NSW GOVERNMENT

Final evaluation of the NSW Mentally Healthy Workplaces Strategy 2018-2022

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URBIS

MENTALLY HEALTHY WORKPLACES STRATEGY 2018-2022

Final Evaluation

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SAFEWORK NSW
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ACRONYMS AND ABBREVIATIONS

Abbreviation	Description
BMT	Benchmarking Tool Survey
icare	Insurance and Care NSW
MHW	Mentally Healthy Workplaces
NSW	New South Wales
SIRA	State Insurance Regulatory Authority
The Strategy	The Mentally Healthy Workplaces Strategy

EXECUTIVE SUMMARY

CONTEXT

The NSW Mentally Healthy Workplaces Strategy (MHW Strategy, the Strategy) is the NSW government's response to addressing mental health in the workplace. Led by SafeWork NSW, the Strategy was developed in 2017-2018, and was delivered over a four-year period from 2018 to 2022. The Strategy's key objectives were to increase awareness and understanding of mentally healthy workplaces, increase capability of NSW employers to create mentally healthy workplaces, improve NSW workers' perception that their workplaces are safer and healthier, improve social connections within the workplace and community, to improve productivity through reduced absenteeism and presenteeism, to improve recovery at work outcomes, and provide employer cost savings.

The Strategy had four core streams: 1) Awareness Raising 2) Evidence-Informed Interventions 3) Research and 4) Building Employer Capability. Across its four streams, the Strategy had 20 projects, of which 14 were delivered by SafeWork NSW, and the remainder were delivered by the State Insurance Regulatory Authority (SIRA), icare, and the Centre for Work Health and Safety.

Urbis has been commissioned by SafeWork NSW to complete an evaluation of the Strategy. The evaluation focuses mainly on the 14 projects delivered by SafeWork NSW, however high-level findings relating to the projects being managed by SIRA and icare are also included. The evaluation had two main data collection and reporting periods: the Mid-Point Evaluation Report was delivered in late 2020. In response to the COVID-19 pandemic, the evaluation also provided high-level interim findings in August 2020.

This report contains the findings of the Final Evaluation as of November 2022.

METHODOLOGY

The methodology for the Final Evaluation included: a review of project data provided by SafeWork NSW; a review of available data from non-project data sources including the Mentally Healthy Workplaces Benchmarking Tool survey (BMT), data from SafeWork NSW Inspectors, Workers' Compensation Claims data; and in-depth interviews with stakeholders from SafeWork NSW, workplaces which had participated in Strategy activities, and key industry stakeholders. The findings from all data sources were then integrated to inform the evaluation findings.

It is likely that the Strategy will have ongoing impacts which are unable to be measured as part of this evaluation and it is recommended that SafeWork continue to track those impacts beyond the evaluation timeframe.

The Strategy evaluation does not specifically evaluate the performance of individual campaigns or initiatives.

KEY FINDINGS

Successful overall implementation with challenges used as opportunities for improvement	Implementation of the MHW Strategy was largely successful. There were some initial challenges and stressors due to the size and complexity of the Strategy, and the collaborative program delivery structure. Initial delays were used to improve and streamline delivery in later stages of the Strategy. A continuous improvement approach was taken with feedback being used to refine projects and optimise delivery throughout the Strategy.

The Strategy has demonstrated a broad reach across multiple sectors and workplace types.	Overall, the MHW Strategy met the overarching objective of having more than 90,000 NSW businesses taking effective action to create mentally healthy workplaces by 2022. Reach was variable across projects, with some exceeding reach goals and some projects underdelivering. While precise patterns of reach were not able to be determined using the available data, reach statistics from the individual projects suggest core messages and awareness was amplified by many of the initiatives across the Strategy, and that these activities had a significant, positive impact on reach.
The MHW Strategy has raised awareness and understanding of mental health at work for NSW employers and employees	Awareness raising was highlighted by multiple stakeholders as a key success of the Strategy. Levels of awareness and engagement reported employers and employees in the BMT have increased since Strategy commencement and this is consistent with descriptions of increased awareness and understanding of about how mental health applies to their workplace given by employers in in-depth interviews.
NSW employers have engaged with programs being offered under the strategy and have made lasting changes in their workplaces as a result of participation.	Employers have shown good levels of engagement with programs offered under the Strategy. The strongest engagement has been through businesses acting proactively to seek out supports and assistance. As such, there may be further opportunities to engage with businesses which are at high levels of risk. Employers specifically noted they were able to improve the mental health of their workplaces by reducing the organisational barriers to wellbeing and through addressing other factors (e.g., workload pressures, bullying) which have the potential to do harm.
Employers are more capable in creating mentally healthy workplaces	Multiple data sources provide evidence the Strategy has contributed to improvements in employer capability in creating mentally healthy workplaces. Employers report higher levels of confidence and legitimacy to implement workplace mental health supports for their workforce as a result of participating in programs funded under the Strategy. In addition, the BMT shows employers and employees across NSW are increasingly indicating their organisation has focused on ensuring that managers are approachable about mental health and wellbeing and are providing training on mental health risks and about warning signs in the workplace.

SUMMARY OF RECOMMENDATIONS FOR THE NEXT STRATEGY

- **Maintain the focus on evidence-based program development and practice** to support businesses accessing high quality training and support.
- **Extend the evidence-based approach to cover implementation** and project engagement approaches to increase the likelihood of embedding lasting change.
- Maintain a **human-centred design approach** that incorporates the input of those with **lived experience of mental health at work.**
- Narrow the focus from industry and occupation to **specific employer personas and deliver tailored projects** to their specific needs to increase Strategy impact.
- **Spend more time in project planning, including resource requirements, detailed schedules of work, milestones, and benefits/outcomes measurement planning** to minimise delivery risk and ensure evidence availability for strategic outcomes.
- Define **innovation as a pillar of the new strategy** and link it to the delivery measures.
- **Apply a business owner / executive lens** to engagement activities, communications, and tool outputs to increase adoption.
- **Showcase the application of the tools**. Share the workplace scenario, the tools applied and why they were chosen, what was happened after using the tools and the risk mitigation achieved.
- **Increase the focus on big business** in an effort to effect change within these organisations and to influence small, medium, and micro businesses.
- Consider adding **five strategic pillars into future strategies** including evidence-based, digital first, human-centred, measurable, and innovative.
- Improve **data collection and tracking** to better understand the customer journey and identify ways to measure referrals to provide greater insight into which initiatives are driving engagement, through which channel, and the outcomes of these.
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INTRODUCTION

BACKGROUND

Mental health is a significant challenge faced by workers and workplaces across Australia. The 2020 Productivity Commission inquiry found that the direct economic costs of mental ill-health and suicide in Australia are estimated to be up to $70 billion per year, comprising $15.5 billion in mental healthcare and related services expenditure, $15.3 billion in informal care provided by family and friends and $12 to $39 billion in lower economic participation and lost productivity.[1]

Workplace mental health can be impacted by individual psychosocial risks (e.g. job demands, control and insecurity, conflict and trauma, effort-reward imbalance, hours worked, etc.) and macro psychosocial risks (e.g. psychosocial safety climate, organisational culture, climate, or justice).[2] Non-workplace risk factors such as bereavement, relationship difficulties, parenting difficulties and other life events can interact with workplace risks and exacerbate or lead to mental illness.[3]

Alternatively, employment can be a source of autonomy and improved self-esteem for individuals, and lead to reductions in reported levels of common mental health issues; mentally healthy workplaces can be beneficial to the mental well-being of employees.[4]

Both in Australia and internationally, there is a move away from addressing psychosocial risks solely at the individual level and increasingly looking to the creation of mentally healthy workplaces with a stronger focus on prevention and early intervention rather than treatment.

STRATEGY OVERVIEW

In 2017, the NSW Government's vision was to ensure NSW workplaces take effective action to create mentally healthy workplaces to enable "healthy, safe and productive working lives".

SafeWork NSW (SafeWork) is the state workplace health and safety regulator for New South Wales (NSW). The primary aims of SafeWork are to protect against harm, reduce unnecessary compliance costs and secure safety standards.

SafeWork leads the government response to workplace mental health challenges and the NSW Mentally Healthy Workplaces Strategy 2018-2022 (the Strategy) is the NSW Government's first comprehensive approach to workplace mental health. Launched in June 2018, it sets out the NSW government's long-term vision to create mentally healthy workplaces across NSW. The Strategy was updated in May 2021 to reflect the challenges presented by the Covid-19 pandemic and in line with recommendations from a mid-point review. From inception, it was hoped that the Strategy would contribute to the Premier's Priority to reduce death by suicide through supporting workplace environments and making workplaces healthier, safer, and more productive (building a stronger economy).[5]

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[1] Australian Government Productivity Commission. (2020). Mental Health Productivity Commission Report – Overview and Recommendations. Retrieved from https://www.pc.gov.au/inquiries/completed/mental-health/report/mental-health-volume1.pdf

[2] SafeWork NSW. (2017). Mentally Healthy Workplaces in NSW – Discussion Paper. Retrieved from https://www.safework.nsw.gov.au/__data/assets/pdf_file/0012/320232/Mentally-healthy-workplaces-in-NSW-discussion-paperSeptember-2017-SW08615.pdf

[3] 3 Harvey SB, Joyce S, Tan L, et al. (2014). Developing a mentally healthy workplace: A review of the literature. Retrieved from https://www.blackdoginstitute.org.au/docs/default-source/research/creating-mentally-healthy-workplaces.pdf?sfvrsn=0

[4] Modini, M., Joyce, S., Mykletun, A., Christensen, H., Bryant, R. A., Mitchell, P. B., & Harvey, S. B. (2016). The mental health benefits of employment: Results of a systematic meta-review. Australasian Psychiatry, 24(4), 331-336

[5] NSW Government. (2017). NSW Mentally Healthy Workplaces Strategy 2018-22. Retrieved from https://www.safework.nsw.gov.au/__data/assets/pdf_file/0006/362274/NSW_mentallyhealthyworkplacesstrategy_2018_22.pdf

The Strategy supported and aligned with state and national mental health reforms including:

- Roadmap for National Mental Health Reform 2012 – 2022
- The National Workplace Mental Health Framework
- The NSW Mental Health Commission's Living Well: A strategic plan for mental health in NSW 2014 – 2024, and the NSW Mental Health Taskforce.

The Strategy also aligned with SafeWork's Work Health and Safety Roadmap for NSW 2022 (the Roadmap). The Roadmap is the blueprint for driving state-wide activities to improve work health and safety and is aimed at regulators, peak bodies, associations, community leaders, employers, and workers.

The Strategy was delivered through a portfolio of 20 projects managed in four workstreams:[6]

- Awareness raising – A campaign to raise awareness, motivate action, and provide practical support to enable employers to create mentally healthy workplaces.
- Evidence-informed interventions – Mental health interventions are chosen for their demonstrated effectiveness in improving mental health outcomes in the workplace, and their positive return on investment.
- Research – Initiatives, interventions, and decisions informed by evidence to improve workplace mental health.
- Building employer capability – Expert guidance, collaboration, recognition, and leading by example, to encourage and enable employers to build capability and take effective action.

A summary of projects under the Strategy and progress to date is included in Appendix A.

Initially, there were four high-risk industries targeted in the Strategy which were:

- Professional, scientific, and technical services
- Information media/telecommunications
- Transport, postal, and warehousing
- Manufacturing
- As the Strategy progressed, the unique needs of regional businesses became a priority.

Additionally, the Strategy focused on supporting small and micro-businesses in NSW to improve their workplace mental health, in view of the specific stressors and factors, these businesses experience. These include the business impact arising from workers needing to take sick leave for mental ill health, financial constraints, and limited time and resources available in small businesses to address mental health issues systematically.

The Strategy was a whole of government project with:

- funding partners – icare and the State Insurance Regulatory Authority (SIRA); and
- strategic partners – the NSW Ministry of Health, the Mental Health Commission of NSW, and BEING – Mental Health Consumers[7]

SafeWork was responsible for delivering the majority of the projects within the Strategy and coordination of the Strategy. Strategy partners icare and SIRA were responsible for delivering a smaller number of the projects, and three projects were delivered by the Centre for Work Health and Safety.

SafeWork also has collaborative partnerships with a range of workplace mental health experts and advocates, key influencers, and industry leaders including beyond blue, the Black Dog Institute, the University of Sydney, and WayAhead Workplaces.

[6] NSW Government. (2017). NSW Mentally Healthy Workplaces Strategy 2018-22. Retrieved from https://www.safework.nsw.gov.au/__data/assets/pdf_file/0006/362274/NSW_mentallyhealthyworkplacesstrategy_2018_22.pdf

[7] SafeWork NSW. (2020). A team effort. Retrieved from https://www.SafeWork.nsw.gov.au/safety-starts-here/mental-health-at-work-the-basics/mental-health-@-work/our-commitment/a-team-effort

The Strategy called for a human-centred design and delivery approach, that engaged the following stakeholders:

- people with lived experience
- at-risk workers
- employers
- unions
- industry-specific peak bodies
- small and micro business representatives
- mental health academics
- mental health advocates
- insurance regulators
- workers compensation insurers
- mental health and general practitioners, and
- other government organisations.

In addition to the representation of people with lived experience on the Advisory Board (through Being NSW), there was targeted inclusion of this cohort throughout strategy development and implementation. People with lived experience participated in human-centred design workshops as part of the Strategy development process, as well as during the stakeholder consultations for the Strategy refresh in 2021. People with lived experience were also represented in the development of the Regional Education project.

