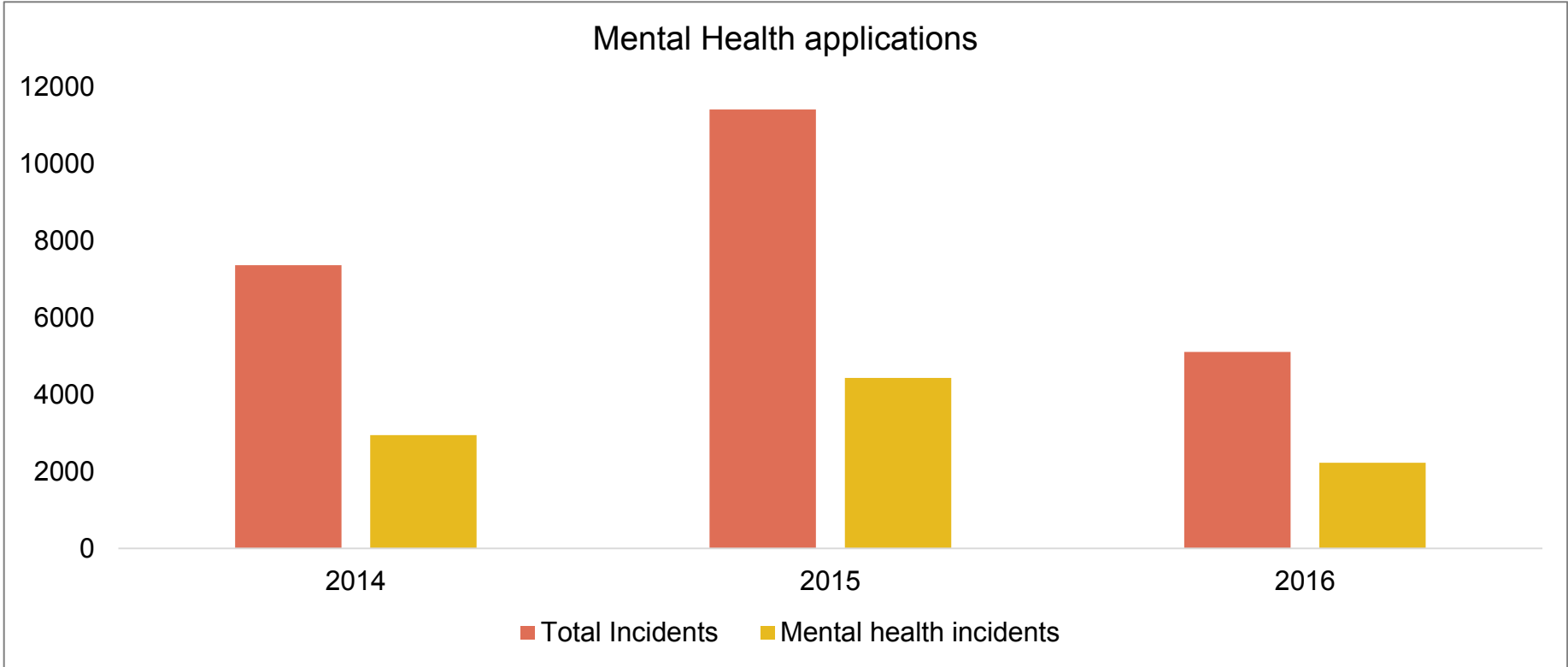
21% YES

33% I don't know about my company EAP

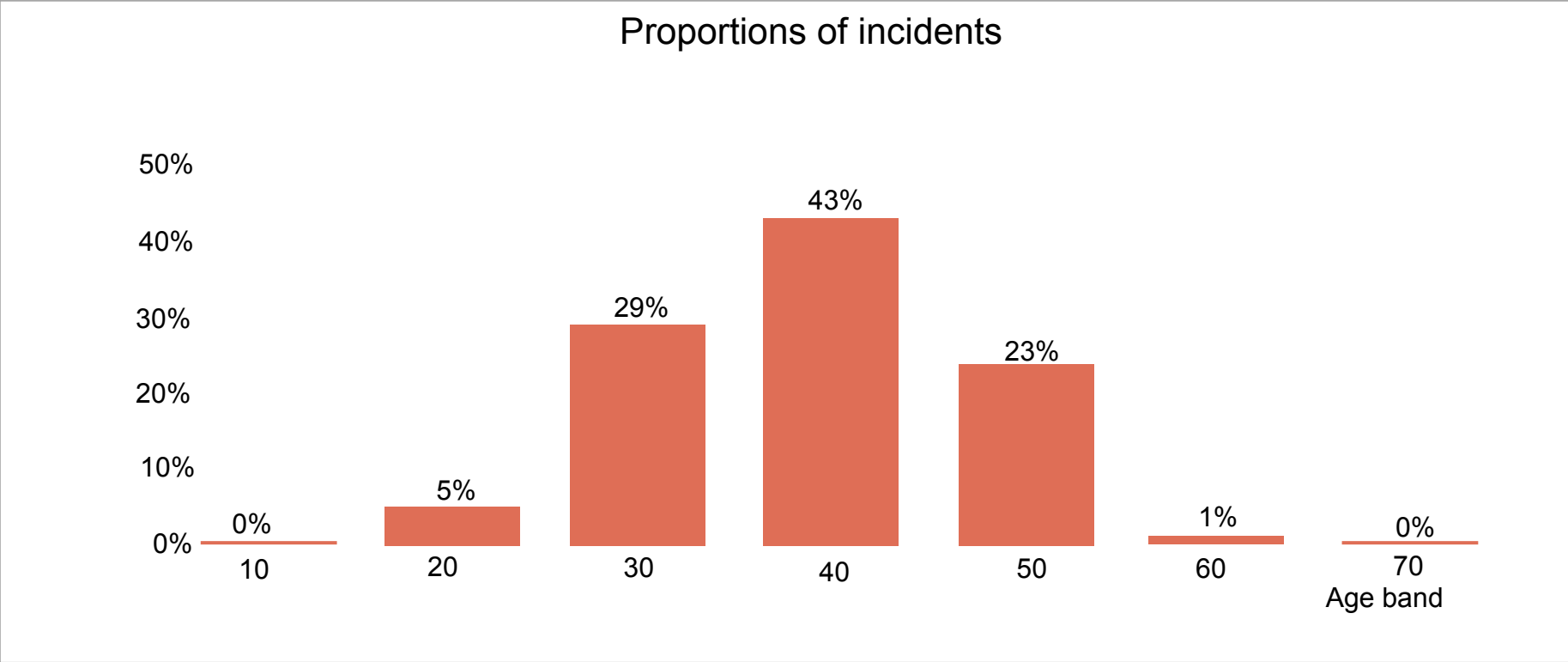


Statistics

Mental Health Conditions vs all applications – Client A

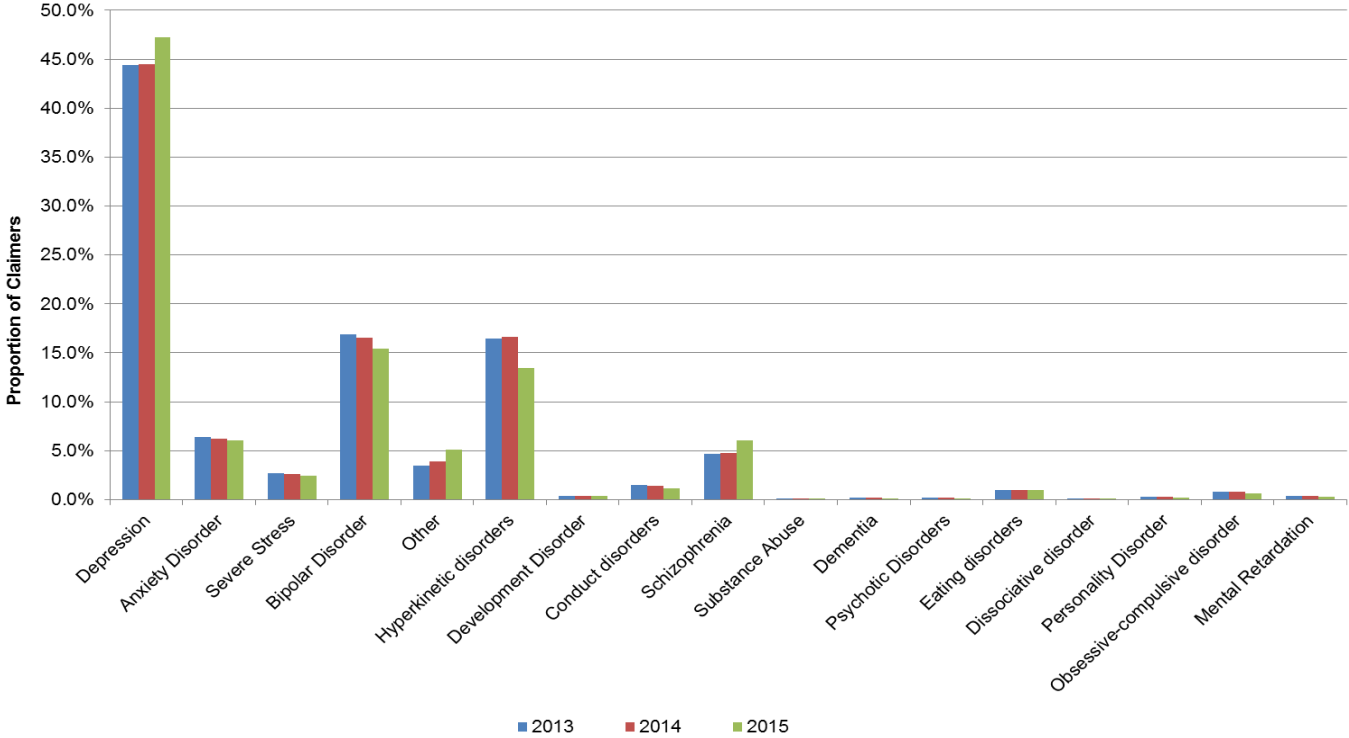


Age bands



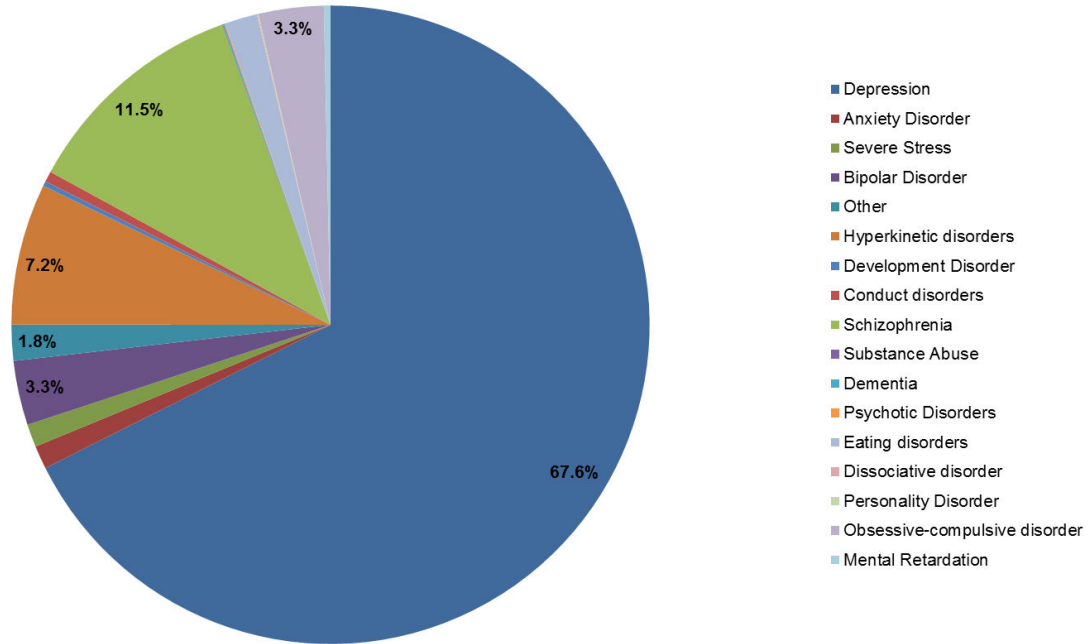
Claiming trends – Client B (medical aid benefits)

Proportion of Claimers by Condition



Cost split

Proportion of Claims Paid in 2015 by Condition



Analysis of applications for Client C (incapacity and Ill Health Leave)

- Incidence of ICD code diagnosis for Mental & Behavioral conditions = 3 622 of 22 406 applications
- Conservative incidence of 16%

Type of application	Number of incidences	Percentage
SPTIL	2 334	64.0%
LPTIL	1 164	32.0%
IH	124	3.4%

Mental & Behavioral conditions – Client C

- Gender profile of population

Gender	Number of applications	Ave duration per application (days)
Male	869	19
Female	2758	18

