Safe Families Individual Wellbeing Plan

**Please note that each question is optional to answer. If you would like to skip to the next question, please do say.**

**Introduction**

* It is important to thank your team member for sharing with you and acknowledging that this may be a difficult thing for them to do.
* Confidentiality & safeguarding statement.

1. How are you feeling currently? If they cannot articulate how they might be feeling, please reassure the individual that there is scoring on the next question which might help them to communicate how they feel.

**Establishing current and past scores**

1. How would you score your mental health and wellbeing from the scale below?

|  |  |
| --- | --- |
| 10/10 – All time lifetime peak form | 5/10 – Low mood |
| 9/10 – Exceptional form | 4/10 - Very low mood |
| 8/10 – Very good form | 3/10 – Extremely low mood |
| 7/10 – Decent form | 2/10 – I am struggling and I need help |
| 6/10 – Average form | 1/10 – Crisis, please reach out to me |

|  |  |  |
| --- | --- | --- |
| At this moment: | The last week: | The last month: |
|  |  |  |

1. In terms of pressure or stress, how would you score those levels for yourself on the scale below?

|  |  |
| --- | --- |
| 10/10 – Extreme levels of pressure or stress | 5/10 – Low levels of pressure/stress |
| 9/10 – Extreme levels of pressure/stress most of the time | 4/10 - Very low levels of pressure/stress |
| 8/10 – Moderate levels of pressure/stress, all of the time | 3/10 – Extremely low levels of pressure/ stress |
| 7/10 – Moderate levels of pressure/stress, most of the time | 2/10 – Hardly any pressure/stress |
| 6/10 – Average levels pressure/ stress, sometimes stressed sometimes less stressed. | 1/10 – No stress or pressure |

|  |  |  |
| --- | --- | --- |
| At this moment: | The last week: | The last month: |
|  |  |  |

**Mental Health At Work**

1. Are there any situations at work that can trigger poor mental health and wellbeing for you? (E.g. conflict at work, organisational change, tight deadlines, something not going to plan, stress).
2. Has there been any warning signs that you have noticed prior to how you are feeling now? (E.g. changes in normal working patterns, withdrawing from colleagues, physical signs such as; ulcers, disrupted sleep or lack of appetite).
3. If we notice early signs – how can we best help you? (E.g. talk to you discreetly about it, contact someone you would like us to).

**Establishing protective factors**

1. Who are the people in your world who you would be comfortable to share how you are feeling with? (This could be inside and outside of work – such as friends, family, co-workers, a counsellor).
2. Are you currently accessing any help or support for your mental health and wellbeing? (This could be counselling, speaking with a friend from church regularly or someone at work).
3. Is there anything in your routine that has previously made you feel better when you are going through difficult circumstances? (This could be talking to a friend, family member, journaling, exercising).
4. Are there any areas of your home life or work life that you would like to talk about? (Please reassure the individual that they do not have to share anything they do not wish to).

**Action Plan**

1. Is there anything in terms of your work life that we can support you in? (such as reasonable adjustments like: flexible working, regular catch ups?)
2. Is there anything else you think would be beneficial for you at this time? (Suggestions could be: Would you be happy to reach out to our EAP for counselling? provide information about the different types of counselling – CBT, EMDR, trauma therapy & that you can have six sessions **per issue** not just altogether).
3. What can I do to help you to put this action plan in place? (Providing EAP details/ checking in on a set day.)

**Closing**

1. What could you do tonight/this week/weekend to create some space to look after yourself or have some time to process how you are feeling? (Suggestions could be; journalling, taking yourself for a coffee, having some time to listen to music or seeing a close friend).
2. Is there something is the last few weeks or days that has gone well because you were there/ had a part to play in the situation? (If the individual cannot answer this question, encourage them in their particular role what has really worked well and their input into either a family or situation).

**At the closing point:**

* It is important to thank your team member for sharing with you and for being open and honest about how they are feeling.
* Make sure to reassure them that their feelings are valid and heard.
* Close the conversation with how **you** will support them (look at their work schedule/workload or regular check ins).
* Then how they are going to proactively help **themselves** (contact the EAP/ take some time to see friends or have some space to themselves).
* Finally, agree to touch base in a week or two about how they are.

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| --- | --- |
| **Date:** |  |
| **Employee signature:** |  |
| **Line Manager Signature:** |  |
| **Date to be revisited:** |  |