Strategy governance was established as follows: a Strategy Governance Program Board comprising Directors of SafeWork, SIRA, and icare reports to the Strategy Steering Committee which has senior representation from SafeWork, SIRA, and icare, as well as the NSW Ministry of Health, the NSW Mental Health Commission, Mental Health and Wellbeing Advisory Group and BEING. A new Advisory Board was established in 2021 which included: Deputy Secretary, Better Regulation Division, Department of Customer Service, SafeWork NSW, SIRA, icare, Mental Health Commission of NSW, NSW Ministry of Health, Small Business Commission, Resilience NSW, Regional NSW, and Being NSW.

EVALUTION OVERVIEW

EVALUATION OBJECTIVES

This evaluation

SafeWork previously commissioned Urbis in 2017 to develop the Mentally Health Workplaces Strategy Evaluation Framework (the Framework) in parallel with the development of the Strategy. The evaluation of the MHW Strategy from its inception in July 2018 to June 2022 is guided by this Framework (which underwent revisions in early 2019 to align with the finalised MHW Strategy). In June 2020, SafeWork requested Urbis to undertake an additional Interim Evaluation Phase, in response to the COVID-19 pandemic. In January 2021, Urbis delivered the Mid-Point Evaluation of the Strategy.

The final evaluation, conducted between June and November 2022, included:

- detailed review of the existing Strategy documentation including the original strategy paper, the mid-point evaluation, and the 2022 Benchmarking survey re-execution
- primary data collection through individual interviews and focus groups with NSW employees, employers, mental health peak and advocacy groups, and the Strategy team and leadership at SafeWork
- qualitative analysis using project level data sources of the process and outcomes for all Strategy projects and activities
- quantitative analysis utilising secondary data sources – specifically- SafeWork NSW Inspector data, the Workers' Compensation Claims data for Mental Health Injuries and the Benchmarking Tool Baseline, Mid-Point and End-of-strategy results – to evaluate the delivery of Strategy outcomes.

Evaluation purpose and approach

The purpose of the evaluation is to review the delivery and impacts of the MHW Strategy during its funding period of 2018 to 2022. The approach incorporates a process and outcomes evaluation and is underpinned by a continuous quality improvement framework.

Evaluation scope

This evaluation is of the Strategy as a whole and does not include an evaluation of the individual components. Any results from evaluations of individual projects being undertaken by SafeWork, icare, and SIRA have been incorporated into the Strategy evaluation at a high level where relevant. A summary of projects and progress to date is included at Appendix A.

The Final Evaluation includes an analysis of the process and outcomes for all Strategy projects and activities against the key evaluation questions.

Target audience

The target audiences for the evaluation include SafeWork, NSW Treasury, the NSW Department of Premier and Cabinet, and public and private sector employers, and employees. The evaluation results will be used to inform ongoing Strategy refinement and the development and delivery of future workplace mental health strategies and initiatives undertaken by SafeWork or other key stakeholders.

Key evaluation questions

The evaluation will provide evidence as to the implementation, reach and outcomes of the Strategy by answering the following key evaluation questions. These are based on the Strategy Program Logic which was determined in consultation with SafeWork during the development of the Evaluation Framework between 2018 and 2019.

All key evaluation questions are set out in Appendix B, with priority questions specified below.

Table 1: Key Evaluation questions for the Final Evaluation

Domain	Key evaluation questions
Implementation	▪ To what extent were the activity streams and projects implemented as intended? ▪ Were initiatives selected based on the best available evidence? ▪ What barriers and enablers influenced implementation of the activity streams and projects, and how effectively were these addressed?
Reach	▪ How effective were the activity streams in reaching their target audiences?
Short term outcomes	▪ Has the MHW Strategy resulted in an increase in workplace mental health awareness and understanding for NSW employers, employees, and the community?
Medium term outcomes	▪ Are NSW employers utilising workplace mental health products, resources, training, and services? ▪ Have NSW employers planned and implemented new initiatives to improve workplace mental health?
Long term outcomes	▪ Have employers demonstrated a capability uplift in creating mentally healthy workplaces? ▪ What has been the social return on investment for the MHW Strategy?

EVALUATION METHODOLOGY

Primary Data Collection

During September to November 2022, Urbis conducted in-depth interviews with SafeWork internal stakeholders, NSW employees and employers who had engaged with programs under the Strategy, mental health peak bodies and advocacy groups, delivery partners, and key external stakeholders. We engaged with a total of 48 stakeholders via teleconference and telephone during this phase, comprising:

- SafeWork stakeholders (n=22)
- NSW employers and employees (n=14)
- External stakeholders including governance partners, delivery partners, mental health peak bodies, and advocacy stakeholders (n=12).

Key stakeholders for the evaluation were recruited with the assistance of SafeWork and recruitment was guided by the stakeholder communications strategy outlined in the Evaluation Plan, to ensure that all key stakeholder groups experienced an inclusive process and had the opportunity to engage safely with the evaluation.

Secondary Data Collection

A review of SafeWork project documentation and data, including SIRA and icare project data was also undertaken in October 2022 for the July 2018 to June 2022 period. Data sources that were used in this evaluation comprised:

- SafeWork records e.g., implementation reports, risk management reports, records of events held by SafeWork to help build awareness of the Strategy
- data on individual SafeWork projects e.g., progress reports, evaluation data, testimonials, etc.
- analytics from the SafeWork NSW website e.g., traffic and engagement data
- summaries of progress and outcomes of the icare and SIRA-managed projects
- data from SafeWork NSW Inspectors on workplace visits
- Workers' Compensation Claims data for workplace mental health injuries from 2012 to 2022.

- Benchmarking Tool summary reports as of November 2020 and October 2022.

Quantitative secondary data was either analysed by SafeWork and compiled in program documentation or delivered as raw data. Raw data was analysed in Excel using descriptive statistics, with percentage change, frequency and averages being the primary measures investigated.

Data Analysis and Reporting

All data collected across stakeholder engagements, project documentation and third-party data were synthesised. This process included a review of individual project analysis provided by SafeWork NSW, followed by triangulation of findings through internal reviews involving members of the Evaluation Team. Key findings from the data synthesis informed this Final Evaluation Report.

LIMITATIONS

The following limitations should be noted when considering this report:

- Stakeholders consulted were not representative of all the target segments, nor all variations within a target segment, which means that the views expressed in this report are indicative only
- Project documentation and data which were provided for analysis were variable across projects – some projects had more data and therefore were able to provide more insights into the outcomes and impacts of the project.
- Covid-19 had a significant impact on workplace mental health and influenced actions taken by employers in response to changes in employee mental health. During this Evaluation, Urbis has been unable to quantify the impact of COVID-19 on the overall outcomes of the activities delivered through the Strategy.
- Two external data sources were reviewed to evaluate changes in workplace mental health as a result of the Strategy: the Workers' Compensation Claims data for Mental Health Injuries from 2012 to 2022, and the Benchmarking Tool 2017 Baseline, 2020 Mid-Point Review, and 2022 Review. Positive shifts in either data source cannot be solely *attributed* to the Strategy, but it may have *contributed* the change (although with many other factors, including the Covid-19 pandemic).
- The BMT did not survey a control group of workplaces. As a result, it is not a longitudinal study and changes in results across the survey periods should be viewed in this context.

STRATEGY IMPLEMENTATION AND GOVERNANCE

KEY POINTS

- Strategy implementation has been largely successful; however, SafeWork stakeholders acknowledged the first year was stressful due (a) the size and complexity of the Strategy and (b) a need to learn how to deliver through and with other stakeholders.
- Feedback loops and human-centred design approaches were identified as two key elements of the implementation approach.
- The Covid-19 pandemic necessitated a change in delivery to prioritise online over face-to-face and some of the messaging around working from home also needed to be updated.
- Key enablers to implementation comprised partnership and collaboration, engagement of non-government influencers, and the focus on mental health and wellbeing prompted by the Covid-19-pandemic.
- Key barriers to implementation included the size and complexity of the Strategy and a reliance of shared services

IMPLEMENTATION PROGRESS

Strategy implementation has been largely successful; however, SafeWork stakeholders acknowledged the first year was stressful due to (a) the size and complexity of the Strategy and (b) a need to learn how to deliver through and with other stakeholders. Contributors to the year one challenges, and implementation delays, included delays in cabinet approvals, the election shutdown, and the subsequent change in minister and funding.

> *"Pre-election we were really well funded and could grow a team pretty quickly. Post-election and with the change in minister we lost significant funding overnight…and it took 12-18 months to regain and get it going again."* Delivery Stakeholder

As part of this Evaluation, delivery stakeholders acknowledged that the initial delays were educative and resulted in streamlined delivery in subsequent years, especially the awareness campaigns and the peer review process. Delivery stakeholders reportedly also drew upon feedback on proposed approaches to continuously refine projects and optimise delivery.

> *"We moved from a reactive approach to much more collaboration. We focused on what sectors needed – considering how we can not only raise awareness but also make a bigger impact."* Delivery stakeholder

Feedback loops and human-centred design approaches were identified as two key elements of the implementation approach. SafeWork noted that getting feedback from stakeholders such as academics and people with lived experience meant the delivery teams could tweak the Strategy implementation to ensure better outcomes. One example of this was the original Work Health and Safety (WHS) evaluation program offered to small businesses. The implementation team became aware the program was not 'hitting the mark' and consequently designed a refined evaluation approach in consultation with customers and stakeholders.

The Covid-19 pandemic necessitated a change in delivery to prioritise delivery of programs online over face-to-face and some of the messaging around working from home also needed to be updated. Delivery stakeholders noted these changes were less impactful than they could have been, and that the initial delays in campaign implementation, for example, had allowed the team to spend more time in research and design, creating a solid foundation. As one SafeWork stakeholder commented, "In second year, going into the pandemic we were ready for Covid without realising we were ready for Covid."

The SIRA and icare managed projects demonstrated stronger initial implementation than the SafeWork projects. Stakeholder feedback, however, indicated these projects were more likely to be impacted by the mechanisms of government, for example challenges about where specific pieces of content should be hosted – the SIRA website or the SafeWork website. Stakeholders noted these challenges led to teams working in project-based silos to improve delivery efficiency.

For SafeWork-led projects, delivery stakeholders reported their project and resource planning had advanced significantly over the course of the Strategy, with specific improvements noted in capability to define objectives and collaborate with other teams. Some delivery stakeholders further suggested establishing clear processes, procedures and templates would help with resourcing and implementation efficiencies in future strategies.

ENABLERS TO IMPLEMENTATION

Partnerships and collaboration

The Strategy's focus on partnerships and collaboration was routinely identified as an enabler of success and with stakeholders commonly suggesting the approach should be continued for future strategies. Some stakeholders explicitly noted the Strategy had facilitated inter-agency conversations which would not have happened otherwise.

One example of a partnership enabling implementation success was the 2021 webinar arranged by the Ministry of Health with contributions from MHW project teams. The webinar was attended by about 600 businesses in the childcare industry, businesses which the Strategy may not have otherwise may not have reached. NSW Health stakeholders noted that "It's wonderful to see people having conversations about good mental health from an early intervention, preventative approach, which NSW Health don't get to dabble in."

The Ambassador program itself was a partnership between SafeWork NSW and the Ambassadors who participated, but that also created additional collaboration opportunities which were unlikely to have otherwise been accessible to SafeWork. For example, one of the Ambassadors reportedly introduced SafeWork to Lend Lease; an introduction which prompted efforts to improve tendering policies and processes to better support the mental health of service providers.

The high level of stakeholder engagement during the Strategy implementation period was typically attributed to the collaborative, human-centred approach taken by the project team. Partnerships within target cohorts – for example regional NSW and high-risk industries – have shown strong engagement and an increased propensity to promote the resources and programs available as a result of the Strategy. SafeWork stakeholders indicated that a lot of leads come from the inspectors or from within the different SafeWork industry sector lead teams. They noted that the relationships and trust built with partners has creating opportunities for SafeWork to connect with more people than they would have been able to achieve on their own.

Engaging non-government influencers to achieve cut through with small business

Research indicates many small business owners would prefer to use resources developed specifically for small businesses and that they are more likely to adopt workplace health and safety practices if they are communicated by an intermediary – organisations that deliver them goods and services.[8]

The Ambassador program was one of the most successful projects in the Strategy and contributing to a reach of over 1.2 million people through organic and paid means. Stakeholders attribute much of the program's success to the use of non-government influencers and their ability to achieve cut-through because they are relevant and relatable to the small business audience. Of the nine Ambassadors, eight are non-government representatives, instead representing organisations that small business owners may be familiar with (e.g., Lifeline or Westpac) or they are representatives of a successful organisation within a target industry (e.g., Western Earthmoving or Newcastle Airport).

One SafeWork stakeholder expressed the views shared consistently through the interviews conducted as part of this Evaluation when they said, "*We need more Graham Rags* [Managing Director at Western Earthmoving and MHW Ambassador] *because of his experience in business. Businesses don't want to hear it from us. Why should I tell them what to do? They want to hear it from each other."*

Covid-19 supercharged the strategy

Stakeholders acknowledged there were both positive and negative impacts of the Covid-19 pandemic on the Strategy. Regarding the positive impacts, the pandemic had reportedly contributed to raising the profile of mental health in the workplace, prompting more open discussion and efforts to create positive change. In

[8] Sinclair et al., 2013

addition, key accreditation documents (e.g., ISO 45003: Psychological Health and Safety at Work) as well as psychological health and safety guidelines have begun emerging from the global community in response to the pandemic.

These improvements in the general level of understanding about mental health in the workplace reportedly contributed to business owner and employee audiences being more receptive to the messages being communicated through the MHW Strategy. From a qualitative perspective, delivery stakeholders commonly suggested the focus on mental health as a result of the Covid-19 pandemic contributed to greater engagement with the tools and programs delivered through the Strategy.