- Recommendations for SPTIL and LPTIL

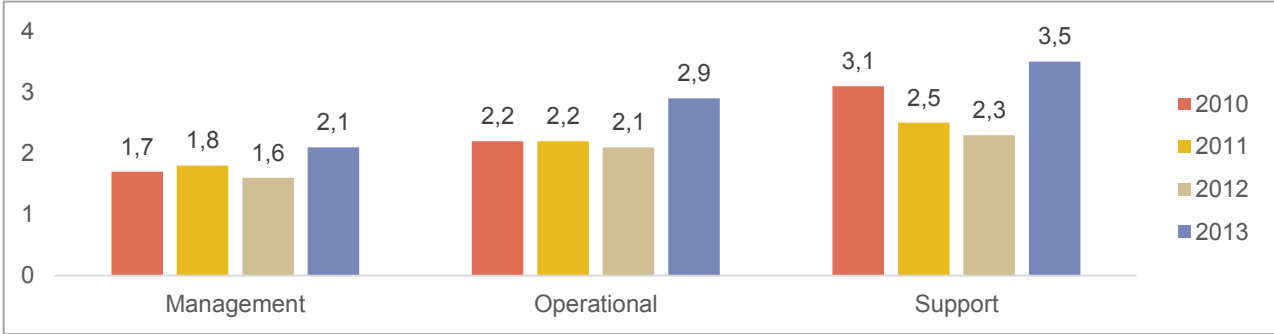
Outcome	Total number of days	Percentage
Approved	39 276	61.4
Declined	24 614	38.6
Total	63 890	100

Absenteeism and presentism costs within Client C

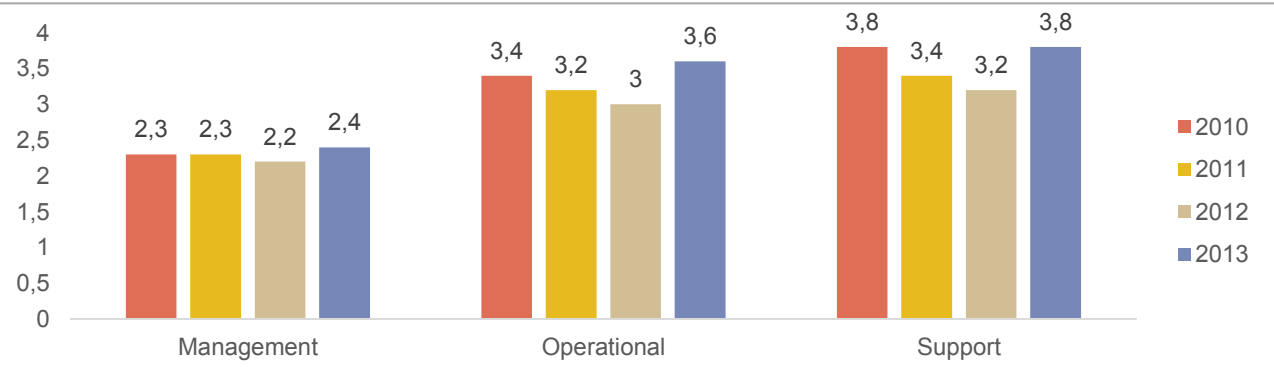
Sick absenteeism rate	2.5%	Under-reported
Short period incapacity leave	R99 million	(2012 – 2015)
Long period incapacity leave	R216.7 million	(2012 – 2015)
Ill health retirement*	17 661	Productive years lost
Estimated presentism	R12.3 billion	