From a quantitative perspective, the BMT suggested employee mental health deteriorated between 2020 and 2022, with employers reporting a higher proportion of their workforce feeling mentally unwell in the12 months leading up to the 2022 survey than when previously surveyed in 2020. In addition, in 2022 77% of employers indicate their organisation had some level of poor mental health present in the workplace.[9]The deterioration in employee mental health appears to have also contributed increased focus on the topic by employers, including a greater urgency to identify positive actions.

> *"Covid-19 grew the issue, and there was the release of key documents globally (e.g., ISO 45003) and we are seeing psychological health and safety guidelines emerging from the global community, which is great. The World Health organisation released workplace mental health guidelines, and overall we have a better understanding of how mental health impacts work because of COVID."* Workplace stakeholder

> *"What sparked my interest in mental health at work was Covid. It had a really negative impact on my team and clients. Twice we got put into snap lockdowns and worked from home. We're a really culture-driven organisation and we were all about collaboration and team activities and we went from that to split teams or working from home."* Workplace stakeholder

IMPLEMENTATION CHALLENGES

Size and complexity of the Strategy

Designing and delivering a state-wide workplace mental health strategy was considered by stakeholders to be both ambitious and challenging. The Strategy offered a diverse range of supports and interventions to meet the varying workplace mental health needs and priorities of workplaces across industries and business sizes. In its design, the Strategy, as noted above, delivered on this objective through its four streams and range of projects and programs.

However, stakeholder feedback suggests the complexity and scale of the Strategy contributed to variability in the delivery and impact of the different components. Some stakeholders also reflected that due to the amount of opportunity provided by the Strategy, delivery teams were sometimes distracted, following ideas and suggestions outside the originally defined scope.

> "*There are the major projects which are always the priority, and whenever there are conflicts or resourcing challenges they take over and the other things get pushed onto the back burner and they get handed around. That's happened a lot with certain projects*." Delivery stakeholder

> *"People come to us and ask if we can help and we say yes, sure. But we need to keep focused because we have committed to a lot of things in this Strategy and we can't do it all."* Delivery stakeholder

Over the course of the Strategy, there were pivots in focus – such as the focus of the construction industry that emerged organically through the work being done as part of the Strategy – and reprioritizations as a result of the Covid-19 pandemic. These pivots challenged the SafeWork team in terms of delivering their planned campaign activities in line with planned timeframes and budgets.

> "*Some of the resources are just available for use now even though the strategy has technically ended. Unfortunately for the other two high-risk industries that were identified, we weren't able to deliver the resource kits that we wanted to. Resourcing was part of it but we've also taken the time to really consult and feel comfortable in the resources that we're delivering."* Delivery stakeholder

[9] BMT, 2022

Reliance on shared service partners for marketing support created delays and curtailed innovative execution

While delivery stakeholders acknowledged they were fortunate to be able to use a shared service function to support campaign design and delivery, this approach also had some challenges. Most notably, cross-departmental decision-making and governance processes had reportedly impacted campaign delivery times.

These challenges were most noticeable in the marketing and promotion components of projects. For example, promotional communications were planned well before mental health month, however the collateral and messaging did not get released until a few days before 'going live'. According to the delivery stakeholders, these delays created significant stress and little improvement over time: "*better planning, the same issue remains, and we see the same bottlenecking as we did in other projects*"

SafeWork stakeholders also suggested there was a "lack of innovation" in marketing approaches from the shared services function. These stakeholders expressed concern that marketing plans and communications approaches suggested were 'run of the mill,' and that there was little support available to the project team when they wanted to tackle things differently. This challenge was amplified by the delivery team having ideas, but not the connections to make some of their innovative ideas happen as quickly as the specialist shared service teams should have been able to.

GOVERNANCE AND ACCOUNTABILITY

Governance took different forms at different levels of the Strategy, which created both positive outcomes as well as challenges.

Overall Strategy governance was established as follows: a Strategy Governance Program Board comprising Directors of SafeWork, SIRA and icare reports to the Strategy Steering Committee which has senior representation from SafeWork, SIRA and icare, as well as the NSW Ministry of Health, the NSW Mental Health Commission, Mental Health and Wellbeing Advisory Group and BEING. A new Advisory Board was established in 2021 which included: Deputy Secretary, Better Regulation Division, Department of Customer Service, SafeWork NSW, SIRA, icare, Mental Health Commission of NSW, NSW Ministry of Health, Small Business Commission, Resilience NSW, Regional NSW, and Being NSW.

The overall governance was an enabler of human-centered design approaches and ensured that one of the key focuses of the Strategy – including the lived experience perspective – was delivered.

Stakeholders noted that the segregation of the Strategy into the workstreams and then specific projects played a role in siloing work, which then added a level of governance complexity due to the lack of data flows for reporting, which could be reduced by a different program design.

At a project level, governance requirements created a delivery challenge, especially in early implementation. Stakeholders noted that the need for mass market campaigns to be peer-reviewed created sign-off delays. Although they also noted that once the process and requirements for sign-off were understood, it was easier to meet delivery timeframes.

> *"Peer reviews were a long, drawn-out process and campaigns can be pulled at any point. It takes time to learn how to work within the processes, especially when new departments are just being set up."- SafeWork Stakeholder*

The stakeholder interviews indicated that the delivery teams took strong personal accountability for their projects. There was an overarching sense of pride in both what has been achieved through the Strategy, and how the teams have delivered the outcomes.

STRATEGY REACH

KEY POINTS

- Overall, the MHW Strategy met the overarching objective of having more than 90,000 NSW businesses taking effective action to create mentally healthy workplaces by 30 June 2022.
- The most utilised project in the Strategy was Mental Health at Work training, with 26,049 individuals trained (102% of target).
- The Ambassador program was also a notable success in terms of reach. The 12 Ambassadors published 266 social media posts about the Strategy between 2020 and 2022, reaching 454,037 people organically.
- Other program such as Direct Practical Coaching did not meet their reach targets by 30 June 2022, however feedback regarding this program was overwhelmingly positive. The reach target for DPC was met by 31 October 2022.
- Data from SafeWork inspectors analysed as part of the final evaluation further suggests the reach of the Strategy may not have extended to high-need businesses.

OVERALL REACH

The Strategy has demonstrated a broad reach across multiple sectors and workplace types. At the time of the evaluation, it was not possible to calculate the number of individuals who have engaged directly with the Strategy since its launch in June 2018; however, the reach statistics from the individual projects suggest core messages and awareness were amplified by many of the initiatives across the strategy, and that these activities had a significant, positive impact on reach.

The MHW Strategy had both an overarching reach goal (90,000 businesses taking effective action) and reach goals for individual projects. As with implementation, reach has varied across projects with some exceeding reach goals, and some projects underdelivering. **Overall, the MHW Strategy met the overarching objective of having more than 90,000 NSW businesses taking effective action to create mentally healthy workplaces by 2022.**

The most utilised project in the Strategy was **Mental Health at Work training**, with 25,841 individuals trained, exceeding the target by 190 people. The training was highly regarded by participants with 99% of training participants surveyed recommending the training. The quality of the training was also emphasised in interviews with employers. One employer stated that they "*recommended and shared the training with my clients who are either owners or managers in other small businesses but in different industries, so that they could use the training to support their company*."

The **Ambassador program** was also a notable success in terms of reach. The 12 Ambassadors published 266 social media posts about MHW between 2020 and 2022, reaching 454,037 people organically. SafeWork amplified the organic reach of the Ambassador program, reaching an additional 1,215,072 people. The Ambassadors also hosted or attended 25 events and supported 2 Ministerial Roundtables and there were 1,860 MHW Ambassador unique webpage views (sourced via organic Ambassador UTMs).

The Direct Practical Coaching (DPC) program did not meet its reach goals, however. The DPC program targeted companies in high-risk industries and provided individualised support tailored to the needs of each business. The refreshed Strategy set a goal of reaching 1000 businesses through DPC. As of 30 June 2022, there had been a total of 789 triage calls and 566 businesses had received guidance through the program, 105 of which were from high-risk industries. Feedback from interviews with employers who had engaged with the DPC program was universally positive. Employers highlighted how useful the coaching had been, and every employer described changes that they had implemented in their workplace and reported positive effects of these changes for employees. These findings suggested that the DPC program is well designed and fit-for-purpose but may not be effectively reaching the employers who would benefit from it. This aligns with findings from interviews with employers and industry stakeholders that indicate there is limited general industry awareness of the Strategy projects and resources. Most workplaces and key workplace mental health industry stakeholders said they knew the Strategy existed, but they had little understanding of the projects available to them under the Strategy. This finding suggests that continuous improvement in understanding the customer journey and targeted marketing to achieve engagement and outcomes will be critical for the success of a future strategy.

Data from SafeWork inspectors analysed as part of the final evaluation further suggests the reach of the Strategy may not have extended to high-need businesses. Of the 125 employers surveyed by inspectors after a visit to their workplace (due to a potential risk relating to psychological safety), the majority (76%) were not aware of SafeWork's free mental health programs and training.

Reach to and targeting of **high-risk industries** was not as successful as intended. While specific targets were not set for the number of businesses reached in these industries, they made up only 24% of the Mental Health at Work training participants and only 19% of DPC businesses that received guidance. Of these businesses, just over half came from professional services suggesting that the other priority industries were significantly under-represented in engagement with programs under the Strategy.

ENABLERS TO REACH

The use of partnerships – for example working with the Black Dog Institute – was identified by almost all stakeholders as an enabler of reach. When partners promoted MHW campaigns, stakeholders indicated that they observed an increase in reach and registrations.

> *"Vendor marketing does really well to drive registration. The Black Dog Institute promotes campaigns well and bring in registrations. Black Dog Institute's digital marketing has done well."*

Another partner initiative that enabled greater reach was the Australian Business Registry (ABR) campaign which reached approximately 1.5 million people for relatively low cost. Delivery stakeholders suggested that future partnership activities might be considered for implementation based on the speed of execution, the potential reach, the cost to implement, and the ability to track results.

Partnering with key Ambassadors (via the Ambassador Program) who are recognised and respected leaders in their fields reportedly allowed the Strategy to expand its reach into new industries which had not originally been targeted.

BARRIERS TO REACH

There was limited data covering referral tracking within the MHW Strategy, meaning it is not possible to calculate the true reach of campaigns and programs or understand how communications about workplace mental health spread through target cohorts. The limitations in referral tracking also make it difficult to attribute engagement to specific campaigns.

Most of the employers interviewed as part of the evaluation indicated they found out about the training and resources available to them after actively seeking out programs for their workforce – this suggests these projects are targeting an audience already aware of and motivated to improve workplace mental health. None of the employers interviewed as part of the final evaluation engaged with the training because of a serious incident, event, or Workcover claim for psychological injury in their workplace. One employer identified challenges to her business caused by the Covid-19 pandemic as the primary driver for seeking assistance with workplace mental health. Consistently, the majority of businesses surveyed by SafeWork inspectors were not aware of the programs and resources available to them. Finally, the conversion rate from businesses engaging with some activities and programs under the Strategy was low – for example, while 8,344 Workplace Pulse Checks were completed, only 1,037 businesses downloaded their reports.

The approach adopted by the shared services function within DCS reportedly hampered delivery of creative ideas, with SafeWork stakeholders identifying this as a barrier to reach.

> *"There was a lack of innovation in the approach from shared services function. They didn't support the project team wanting to tackle things differently, and where we didn't have the connections to make some of our innovative ideas happen as quickly as the specialist shared service teams should have."*

One specific example of this barrier was the Sydney FC campaign. SafeWork stakeholders "*got ping-ponged around and eventually, they said you can do it, but you guys have to drive it. It didn't result in as many conversions, but it was great to try something new and to try and tap into a different audience*."

WORKSTREAM REACH

In the Strategy, reach was tracked at the project level across workstreams. An overview of the most significant reach findings achieved by the Strategy across each workstream is set out in Figure 1-3 below.

Figure 1: Awareness-raising stream: Key reach statistics

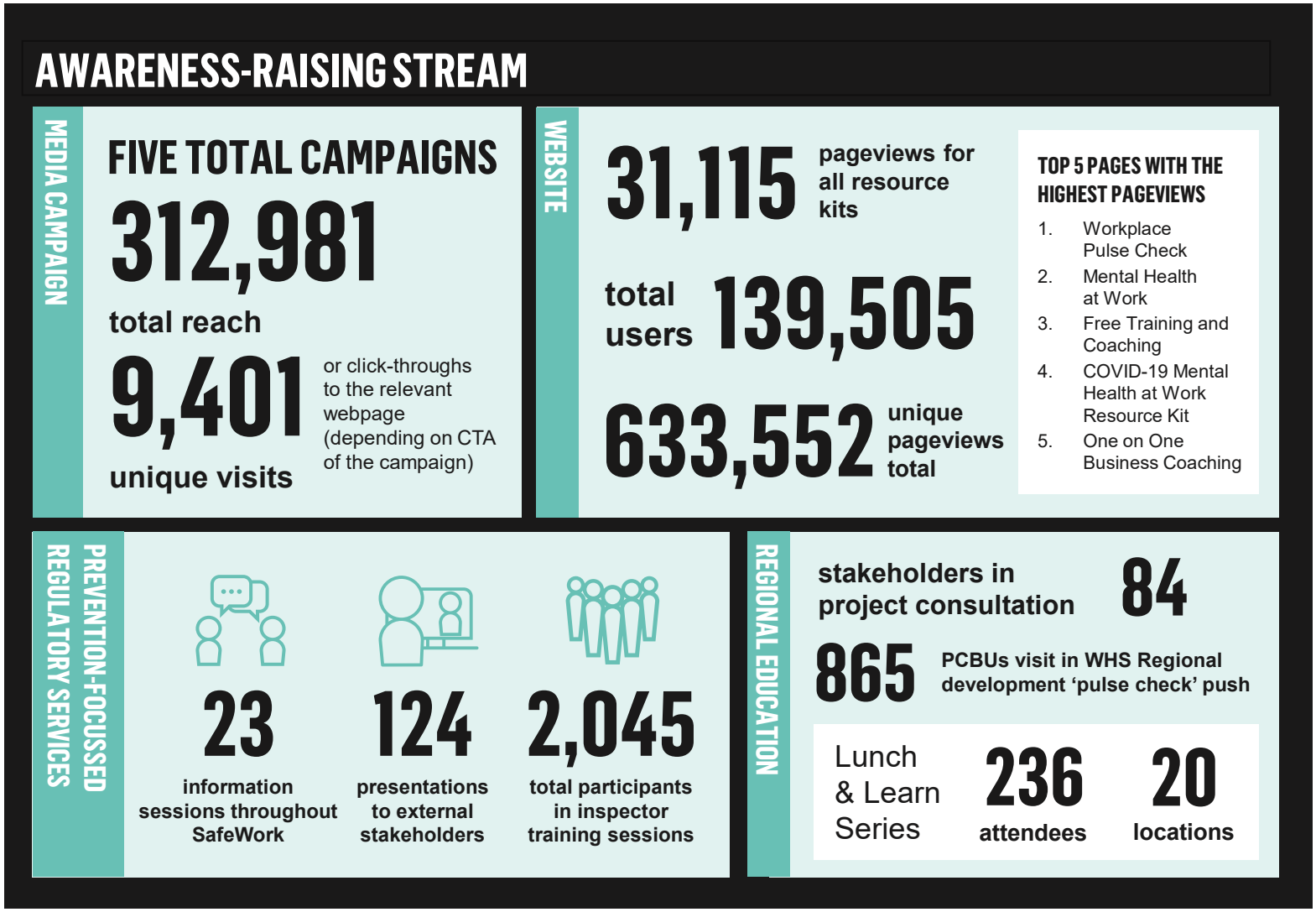


Figure 2: Evidence-informed interventions: Key reach statistics

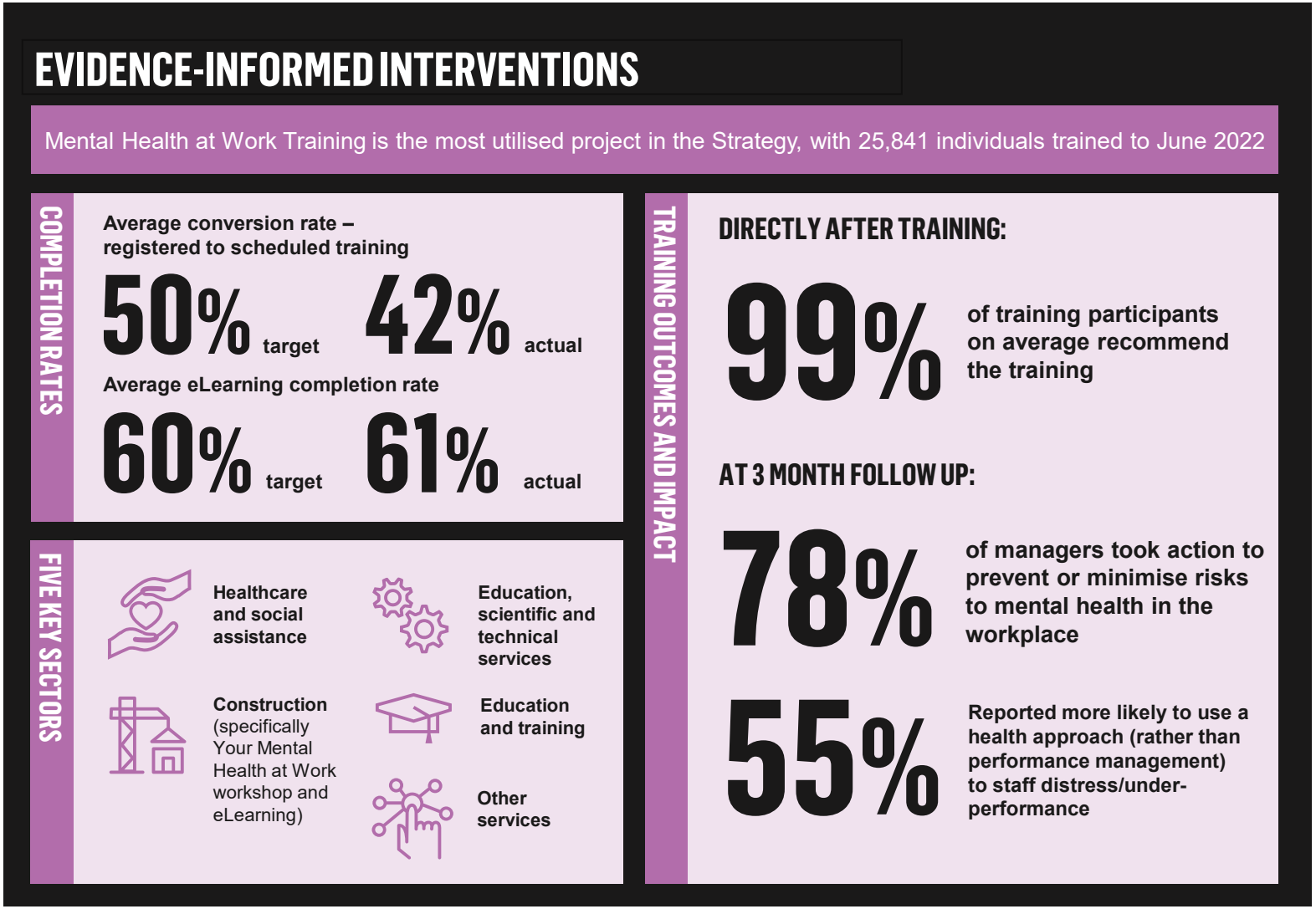
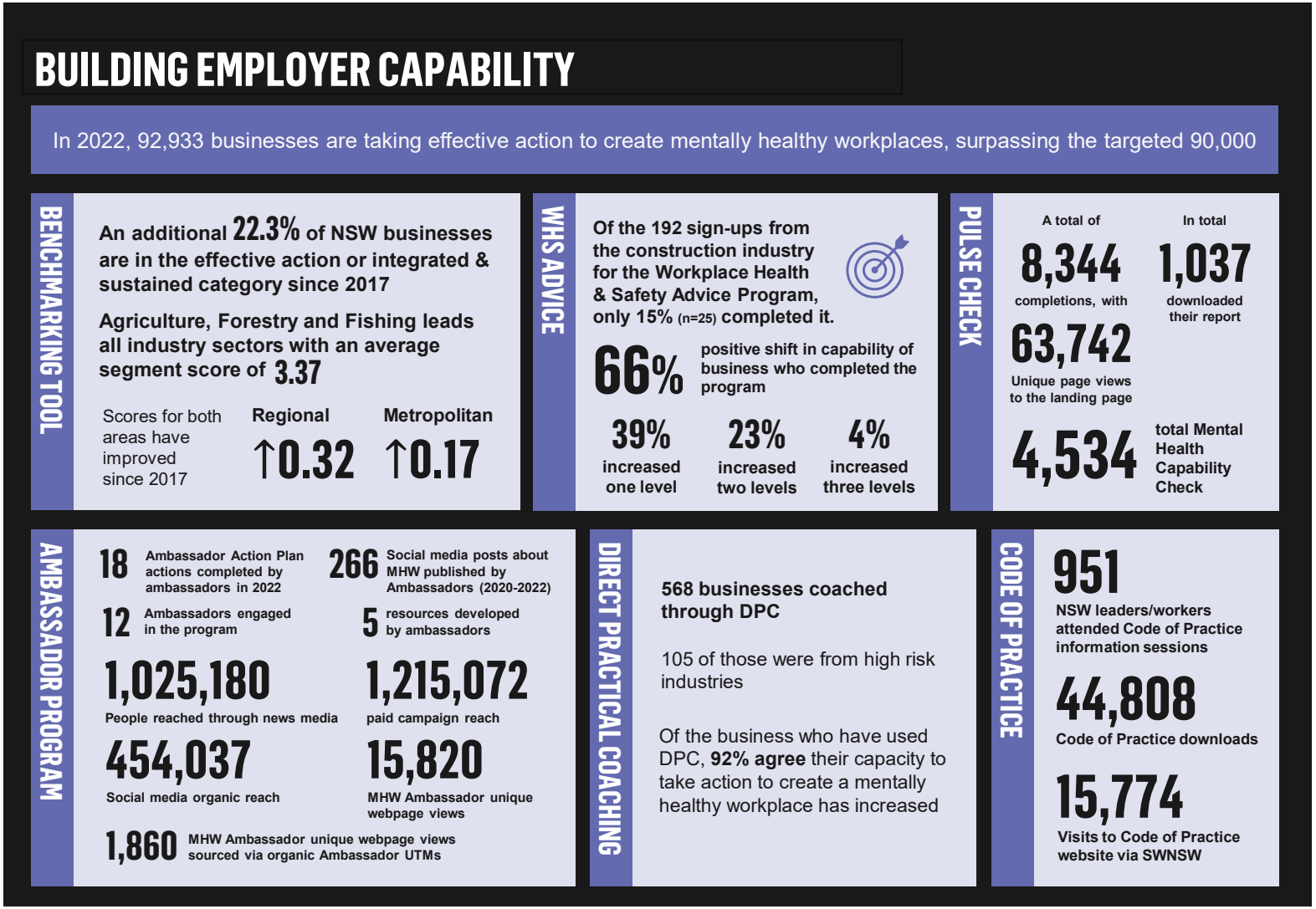


Figure 3: Building employer capability: Key reach statistics



STRATEGY OUTCOMES

KEY POINTS

- There is evidence the Strategy contributed to:
  - Improvements in employer capability in workplace mental health across targeted industries and cohorts
  - Improvements in the health and safety of NSW workplaces
  - Increased mental health literacy amongst employers and employees
  - Improved workforce confidence in addressing workplace mental health
  - Increased social connection
  - Improved productivity and reduced rates of serious work-related psychosocial injuries and illnesses
  - Improved staff retention in mentally healthy workplaces

OUTCOMES FOR WORKPLACES

The Strategy outcomes were evaluated by reviewing available project data, conducting in-depth interviews with employers and employees who had participated in one or more projects of the Strategy, and analysing SafeWork and third-party data. The analysis indicates that there is evidence that the Strategy has delivered the following outcomes for workplaces.

Improvements in employer capability across targeted industries and cohorts

Participants in the Mental Health at Work training program and Direct Practical Coaching program consistently reported greater confidence to implement workplace mental health supports for their workforce. Workplaces which did not previously prioritise workplace mental health supports further reported these programs have provided Human Resource managers with increased legitimacy to implement workplace mental health strategies and supports.

> *"We have implemented the things she shared… Our employees will do that to start their journey of understanding of mental wellbeing*." Workplace representative, construction

> *"We did a lot. One of things was making people aware and we added a section in job descriptions that had links to phone lines and websites and we also displayed that information in the office."* Workplace representative, hospitality

> *"We've implemented a monthly giveaway – something healthy and non-work related. We've done a giveaway for audio technology, veggie boxes and yoga classes. We also did mental health training with the duty managers – how to spot signs and approach and talk to people having a rough time."* Workplace representative, hospitality

> *"The training was great. It gave us the confidence to implement a workplace mental health strategy and we now have a 2-page policy that covers everything about mental health and wellbeing in the workplace – normally our policies are only one page."* Workplace representative, manufacturing

Expert stakeholders involved in project delivery concur that there have been improvements in employer capability. "*Businesses of all sizes are showing improvement in similar ways,*" one said. This perception is supported by data from the 2022 BMT, which shows that across all business size cohorts the levels of limited and effective action increased, reflecting improvements in employer capability.

Table 2: Proportion of businesses taking action to support mental health at work

	Small business	Medium business	Large business
Integrated and sustained	maintained	fell	maintained
Effective action	18% (up 4%)	23% (up 10%)	23% (up 8%)
Limited action	35% (up 7%)	37% (up 4%)	37% (up 6%)
Intention	26% (fell 3%)	21% (fell 10%)	14% (fell 3%)

Data from the BMT align with the findings from the workplace interviews. The four target industry sectors have all shown an improvement in the average NSW employer score indicating that more businesses are taking action to improve mental health in the workplace, and all increases except for Information, Media, and Telecommunications, are statistically significant.

- Transport, Postal and warehousing: from 2.31 up 0.61 to 2.92 out of a maximum of 5 (p=0.05)
- Information, Media, and Telecommunications: from 2.31 up 0.42 to 2.74 out of a maximum of 5 (p=0.05)
- Manufacturing: from 2.44 up 0.27 to 2.71 out of a maximum of 5 (p=0.05)
- Professional, Scientific and Technical Services: from 2.17 up 0.30 to 2.47 out of a maximum of 5 (p=0.05)

Clear pathway to evidence-based programs and tailored advice for employers

- The volume of organisations developing and promoting mental health resources and projects for employers has reportedly created a lot of 'noise' in the mental health sector. Some employers explicitly noted being overwhelmed with choice, and uncertain about which resources would offer the best value. Expert stakeholders further suggested there is a strong desire within the workplace safety community for evidence-informed practice from credible sources.
- Expert stakeholders identified SafeWork NSW were a world-leader in providing evidence-based programs. SafeWork's willingness to "*have a voice and show what evidence-based practice looks like in the real world*" was crucial in making evidence-based practice and program accessible to workplaces.
- Providing these evidence-based programs for free was consistently highlighted by employers as a key enabler to participation in the program.