Absenteeism data analysis

Sick Absenteeism Rate

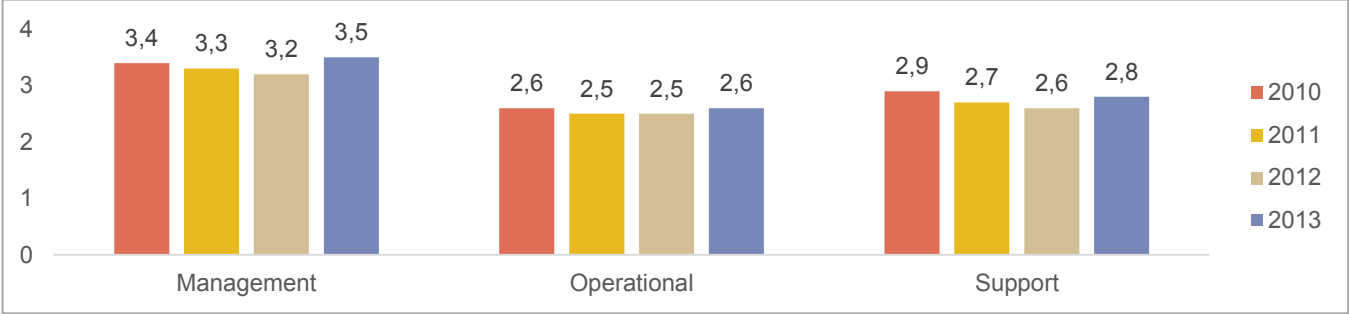


Absenteeism Frequency Rate

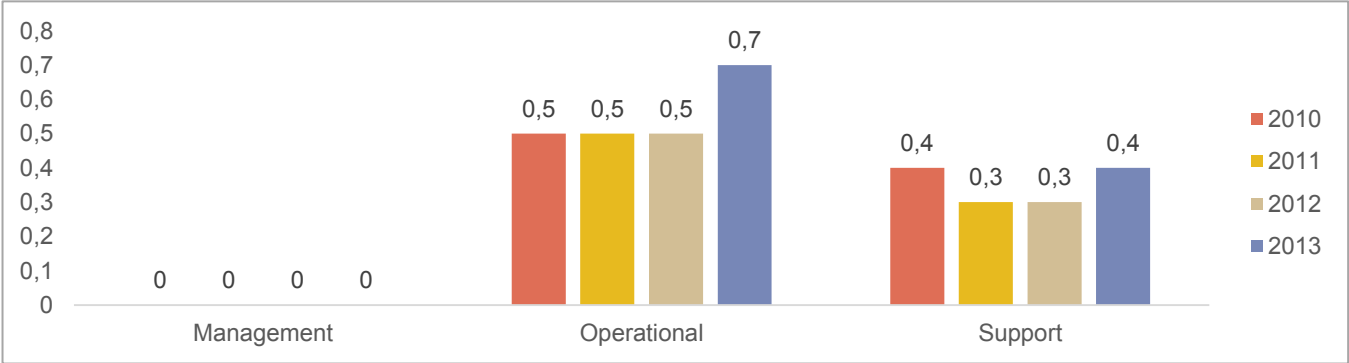


Absenteeism data analysis

Absenteeism Severity Rate



Cost of absenteeism (R'billion)



Identified risks: Incapacity leave (2012 – 2015)

Top three diagnoses for *short period* applications:

1. Mental and behavioural (1898 applications)
2. Musculoskeletal (1804 applications)
3. Respiratory (1544 applications)

Top three diagnoses for *long period* applications :

1. Mental and behavioural (796 applications)
2. Musculoskeletal (763 applications)
3. Injury (592 applications)

Identified risks: Ill health retirement (2012 – 2015)

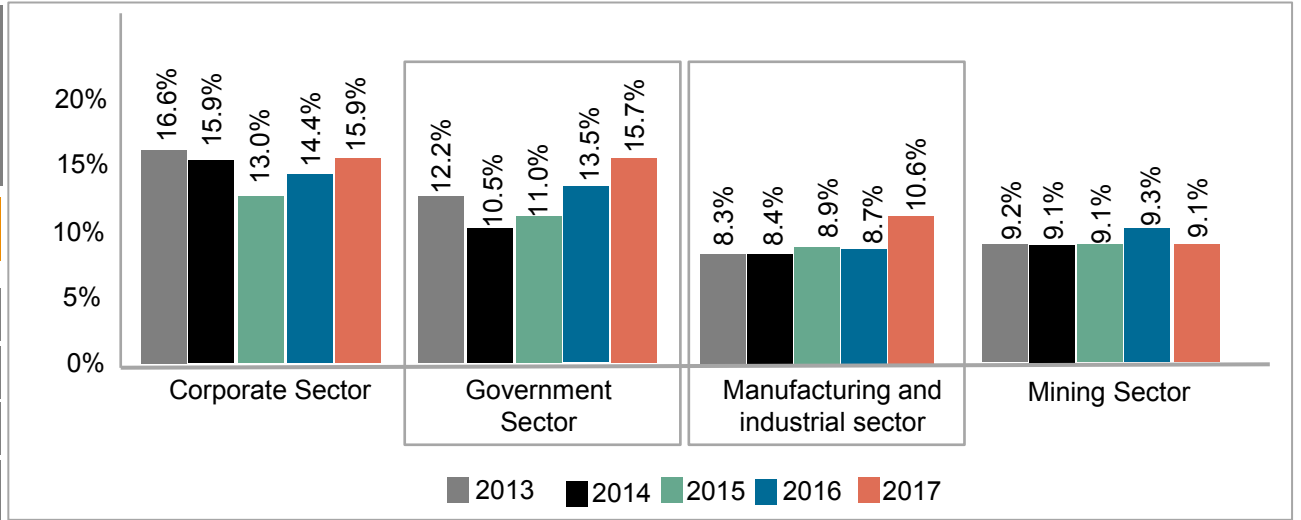
Top three diagnoses for *ill health retirement* applications:

1. Mental and behavioural
2. Musculoskeletal
3. Infectious diseases

Sector Comparison - EAP

Sector analysis mental health issues % of annual problems per sector

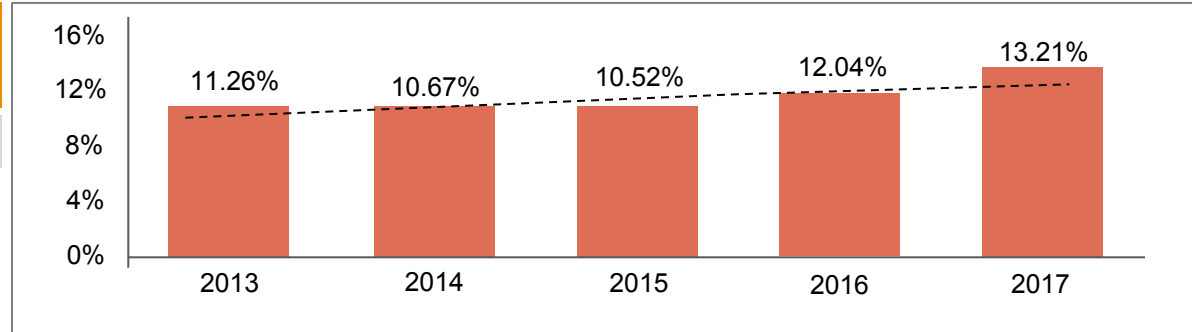
Sector	2013 – 2017 % of total problems
Corporate	15.02%
Government	12.92%
Mining	9.17%
Manufacturing and industrial	8.99%



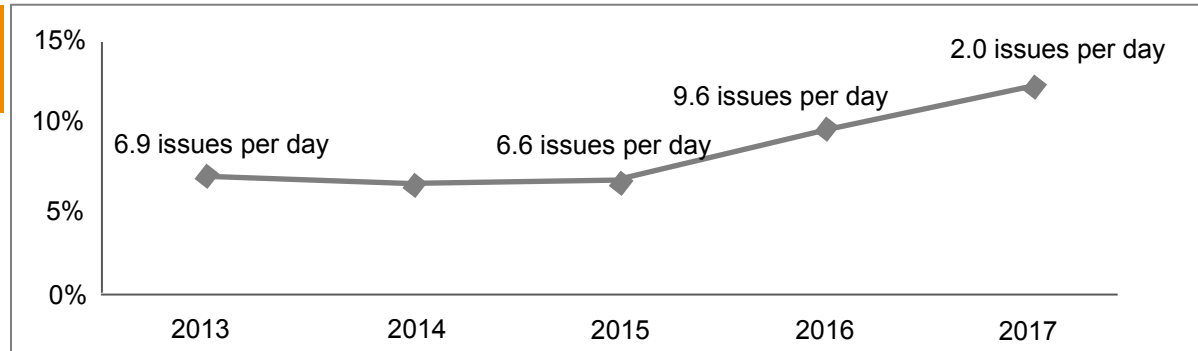
Mental Health Issues over time - EAP

2013-2017, Presentation of mental health issues over time

% of annual cases presented to EAP provider



Average no. of mental health issues reported per day



Future...

- Time to embrace open conversations about mental illness
- Effective policies
 - 3 pronged approach
 - Promoting wellbeing for all staff
 - Tackling the causes of work-related mental health problems
- Supporting staff who are experiencing mental health issues.
- Actively manage and monitor sick leave / absenteeism in the workplace within the 1st 36 days – cannot wait until extended sick leave
- Direct and indirect link between financial stress and its impact on mental health which needs to be managed in the workplace
- Need an integrated data management approach to manage mental illness in the workplace
- Business case: Improved health of the workforce results in lower absenteeism, higher productivity, and overall reduction in costs

Interventions



Thank you