> *"it was a time burner, but not also a large financial burden. So it was easier to justify it without the cost burden as well to the other owners of the business because it's just my time and I'm sacrificing for the best of the organisation.* Workplace representative, Financial Services

- The Workplace Wellbeing Assessment (WWA) tool is a self-service online tool that helps businesses assess how mentally healthy their workplace is. The tool provides businesses with a detailed report that scores their capability to promote, manage and support mental health at work; and benchmarks the organisation against others in the same industry and across NSW. Importantly, the WWA provides tailored, actionable advice and recommendations to help businesses to improve mental health in their workplace. The tool also allows businesses to monitor their progress in creating a mentally healthy workplace.

Improved employee retention in mentally healthy workplaces

- More Australians are leaving their jobs to find a better one, with the Australian Bureau of Statistics reporting that "a third (33 percent) of all people who left or lost a job in the 12 months to February 2022 were people who left a job to obtain a better job or just wanted a change (697,100), up from 21.7 percent in February 2021"[10] and replacing high-potential talent can cost a business two to three times the outgoing worker's annual salary.

[10] Australian Bureau of Statistics (February 2022) 'Job Mobility', ABS catalogue number 6223.0, https://www.abs.gov.au/statistics/labour/jobs/job-mobility/latest-release accessed 22 November 2022

- The cost of employee turnover because of poor workplace mental health outcomes has not been quantified as part of this Evaluation or throughout the Strategy period. However, the interviews with employers indicate that there may be a link between improved workplace mental health and greater employee retention.

  "After the training, I've only had positive feedback. And after the changes we're making the staff are happier, the turnover isn't high and that's across the board – from managers to project managers and workers in the workshop." Workplace representative

  "We're creating a culture where people can speak up when things get too much, and people will step in to help. It still means the work gets done it's just a better way of going about it." Workplace representative

  "One of my team members was anxious about working with one of the managers. I knew that because she came and spoke to me about it and she was visibly distressed in our meeting. Before we did the training, she wouldn't have said anything, and she would have left." Workplace representative

OUTCOMES FOR EMPLOYEES

Improvement in the health and safety of NSW workplaces

The 2022 BMT revealed positive shifts in all awareness raising and education attributes between 2020 and 2022, and the results show positive shifts since 2020 on all culture and risk management attributes. For example, 66% of workers surveyed from NSW indicated their organisation has put some focus into ensuring their managers are easy to talk to and approachable about mental health and wellbeing, representing the biggest shift since 2020 on the range of metrics around managing risk in the workplace.

Additionally, in 2022, more workers reported themselves and their supervisors receiving training on mental health risks and about warning signs in the workplace, than in 2020. The 2022 BMT reports that the primary actions being undertaken in the workplace to improve employee mental health include providing flexible working arrangements (39%) and communicating the COVID19 safety measures in place (36%).

While it is not possible to directly attribute this improvement to the Strategy alone, interviews with employers and employees elicited case study examples, which provide evidence of NSW workplaces becoming healthier and safer as a result of the Strategy.

"We've created an environment where it's ok to say I'm struggling or this is impacting me. We've just got to continue to remind them about what is available to support them because when you're overwhelmed or you've got mental health issues, you're not always rational." **Workplace representative**

"One staff member was struggling – we developed a form to identify what was difficult so we could change things for him temporarily. We ended up changing his role a bit and gave him less customer facing responsibility and less work. We made sure to checking back in with them after a few months, but the change was great. He said he also got psychological help." **Workplace representative**

"We've got posters up all over the place and we change them regularly." **Workplace representative**

"A team member had lost a lot of weight and when asked about it, he said that he'd started walking and running to cope with some personal problems he was dealing with at home." **Workplace representative**

Increased mental health literacy amongst employees (and employers)

Stakeholders interviewed as part of this evaluation indicated that participants in the programs reported improvements in mental health literacy as well as greater awareness of where to find help.

Workplace stakeholders specifically noted as a result of the tools and programs delivered through the Strategy, they could improve the experience of work by reducing the organisational barriers to wellbeing and other factors which have the potential to do harm. There was a recognition that by designing work in ways that is not harmful to people they could ensure that their staff were *"going home at the end of the day with sufficient energy reserves to do all the things they need to do outside of work. As well as ensuring that what we do for people who are vulnerable is best practice."*

At an individual level, the managers in small business who participated in MHW programs identified that they gained personal benefit - as well as business benefit – from the experience. *"The first program I did was for the team, and the second was for me, to talk about the challenges I was having as a business leader."*

SUGGESTIONS FOR THE NEW MHW STRATEGY

KEY POINTS

- Stakeholders were generally supportive of a follow-up MHW Strategy, suggesting it is time to "ride the wave of momentum" and move to onto the next level of maturity to help businesses improve.
- Suggestions for the next strategy comprised:
  Things to hold onto
  – Double-down on the evidence-based approach
  – Stay human-centered
  Things to change
  – Focus on engagement and adoption
  – Bring mental health and mentally healthy workplaces together
  – Take a digital-first approach
  Ways to improve delivery
  – Use personas to simplify program design and increase cut through
  – Improve referral tracking and measures of reach and engagement
  – Adopt a more agile approach to project delivery when working with shared services

Throughout this Evaluation stakeholders were in strong support of a follow-on strategy. The overarching sentiment was awareness had been built during the implementation of this Strategy and it is time to "ride the wave of momentum" and move to onto the next level of maturity to help businesses improve.

Stakeholder shared several suggestions for the next strategy, which can be grouped into three focus areas:

- Things to hold onto from the 2018-2022 Strategy
- Things to build on
- Ways to improve delivery

THINGS TO HOLD ONTO

Double-down on the evidence-based approach

Expert stakeholders noted that the workplace safety community has seen a push for evidence-informed practice and a willingness to listen to people with lived experience of workplace mental health issues. The evidence-based approach taken by SafeWork NSW in program design is recognised as a driver of the success of the current Strategy.

> *"Safe Work went straight to the best, highly skilled people and they were in the reference group. The right people did the research and being led by research improves credibility."* Expert stakeholder

Stakeholders recommended that future strategies continue the evidence-based led approach to tool design. They also suggested investing more effort in research to expand the body of knowledge on interventions and activities that improve workplace mental health and foster the ongoing use of evidence-based interactions.

> *"There's a huge issue in misinformation that's out there in the workplace mental health landscape and I think one of the things we need to get better at is showcasing what evidence-based practice looks like and its reality within organisations."* Expert stakeholder

Not all programs delivered through this Strategy were evidence-based, however. For example, while the Mental Health at Work training program was underpinned by a strong evidence-base, the coaching program was driven primarily by SafeWork's need to give businesses required support in a flexible way, and there was reportedly a gap in the evidence base for programs of this nature. It was therefore suggested future strategies draw upon evidence as consistently as possible.

SafeWork also identified an opportunity for future strategies to build in more evidence-based behaviour change approaches. While project teams did engage with behavioural insights specialists at various timepoints there remains scope for further involvement. Stakeholders suggested that future strategies either access the behavioural scientists at the planning stage to support development of evidence-based change engagements, or that a review of literature is undertaken to surface ideas of what might work for MHW.

Stay human-centered

The human-centred design approach to this Strategy was considered a key contributor to its success and stakeholders recommended continuing with this approach into the future. At a more granular level, stakeholders suggested this approach should be extended from its focus on people with lived experience to some of the other groups within target industries.

Stakeholders called out the need for culturally safe resources for Aboriginal and Torres Strait Islander people. One of the suggestions was to "focus on nothing about us without us, and to ensure that feedback that is received is timely and not just seen as tokenistic." Taking a human-centered design approach would mitigate some of the risks associated with the rapid pace of change in the approaches to providing safe programs for Aboriginal and Torres Strait Islander people.

Diversity inclusion was identified as being critical to integrate in a new strategy. Stakeholders noted diversity and inclusion are broad, umbrella terms and that to deliver on creating an inclusive strategy would require more tailoring – to aging populations, people with disability and 'gig workers', as well as the more traditionally considered CALD cohorts.

Stakeholders also suggested that taking a human-centered design approach would help ensure that appropriate focus and attention was given to self-service tool and resources. Specifically, it was argued this approach might facilitate engagement and participation by organisations only prepared to take a first step and participate in some of the "quick win pieces" rather than starting with some of the bigger changes to policies and processes.

THINGS TO CHANGE

Shift focus to improving engagement and adoption to build on a strong foundation

The stakeholders who provided feedback for this Evaluation unilaterally recommended a continuation or follow on for the 2018-2022 Strategy.

> *"It's frustrating as there is nothing to replace the completed Strategy. Momentum is ripe for picking up this piece of work. There are amazing things that have happened in the world to advance the cause. It would be criminal to stop supporting the program ongoing."* Delivery stakeholder

As detailed earlier in this report, the stakeholder sentiment is supported by third party data sources, which indicate that the Strategy has delivered improved workplace mental health outcomes and achieved the goals set in 2018. Stakeholders suggest that a follow-on strategy should build on the work delivered to date and shift focus to increasing engagement with the available tools and embedding improved workplace mental health practices.

In the words of one stakeholder *"We need to ride the momentum from this Strategy and from the Covid-19 environment to help businesses improve. That's the need for the next strategy*."

More detailed stakeholder recommendations for a follow-on strategy included:

- Consider what's happening in other jurisdictions and learn from them
- Set innovation as a foundation and link innovation with success measures
- Build behaviour change into strategy design and outcome measures
- Consider improving literacy levels around psychosocial risk and psychosocial hazards in workplaces
- Change the narrative from lived experience to experiences of organisations doing it well and focus on the how for making positive change in an organisation
- Use the Code of Practice to support entry-level maturity of mentally healthy workplaces and proactive and preventative-focused initiatives to support more mature organisations.
- Focus on work-design and how to make that come alive for businesses

Bring mental health and mentally healthy workplaces together

Stakeholders expressed concern that a lot of government organisations are contributing to misinformation about what activities and interventions will make a difference to workplace mental health. This appears largely to be driven by confusion in messaging around mental illness, mental health, and workplace mental health.

> *"They're confusing psychological safety with psychological health and safety. You've got the Minister for Mental Health out there promoting things that might make people feel good but that are going to make no difference to workplace mental health." Expert stakeholder*

To address this concern, stakeholders recommended enhancing cross-departmental investment and pooling funding from different sources to reduce the risk of mixed or inaccurate messages being inadvertently communicated by different government agencies.

In addition, one expert stakeholder suggested that by bringing mental health and mentally healthy workplaces together, there was an opportunity to normalise workplace legislation similar to what has been achieved with unfair dismissals.

Take a digital-first approach

The shift to remote working and the focus on digital first more broadly by businesses in NSW has necessitated the reprioritisation of delivery mode towards digital for many Strategy initiatives. It is generally accepted that the digital priorities of workplace communication methods will remain within businesses, and as a result, future MHW strategies should adopt a digital-first approach.

Expert stakeholders noted leaders and managers need certainty of digital access to tools, materials, and training so that MHW projects area accessible in today's hybrid working environment. Further, it was pointed out that managers and leaders are looking for tools to support them with managing their teams virtually. By taking a digital first approach in future strategies, SafeWork would reduce potential friction in the customer journey and thereby increase the likelihood of adoption.

While the Workplace Wellbeing Assessment (WWA) tool was delivered after the end date of Strategy, it was a significant achievement, and a clear example of how SafeWork focused on the unique needs of users. Development of the WWA included extensive consultation with customers on the design and delivery of this digital tool, Feedback from the UX review for the WWA pointed to the need for more targeted and actionable recommendations and this was able to be refined in the final version of the WWA. Considering the customer journey with the WWA helped identify smaller pain points such as email access for staff, need for subscribe/unsubscribe link for follow-up emails, and ultimately lead to a more user-friendly and accessible tool.

SafeWork stakeholders acknowledged that whilst digital delivery modes and customer self-service were what businesses wanted, there was room to improve "handholding off the back of our digital tools". The future opportunity therefore is to lead with digital tool design and delivery, and to extend that to identifying how to digitally show businesses how to make improvements to workplace mental health.

> *"In the future we need to have a brilliant suite of digital tools in market. And at some stage we will need to budget to transition from face-to-face coaching and creating that capability as self-service with a really clear customer journey that allows business to jump in no matter what their level of readiness."* Delivery stakeholder

Review the way that Workers Compensation claims data is used to evaluate outcomes of the Strategy

An analysis of workers compensation data was conducted by SafeWork NSW and provided as part of the final evaluation. This analysis showed the total number of psychological claims increasing annually from FY2018-19 to FY2020-21; a trend was a continuation of one that started several years before the Strategy was launched. Data on return-to-work rates showed people were also taking slightly longer off work for total psychological claims year-on-year over the period FY2018-19 to FY2021-22. This pattern was anticipated at the start of the Strategy because effective awareness raising and capability building of businesses may lead to an increase in claims in the short to medium term as employees have greater awareness and feel safer and more supported to make claims when they need support.

However, limitations of the available data mean it was not an accurate reflection of the Mentally Healthy Workplaces Strategy in reducing claims related to mental illness and improving productivity because:

- the data set included many claims which commenced before the start of the Strategy and the cost of those claims
- the data set did not include details of the length of the claims which commenced during the period of the Strategy.

Workers Compensation data could be a valuable source of information about the broader impacts of the Mentally Healthy Workplaces Strategy and any future work in this area. Initial indicators of the positive impact of the Strategy may be seen in improved recovery at work rates and return to work rates, and a reduction of gross incurred costs. Improvements in these metrics could indicate businesses are managing support and recovery of their workers with mental ill-health more effectively. If prevention and early intervention are effective there may be a reduction in overall claims in the longer term. Future evaluation of these impacts could make use of the following metrics:

- Number of new claims (major and minor) opened per financial year
- % of new claims that recover at work
- Average length of time to return to work for new claims opened after start of the Strategy.

Given the lag time expected between raising awareness and businesses taking effective action to support mental health at work, examining workers compensation claims data from FY20-21 for at least the next five years would be advisable to see the long-term impacts of the Strategy.

It is also important to note that the number of workers compensation claims may not be the most useful indicator of workplace mental health. A return-on-investment study on Mentally Healthy Workplaces in NSW noted 'the pattern of workers' compensation claims across industry or occupation does not match the pattern of standard workplace psychosocial risks, mental ill-health prevalence or presenteeism and is not just a representation of the extreme end of these, or the "tip of the iceberg"' (Yu and Glozier, 2017). This finding highlights the importance of considering workers compensation claim data as part of a broader evaluation rather than in isolation.

WAYS TO IMPROVE DELIVERY

Use personas to simplify program design and increase cut-through

Stakeholders responsible for delivering the Strategy provided feedback that targeting at an industry level created issues with crafting and delivering tailored messages, campaigns, and tools which could effectively drive engagement with varied business owners. In addition, it was acknowledged this Strategy took a fairly broad view – targeting both employers and employees.

It was suggested that taking a persona-based approach, rather than trying to tackle larger cohorts such as an industry or size of business segment, would build on the human-centered design approach, which was considered an enabler of success in this Strategy.

A user persona, also known as a buyer persona, customer persona, or customer avatar, is a made-up character that represents ideal customer or user. Real users are frequently used as models to build personas, and the persona is merely a generalization.[11]

Examples of future MHW personas could be:

- *James*: a business owner of a small organisation with 20 staff delivering services to other small businesses in regional NSW
- *Tracey*: the WHS officer of a medium sized business in metro Sydney who has experienced a number of mental health workers compensation claims over the last two years)

[11] https://www.forbes.com/sites/mikekappel/2019/09/04/user-personas-are-the-missing-links-you-didnt-know-you-needed Accessed 22 Nov 2022

Delivery stakeholders identified that persona-led approach would simplify future MHW program design and measurement by making it more targeted and specific. This approach would address one of the identified barriers to delivery success – having a clear focus on the customer and crafting message specific to them.

SafeWork stakeholders acknowledge that they "never nailed the different personas [they] were trying to reach" and they noted that it was challenging to deliver two separate messages – one to employers and one to employees.

Workplace stakeholders also indicated that they would get more benefit from persona-led interventions and tools. They recommended that the design of tools and programs were done "with a business hat on". They suggested that rather than simply promoting a program (e.g., "use People At Work"), that they would be more likely to engage with the program if it was communicated to them tapping into their drivers and pain points.

> *"Don't just tell me to use People At Work. Tell me how long it's going to take. What are the skills I'm going to need and what are the outcomes I'm going to get? If you're going to ask me to do the workplace assessment, give me the outputs in a way that's useful for a business person."* Workplace stakeholder

Improve referral tracking and measures of reach and engagement

There was limited referral tracking in this Strategy, which means it was impossible to understand the true reach of campaigns and programs. Further, the lack of referral tracking meant that there is limited understanding of how communications about workplace mental health spread through target cohorts.

The limitations in referral tracking also make it difficult to attribute engagement to specific campaigns. One exception was the use of Urchin Tracking Modules (UTMs) in the digital campaigns shared by Ambassadors. UTMs allow the tracking of performance of each unique links so it is possible to understand where your traffic is coming from. For example, if a business owner contacted an Ambassador to ask a question and was subsequently referred to the MHW website, it is almost impossible to include this activity in the measure of awareness generated. However, if they were provided with a link that used a UTM, it was possible to tracking the digital content that was shared by Ambassadors

> *"I think I've had around 40 people reach out to me about resources and I've pointed them all towards SafeWork NSW. That's one way that I can help distribute their information."* Expert stakeholder

It was suggested future strategies might consider the ability to track a customer journey and identify ways to measure referrals to provide greater insight into which initiatives are driving engagement, through which channel, and then what the subsequent outcome is.

Adopt a more agile approach to project delivery when working with shared services

SafeWork delivery teams engaged shared service functions to deliver components of the strategic initiatives, particularly for awareness campaigns and the marketing components of other projects. Stakeholder feedback through this Evaluation indicated that the requirement to use shared service functions, at times, created barriers to delivery and delays.

The waterfall approach to project management adopted with shared service teams resulted in campaign creative – the foundation of promotional activity – being finalised too close to campaign launches. Delivery stakeholder feedback identified that this approach impacted project success and increased stress in the team. Delivery via a waterfall method extended to the IT projects too and stakeholders provided feedback that the approach created delivery bottlenecks.

Future strategies might consider adopting a more agile approach to project delivery to mitigate delivery risk and smooth some of the delays incurred by dependencies on other teams.

> *"Next time take we should take more time breaking the project into parts so it is manageable as a team. We should resource better for planning and design, not just for getting stuff done."* Delivery stakeholder

CONCLUSION AND EVALUATION ASSESSMENT

CONCLUSIONS

The strategy contributed to improved workplace mental health in NSW	Both quantitative and qualitative data sources indicate that there has been an improvement in the number of mentally health workplaces during the Strategy period. The simplest way to report this is via the Strategy's headline outcome measure - The goal of "over 90,000 businesses taking effective action to create mentally healthy workplaces" was achieved, with 92,933 businesses taking action in 2022. (BMT, Sept 2022). Workplaces that participated in the Strategy's activities reported largely positive outcomes as a result of their engagement. Benefits experienced included increased confidence and knowledge in relation to workplace mental health, and improved skills in supporting others with their workplace mental health needs. The adaptations made to Strategy tools and engagement activities during the COVID-19 pandemic ensured relevance during this period.
Evidence-based tools created a global benchmark for good practice.	The evidence-based, free tools for employers are perceived as setting a global benchmark for what good practice looks like in supporting workplaces become mentally healthy. *"It's being held up internationally as a benchmark around the world for what to do for organisations. It's fantastic." Expert stakeholder*
Stakeholders offered valuable insights for the future of the MHW Strategy	Feedback from all stakeholder groups included in this Evaluation expressed their strong support for the MHW Strategy to be extended. The pervading sentiment was that awareness had been raised through the 2018 – 2022 Strategy, and that the next Strategy should focus on supporting employers implement changes to make their workplace more mentally healthy. Specific ideas offered by stakeholders included: ▪ Extending the evidence-based approach to cover implementation and project engagement ▪ Use of employer personas to more effectively tailor projects to the needs of those engaging with them. ▪ Increase investment in the planning phase of project development to minimise deliver risk and plan for capture of appropriate outcomes data. ▪ Showcase the application of tools to highlight the usefulness and applicability to businesses. ▪ Consider including five strategic pillars into future strategies: evidence-based, digital first, human-centred, measurable, and innovative.
There was strong stakeholder engagement from start to finish	The Strategy's design process was comprehensive and involved broad consultation, the establishment of a Design Steering Committee with key industry stakeholders, and strong engagement with academic experts. Stakeholder engagement remained high during throughout the strategy implementation period, and reflects the collaborative, human-centred approach taken by the project team. SafeWork's sustained focus on stakeholder throughout the Strategy was also called out as an enabler of the Strategy's effective delivery.

Consider data requirements for outcome measures upfront	Although the original Strategy document provided a detailed list of outcome measures, inconsistencies, and challenges in data capture and as well as changes at the individual project level resulted in variations in outcome reporting. Some outcomes were unable to be measured – particularly impact quantification in terms of financial and social return. Additionally, fragmented data sources made the aggregation of results for reach and referrals impossible. Future strategies might consider mapping data sources and metrics to outcomes in the program logic or by mapping end-to-end user journeys and using them to identify outcome and success metrics.
Follow on strategy to focus on embedding change	There is overwhelming support for the MHW Strategy to continue, albeit with a shift in focus from awareness raising to embedding mentally healthy workplace practices. *"There needs to be a massive push to help organisations to do what we're asking them to do because the capability set doesn't exist within organisations, nor does it exist within the provider landscape. There are all these dodgy providers popping up who claim to be experts in this space, and I think there's a big role for SafeWork NSW and other authorities to help people understand what good looks like and where to go to get it."* Expert stakeholder

EVALUATION ASSESSMENT

The following table presents an overall assessment of achievement against the key evaluation questions for the Final Evaluation, taking into consideration the data available. It is intended to be a general indicator of progress, with assessments ranging from Not Achieving / Progressing / Partially Achieving / Achieving. Not Applicable (N/A) has been included when it is not possible to assess progress.

See Appendix B for a full table of all evaluation questions and sub-questions across the life of the Strategy.

Table 3: Evaluation Assessment

Domain	Key evaluation question	Key Findings	Assessment
Implementation	**To what extent were the activity streams and projects implemented as intended?**	The MHW Strategy was flexible and adaptive to challenges, emerging evidence, and the changing needs of consumers. Responding to the Covid-19 pandemic required some programs and activities to be adapted. The pandemic also increased challenges for businesses and the level of support that was required. In addition, new focuses (i.e., the construction industry and regional businesses) evolved during the strategy. The consistent review and refresh process that was allowed the work under the strategy to be focused on emerging needs and expanding and building on successes.	N/A
	Were initiatives selected based on the best available evidence?	The MHW Strategy has focused on evidence in two ways — by (a) ensuring that programs and activities implemented under the Strategy align with current evidence of best practice and (b) partnering with expert academics to conduct research to further build the evidence base about mental health at work.	Achieved
	What barriers and enablers influenced implementation of the activity streams and projects, and how effectively were these addressed?	The MHW Strategy was a complex whole of NSW Government project with multiple agencies and external partners involved in delivering activities and programs. The Strategy included a wide range of interventions and supports focused on different workplace needs, industries, and business sizes. While stakeholders universally agreed that working with SafeWork NSW was a positive experience, the multi-agency approach did create some challenges for delivery.	N/A

Domain	Key evaluation question	Key Findings	Assessment
Reach	**How effective were the activity streams in reaching their target audiences?**	The overall reach goals for the strategy were met as were most of the program specific reach goals, however targeting of high-risk industries was not as successful as intended. Vendor marketing and telemarketing campaigns were identified as particularly effective in driving engagement.	Partially Achieved
Short term outcomes	**Has the MHW Strategy resulted in an increase in workplace mental health awareness and understanding for NSW employers, employees, and the community**	Levels of awareness and engagement in employers and employees reported in the BMT have increased since the beginning of the strategy. This finding is consistent with reports from employers in in-depth interviews of increased awareness and understanding about how mental health applies to their workplace. The Code of Practice has been particularly influential in raising employer awareness of the importance of mental health at work.	Achieved
Medium term outcomes	**Are NSW employers utilising workplace mental health products, resources, training, and services?**	NSW employers are utilising the range of workplace mental health products, resources, training, and services provided under the strategy however, targeting of businesses with high risk in this area could be improved. Additionally, there are opportunities to highlight the value of the products, resources, training, and services developed under the MHW Strategy (as compared to other products in the mental health at work sector).	Achieved
	Have NSW employers planned and implemented new initiatives to improve workplace mental health?	Data from the BMT indicates that the number of NSW businesses taking effective action or integrated & sustained action on workplace mental health has increased 22% since 2017. This finding was reflected in the in-depth interviews conducted with employers who universally identified that they had made changes in their workplaces as a result of the training and intended to continue to work towards improving mental health at work.	Achieved
Long term outcomes	**Have employers demonstrated a capability uplift in creating mentally healthy workplaces?**	Both quantitative and qualitative data collected as part of the final evaluation indicated that there have been improvements in employers' confidence and capability to create mentally healthy workplaces. The numbers of businesses taking effective action to ensure a mentally healthy workplace have increased over the life of the Strategy and this aligns with findings from interviews with employers who had participated in programs under the MHW strategy.	Achieved

DISCLAIMER

This report is dated 21 February 2023 and incorporates information and events up to that date only and excludes any information arising, or event occurring, after that date which may affect the validity of Urbis Pty Ltd **(Urbis)** opinion in this report. Urbis prepared this report on the instructions, and for the benefit only, of SafeWork NSW **(Instructing Party)** for the purpose of Evaluation **(Purpose)** and not for any other purpose or use. To the extent permitted by applicable law, Urbis expressly disclaims all liability, whether direct or indirect, to the Instructing Party which relies or purports to rely on this report for any purpose other than the Purpose, and to any other person which relies or purports to rely on this report for any purpose whatsoever (including the Purpose).

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APPENDIX A PROJECT IMPLEMENTATION AND ACHIEVEMENTS

IMPLEMENTATION AND ACTIVITIES

Since June 2018, SafeWork has progressed individual projects in each of the four streams of the Strategy. There are 20 projects across four streams, most of which are managed by SafeWork. At the conclusion of the Strategy period, there were some projects which had not been started and others that remained in progress, however, the majority of projects are complete.

Table 4: Summary of projects under the refreshed strategy

Stream	Project Name	Project Summary
Awareness raising	Ambassador Program	Collaborate with business leaders and entrepreneurs to use their influence, networks, and communication channels to share key messages to motivate widespread employer action to create mentally healthy workplaces.
	Media Campaign	Improve knowledge of mental health at work including WHS roles and obligations, improve confidence to support others who are experiencing mental ill-health, build skills to manage your own mental health and increase leaders' skills to prevent harm and embed support for mental health into their daily operations (systems, practices, and work environment).
	Regional Education	Upskill employers, industry associations and allied health professionals by taking the message to the bush.
	Website (nsw.gov)	Provide a self-service hub with prevention-focused practical guidance and evidence-informed tools and resources with a focus on small and regional businesses.
Evidence informed interventions	Mental Health at Work Training (previously Managing for Team Wellbeing/Manager Training and Your Mental Health at Work)	Improve mental health literacy, increase confidence to support workers with mental illness and increase capability to design and manage work to minimise harm. Includes a sub-project focused on the transport industry, as well as support targeting the broader workforces.
	Peer Support	Help workers build strategies and capability to proactively manage their mental health.
Research	Data Guide (Previously 'Data driven')	Help small and medium businesses use data effectively to create mentally healthy workplaces
	Investing in Research (delivered by CWHS) Study 1: Managing mental health at work: A systematic review of interventions Study 2: Facilitators, motivators, and barriers to improved management	Lead positive change by modelling best practice and promote the actions taken using government communication channels. Provide templates and resources tailored for the government sector.

Stream	Project Name	Project Summary
	of psychosocial risks at work Study 3: Developing competencies in work design for psychosocial risks"	
Building employer confidence and capability	Direct Practical Coaching (builds on learnings of WHS Advice project)	Provide micro, small, and medium businesses with access to practical one-on-one coaching they need when they need it.
	Lead NSW Government sector best practice (Government Sector Best Practice)	Increase awareness of the workplace's importance in mental health by directing employers and workers to mentalhealthatwork.nsw.gov.au for online practical resources to improve the understanding that providing a healthy workplace is part of WHS obligations, and to motivate action.
	Prevention Focused Regulatory Services	Strengthen the Regulatory Framework and provide clarity on compliance to ensure employers manage psychological hazards and provide psychologically safe workplaces
	Workplace Assessment (WHS Advice)	Expert assessments and advice to build capability to assess and manage mental health risks, create a positive workplace culture, and design work to be safe
	Workplace Collaboration (previously 'Collaboration and Mentoring')	Encourage and facilitate collaboration between employers and across industries to build capability and implement mental health initiatives. Key stakeholder groups: NSW Mental Health Commission, Property NSW, NSW Health, SIRA, icare, FACS, Workplace Health and Safety QLD
	Workplace Wellbeing Assessment	A digitised tool that workplaces can survey their workers, leaders, exec to get a full comprehensive report.
Other	Healthy inclusive workplaces for Aboriginal people (Diversity & Inclusion - Ambassador Roundtable theme)	Provide culturally appropriate MHW messaging to employers of Aboriginal staff in healthcare and social assistance, construction and public administration and safety in metro and regional areas, by 30 Sept 2022.
	High risk industry support	Increase confidence, build skills, and motivate action to improve mental health at work through providing and promoting practical resources tailored to high-risk industries/sectors.
	Self-service Resources	Self-service resources and tools to support DIY and Direct Practical Coaching

Stream	Project Name	Project Summary
	Benchmarking Tool RE-execution	Re-execution of the BMT survey at the end of the Strategy

An overview of each individual project, its progress and its key achievements to date are reported on separately

PROJECT PROGRESS

This section provides a summary of the 14 SafeWork projects. It includes an overview of each project and its objectives, key achievements within the evaluation timeframe, and the current progress of the project as of 30 June 2022, unless otherwise stated.

MEDIA CAMPAIGN

Awareness raising | **Status** | Complete

Overview

The media campaign aimed to increase awareness of the role of the workplace in mental health.

Key Achievements and outcomes

- The five media campaigns delivered through the Strategy resulted in a total reach of 312, 981 and 9,401 click-throughs to the relevant webpage.
- The initial launch of the media campaigns was delayed to year two of the Strategy due to delays in cabinet approvals, followed by the election shutdown, and a change in Minister.
- Navigating peer review and government approvals processes took time for the delivery team to understand. Campaign execution became more efficient as these processes were better understood.
- The digital program with DPC delivered below expectations because of timing (it ran over the end of January and the start of February, when businesses were coming out of the holiday period, Covid-19 was still running, and the market was just starting to open again. There were also some messaging issues.
- The QR campaign also didn't perform as intended. Stakeholders reported that the philosophy around what they use them for needed to be improved and that campaigns such as this should be more purposeful – users need to know where scanning the code will take them. Stakeholders also reported that the content and presentation could also be improved.

PREVENTION FOCUSED REGULATORY SERVICES

Awareness raising	Status	Complete

Overview

The prevention-focused regulatory services provided inspector training and collaborated with others to design and deliver workplace mental health programs, services, and resources.

Key Achievements and outcomes

- There were 9 internal training sessions provided to inspectors and 23 information sessions throughout SafeWork, with2,045 people participated in inspector-led training sessions in total to 30 June 2022.
- There were 124 presentations to external stakeholders, 89 external events attended by MHW team, and 55 consultations led or attended by MHW team.
- In collaboration with the construction sector, there were 2 video case studies developed, 5 newsletter and media articles published and 3 construction industry presentations and promotional events.
- There was a total of 279 Black Dog Institute training registrations from the construction business, and 192 sign ups from this sector for the Workplace Health and Safety Advice Program. Of these sign-ups, only 13% completed the training, indicating a decrease in engagement with the Strategy following initial awareness.
- There is evidence that managers have greater understanding of mental health awareness due to participation in training.

WEBSITE

Awareness raising	Status	Complete

Overview

The website provides access to prevention-focused, practical guidance, and evidence-informed tools and resources to help create mentally healthy workplaces. There have been two websites developed over the course of the Strategy.

Key Achievements and outcomes

- The original website was successfully developed and launched in rapid timeframe between June and October 2018 and was live until 30 September 2021. A new website was launched July 2021.
- A website user experience review was conducted by Boomworks in 2020. The review found that the website users were happy with the content but experienced some difficulties in navigating the website to find information. The visual elements of the website including layout and colours were well received. There was also feedback that a strong brand identity, separate to other government institutions, was important for website users, and that this should continue to be a focus for the Mentally Health at Work website.
- There were 139,505 users of the website over the Strategy period, including 94,592 new users from July 2021 to 30 June 2022 and there were 633,552 unique pageviews. There were 31,115 pageviews for all resource kits and 16,351 website registrations, resulting in the collection of 7,433 unique email addresses.
- October and November 2021 had the most monthly returning users to the website, with 10,680 and 12,637, respectively. October 2021 also saw the most new users to the website, 22,865. This coincides with the timing of a Workplace Pulse Check media campaign in October 2021.

MANAGING FOR TEAM WELLBEING / MENTAL HEALTH AT WORK TRAINING

Evidence-informed Interventions	Status	Complete

Overview

Formally known as Manager Training, this project aimed to improve mental health literacy, increase confidence to support workers with mental illness, and increase capability to design and manage work to minimise harm. It included a sub-project focused on the transport industry, as well as support targeting the broader workforces. The project was delivered in partnership with the Black Dog Institute.
The project was split into multiple training offerings:

- Leading Mentally Healthy Workplaces – designed for senior organisational decision-makers and delivered through a one-hour facilitated discussion either face-to-face or online.
- Your Mental Health at Work Training – designed for all employees and provided in three delivery modalities: face-to-face workshop, online interactive workshop, self-paced eLearning modules.
- Managing for Team Wellbeing – designed for managers and team leaders and delivered through a three-hour facilitated workshop either face-to-face or online.
- Managing for Team Wellbeing, HeadCoach eLearning modules – delivered via three self-paced eLearning modules.

Key Achievements and outcomes

- The project was successfully developed and launched in partnership with the Black Dog Institute.
- This was the most utilised project in the Strategy, with 25,841 individuals trained, exceeding the target by 190 people.
- There was an average conversion from training registration to scheduling of 42%, 8% less than the target. The average eLearning completion rate was 1% above the target of 60%.
- The majority of participants were from metro areas (84%) and medium-sized businesses (66%).
- Your Mental Health at Work training had a higher representation of construction workers relative to other products.
- Directly after training 99% of managers intended to implement ideas into their workplace
- At a 3 month follow up 70% of managers reported that their management of staff mental health and wellbeing had improved and 55% reported that they were more likely to use a health approach (rather than performance management) to staff distress/under-performance
- The training had positive impacts on managers' overall knowledge, understanding, and confidence of mental health wellbeing, and a positive overall rating on its effectiveness, engagement, ease of online navigation, and quality of information.
- The three most common types of activities that participants reported they would start doing included initiating conversations about mental health in the workplace (49%), examining resources and sharing resources more broadly (24%), and implementing changes related to workload and role design (17%).

PEER SUPPORT

Evidence-informed Interventions

Status In progress

Overview

The peer support project intends to increase support for at-risk workers, reduce barriers to help-seeking, and reduce sickness absence through a peer-based intervention.

Key Achievements and outcomes

- Content for this project went live on the Strategy website in late July 2022 and has been included in the Actions page rather than its own separate page. In this, the project has not been promoted independently and reach cannot be measured at this point.
- The scope of the project has changed significantly from the launch of the original strategy due to changes in internal project leads, prioritisation of larger projects and changes in the market such that there were other peer support kits and resource toolkits available to promote to achieve project objectives.

RESEARCH INVESTMENT

Research

Status Complete

Overview

Funded by SafeWork and conducted in partnership with the Centre for Work Health and Safety (CWHS), this project was a qualitative study exploring the barriers and facilitators to managing psychosocial risks at work encountered by businesses and workers.[12]

Key Achievements and outcomes

- The qualitative study was co-designed with the NSW CWHS and explored the barriers, facilitators, and motivators to managing psychosocial risks within the workplace.
- 34 one-on-one interviews were conducted with organisational representatives who were involved in the management of psychosocial risks from the four key high-risk industries identified in the Strategy were conducted. The most common barriers to managing mental health at work included:
  - A lack of organisational expertise related to mental health at work
  - Limited understanding of mental health concepts and the relationship between mental health and a safety/risk management approach due to inconsistent mental health terminology
  - Poor leadership support and mental health competency
  - Poorly defined responsibility for managing psychosocial risks
  - A lack of organisational focus on psychosocial risk control
- Organisations also identified a number of ways in which they would address these barriers including: increased leadership and management competency in mental health, increased resources to implement interventions, increased ability to use work design, more industry level leadership in the management of psychosocial risk, and easily accessible resources.
- This research helps address the mental health at work literature gaps and support the development of evidence-based workplace mental health tools.

[12] Mayland et al, Facilitators, motivators, and barriers to improved management of psychosocial risks at work, August 2021

APPLIED RESEARCH

Research	Status	Complete[13]

Overview

Funded by SafeWork and conducted in partnership with the Centre for Work Health and Safety (CWHS), the applied research study developed and tested an intervention – the Psychosocial Hazard Work Re-design tool (PHReD-T) – to improve the management of mental health at work.

Key Achievements and outcomes

- The Psychosocial Hazard Work Re-design tool (PHReD-T)" was an intervention targeted at improving the competency, skills, and confidence of WHS and HR personnel in re-designing work as a control for psychosocial risks[14].
- Over 8-weeks, 23 participants were guided through information, case-studies, and activities related to psychosocial risks and work re-design, and then led through a work re-design tool that focused on a particular scenario in their own workplace.
- The tool also includes structured consultation on the action plan that is developed, and a summary of the action plan for senior managers.
- Participants provided generally positive feedback on the tool, the approach, and the supporting materials, and confidence in being able to identify psychosocial risks, undertake work design, and manage mental health at work all increased following the intervention.
- This research helps address the mental health at work literature gaps and supports the development of evidence-based tools to improve workplace mental health.

DATA DRIVEN

Research	Status	Delivered Jan 2023

Overview

The data driven project intends to help workplaces use data effectively to create mentally healthy workplaces. This project was renamed 'Data guide' and is yet to be published.

Key Achievements and outcomes

- The project was outsourced to a vendor in early 2021, with this vendor engaging a third-party expert to execute research to inform the resource and write the resource.
- The expert completed a high-level rapid Literature Scan Summary of the constructs that make up mental health at work, and found organisational outcomes are likely the most accessible measures of employee mental health,
- There was a change in scope from a Data Framework to a practical Data Guide for small businesses to use, and the work is now being completed in-house at SafeWork.
- The project was put on hold multiple times and delayed due to changes in project leads, and larger projects taking priority.

[13] Note: this report is in draft status, awaiting publication.

[14] Caponecchia et al, DRAFT Report: Developing competencies in work re-design for improved mental health using the Psychosocial Hazard Work Re-design tool (PHReD-T), June 2022

WORKPLACE ASSESSMENT

Building Employer Capacity

Status Complete

Overview

The collaboration and mentoring project aimed to encourage and facilitate collaboration and mentoring between employers and across industries to build capability and implement mental health projects through online case studies. The main product offering is the Direct Practical Coaching service, wherein businesses or not-for-profit organisations can access free mental health coaching to help create a mentally healthy workplace.

Key Achievements and outcomes

- The Direct Practical Coaching (DPC) program targeted companies in high-risk industries.
- As of 30 June 2022 there had been a total of 789 triage calls and 566 businesses received guidance through the program, 105 of which were from high-risk industries.
- Medium and small businesses make up the largest proportion of users – 84% of triage calls and 79% of businesses who receive guidance.
- 31% of engaged businesses were from regional NSW, with the customer list primarily being made up of businesses in the private sector.
- DPC has positive feedback, with participants reporting on average that they feel better equipped to addressing mental health at work (96%), intend to keep working towards a mentally healthy workplace (96%), their coaching needs were met (96%), and they made changes from the coaching (91%).
- Of the business who participated in DPC, 92% agree their capacity to take action to create a mentally healthy workplace had increased.

WORKPLACE ASSESSMENT

Building Employer Capacity

Status In Progress

Overview

The WHS advice project aimed to provide individual organisations with expert assessments and advice to build capability in assessing and managing mental health risk.

Key Achievements and outcomes

- Program developed and launched in partnership with service provider Assure.
- In 2019, an independent review was conducted of the program and the recommendations resulted in program adaptations and procuring a new provider.
- As of September 2020, 359 organisations are currently actively engaged in the program and 298 development interviews have been conducted with participating organisations to build capability in assessing and managing mental health risk.
- As of September 2020, more than a quarter (31%) of the targets have been met (154 out of 500 organisations have completed the program).
- As of June 2021, 387 development plan interviews were conducted, reaching 77% of the target of 500 businesses. 348 twelve-week checks were conducted, with 294 of these businesses completing the final six-month program evaluation.
- Of the businesses who completed the final evaluation, 66% demonstrated a positive increase in mental health capability with 97% of businesses making positive progress towards their goals.

RECOGNITION

Building Employer Capacity	Status	Cancelled

Overview

The Recognition project was intended to contribute to awards, rewarding best practice employers based on their capability to provide mentally healthy workplaces.

Key Achievements and outcomes

The recognition project did not proceed and as such no data is available.

GOVERNMENT SECTOR BEST PRACTICE

Building Employer Capacity	Status	In Progress

Overview

The Government Sector Best Practice project aims to include mental health in an integrated WHS framework. The project aims for SafeWork to lead by example and to provide guidance and resources for workplaces to consider the impact on mental health in the design of future policies and processes and improve mental health outcomes.

Key Achievements and outcomes

- An initial webpage was published mid Strategy for Government sector.
- As of June 2022, the government webpage content and resources were in a final stage, with uploads to the website rescheduled to July.
- According to a June 2022 MHW Strategy Progress Report, the project is significantly behind schedule and has started the following activities: communications strategy draft and implementation, needs analysis, developing priority resources, developing government case studies and evaluation information in Project Charter.

SELF-ASSESSMENT TOOL

Building Employer Capacity	Status	Complete

Overview

The Self-Assessment Tool is an interactive online tool for workplaces to identify gaps or areas for improvement and take informed action.

Key Achievements and outcomes

- The Mental Health Capability Check launched successfully and was available on the Mental Health at Work website
- A total of 4,534 businesses have completed the Mental Health Capability Check, with more than half classified as either Level 1 basic awareness or Level 2 intention.
- As of November 2022, there had been 63,742 unique pageviews to the Workplace Pulse Check (WPC) landing page, resulting in 8,344 completions and 1,037 people downloaded their report.
- Businesses in metro areas make up the majority of those that have used the Workplace Pulse Check (73%).
- The sector with the highest proportion of WPC completions is Healthcare and Social Assistance (31% of the total), followed by Arts and recreation (18%), and Education and training (18%).
- 1037 businesses have downloaded their WPC report, and 1,216 have received it via email.
- Of those that completed the Workplace Public Check, almost half (n=3,299) received a result of 'Level 2 intention'.
- The Workplace Wellbeing Assessment tool went live in October 2022.

AMBASSADOR PROGRAM

Awareness raising	Status	Complete

Overview

Collaborate with business leaders and entrepreneurs to use their influence, networks, and communication channels to share key messages to motivate widespread employer action to create mentally healthy workplaces

Key Achievements and outcomes

- The 12 Ambassadors published 266 social media posts about MHW between 2020 and 2022 and reaching 454,037 people organically. SafeWork amplified the organic reach of the Ambassador program, reaching an additional 1,215,072 people via a paid campaign
- Ambassadors hosted or attended 25 events and supported 2 Ministerial Roundtables
- There were 1,860 MHW Ambassador unique webpage views (sourced via organic Ambassador UTMs).
- The Ambassador program extended the organic and paid reach that SafeWork generated.
- Moved activity into an action-focus where each Ambassador has an action plan that sets out activities that they will undertake to drive longer-term positive change within a sector
- "This project really got legs and has been implemented very successfully, in actual fact it probably exceeded expectations." (Delivery stakeholder)

PUBLIC COMMITMENT

Building Employer Capacity	Status	Cancelled

Overview

The Public Commitment project was planned to enable and encourage employers, workers and the community to publicly commit to act to improve mental health in NSW workplaces.

Key Achievements and outcomes

The recognition project did not proceed and as such no data is available.

BENCHMARKING TOOL

Building Employer Capacity	Status	Complete

Overview

The Benchmarking Tool project was initially used to identify the initiatives for inclusion in the NSW Mentally Healthy Workplaces Strategy. The tool was then available as a measurement tool with which to assess the effectiveness of the strategy implementation.

Key Achievements and outcomes

- The tool was developed, and a baseline measurement was taken with participation from approximately 2,000 NSW workplaces in 2017.
- The tool was validated in 2020, and re-administered by Instinct and Reason in 2020 and 2022
- The 2022 BMT results provide an end of strategy period measure of performance and show that an additional 22.3% of NSW businesses are in the effective action or integrated & sustained category compared with the 2017 baseline.
- BMT inferential statistics provide evidence to support the achievement of the strategy's headline objective: "have more than 90,000 NSW businesses taking effective action to create mentally healthy workplaces by 2022"
- Findings from the BMT demonstrate that there were improvements in the average segment scores in all four target industries, and, with the exception of information, media and telecommunications, the improvements were all statistically significant.
- The 2022 BMT indicates that employers in regional businesses continue to rate their performance better than their metropolitan counterparts. Scores for both areas have improved since 2017 - regional up 0.32 and metropolitan up 0.17.
- The results of each instance of the BMT implementation show that the average rating of employer capability improved each time: 2017 was 2.59, 2020 was 2.68, and 2022 was 2.79. Please note the BMT is not a longitudinal study as respondents and company representation differs between reporting periods.

SIRA LED PROJECTS

Recovery at Work	Status	In progress

Overview

SIRA has been active in implementing various recovery at work projects as part of the Evidence-Informed Interventions stream of the Strategy.

Key Achievements and outcomes

- SIRA noted in consultation that they have embedded lived experience principles into programs and have valued the opportunity to build networks and working relationships across government agencies.
- Grants provided to pilot programs - SIRA implemented Recovery Boost, a program that provides grant funding to programs to assist with mental health recovery at work, with a focus on building the evidence base. SIRA are currently monitoring 20 grants, with an evaluation of the program currently underway. SIRA stakeholders reported that reach for this program has increased on a yearly basis, reaching a purposely diverse target audience (for example, micro and smaller businesses, regional and rural workers, and Aboriginal and Torres Strait Islander audiences). They suggested that this reach may be assisted by the monetary offer of the program. They also noted that the implementation of a number of Recovery Boost projects was delayed by the COVID-19 pandemic, as many relied on universities, hospitals, and face-to-face workshops.
- Toolkit of resources developed - To guide workplaces to respond to mental health issues in the workplace, and in response to stakeholder feedback, a toolkit of evidence-informed resources including from Beyond Blue and R U OK? was compiled. The Toolkit translates the findings of the 2019 Monash University report into recovery at work tools providing employees with information on topics such as how to have conversations with managers about workplace adjustments, connecting with friends and family and maintaining a work routine. The SIRA Recovery at Work lived experience reference group have reviewed the Toolkit and are currently co-designing an expanded Toolkit resource, which will include the SIRA-funded READY? disclosure tool, an evidence-based website developed by the University of Sydney to help workers decide whether to disclose their mental health issue to someone at work. SIRA representatives noted in consultation that it was challenging to effectively reach the target audiences with projects like the toolkit due to the amount of existing mental health content in the market.
- Lived experience projects developed to inform future projects. SIRA have developed a Lived Experience Engagement Framework and a reference group involving people with lived experience to ensure the voice of people with lived experience is designed into future mental health projects. Stakeholders from SIRA note that a key contributor to the toolkit was the Recovery at Work Lived Experience Reference Group, with the organisation remaining invested in this group and embedding co-design into more of their activities.
- Peer-run mental health support line pilot. SIRA funded Hear2Talk, a free, independent, and confidential phone support service connecting NSW employees and employers with skilled mental health peer workers with their own lived experience of mental health challenges in the workplace. A pilot program, Hear2Talk contributes to the growing body of evidence on the effectiveness of mental health peer support and is currently under evaluation.
- Research commissioned. SIRA have commissioned a range of workplace mental health research pieces. Monash University completed a multi-stage intervention mapping project into prevention and management of psychological injury claims. The intent of the project was to strengthen SIRA's understanding of current psychological injury practices, along with the evidence base for best practice

intervention. The project was conducted in three stages: 1) A review of existing evidence combined with interviews with key stakeholders, 2) a survey of professionals involved in the management of psychological claims, 3) a workshop with experts in the management of psychological injuries. SIRA also commissioned Newcastle University to conduct qualitative studies into the impact of mental health on small and micro businesses during the Covid-19 pandemic, with the aims of understanding stressors for smaller businesses during crisis, and strengthening the evidence base for mental health tertiary interventions.

- SIRA has now published the Mental health recovery and support action plan in response to the recommendations https://www.sira.nsw.gov.au/resources-library/across-schemes/mental-health-recovery-and-support-action-plan

ICARE LED PROJECTS

Building Employer Capacity

Status In Progress

Overview

icare contributed to all streams of the Strategy, with several projects implemented as part of these streams.

Key Achievements and outcomes

- icare successfully piloted evidence-informed interventions targeted at stress, aggression, and mental health issues in the workplace. These pilots have mostly demonstrated success.
- The Respect and Resilience program was informed by research examining the causes of customer aggression in the retail sector. Recognising the impact customer aggression can have on employee wellbeing, the program trains retail staff to de-escalate customer aggression and engage in self-care. This pilot has demonstrated reduced incidence of customer aggression and increased capability of employees to deescalate challenging customer behaviour. This program has now been made available to NSW employers and government agencies with face-to-face, train the trainer and online learn versions available.
  - Interviewed stakeholders note that this project has been live for two years, with momentum building in both government and non-government sectors.
- icare launched Front of Mind, which is an integrated five year program which involves collaboration with expert mental health researchers, the Black Dog Institute, University of New South Wales, Phoenix Australia, University of Sydney (Matilda Centre) and several government agencies to design and deliver a program of work that seeks to reduce the rates and associated burden of psychological injury that occurs as a result of exposure to traumatic incidents, workplace stressors and/or bullying and harassment. The program consists of projects focused on optimising the mental health of frontline workers and developing resilience in high-risk occupations. The program has been live for two years during which intervention co-design and intervention pilot phases have been progressed.
- icare launched Design for Care, a three-year program which involves collaboration with Curtin University (Centre for Transformative Work Design) and aims to support innovation in work design to understand the psychosocial hazards and risks that exist in the healthcare and social assistance industry in the private sector, such as residential and community care providers, and prevent workplace psychological injuries through good and sustainable work design practices. Phase 1 has focused on engaging with the industry on the potential of work design to address the risk factors contributing to psychological injuries and recruiting organisations to participate in the research to

understand if and how work design practices can address the risk factors, including psychosocial hazards and risks.

- The Social Connections toolkit was launched developed to assist with building positive social connections in the workplace to promote wellbeing an act as a buffer against mental health issues. The program has been developed using human-centred design (explore, build, test, learn, adapt, share) to underpin engagement with communities (employers, workers, locations). The toolkit is available on a dedicated icare Social Connection webpage on the icare public website where customers can view and download the tools and resources and online interactive workshop modules.
- The Sustaining Resilience at Work (StRAW) program is a project that trains peers to promote and provide social supports to prevent burnout in the workplace. Piloted in the NSW Correctional Services, participants reported increased knowledge of workplace mental health and increased confidence to seek support for mental health issues.
  - icare is considering the opportunity for this program to be further developed.

APPENDIX B FULL EVALUATION ASSESSMENT

Appendix B – Full Evaluation Assessment

Domain	Key evaluation question	Key Findings	Assessment
Implementation	**To what extent were the activity streams and projects implemented as intended?**	The MHW Strategy was flexible and adaptive to challenges, emerging evidence, and the changing needs of consumers. Responding to the Covid-19 pandemic required some programs and activities to be adapted. The pandemic also increased challenges for businesses and the level of support that was required. In addition, new focuses (i.e., the construction industry and regional businesses) evolved during the strategy. The consistent review and refresh process allowed the work under the strategy to be focused on emerging needs and expanding and building on successes.	N/A
	Were adequate resources allocated to research, develop, and deliver the MHW Strategy?	Many of the projects developed under the MHW Strategy were innovative and pioneering and this made it difficult to predict timelines and resourcing required. Internal stakeholders identified that establishing clear processes and procedures would help with resourcing and efficiencies for future work in in this area.	Partially achieved
	Were initiatives selected based on the best available evidence?	The MHW Strategy focused on evidence in two ways — by (a) ensuring that programs and activities implemented under the Strategy align with current evidence of best practice and (b) partnering with expert academics to conduct research to further build the evidence base about mental health at work.	Achieved
	Did input from stakeholders and people with lived experience of mental health issues shape the design of projects, and if so, in what ways?	The high level of engagement and involvement with stakeholders and those with lived experience was a particular strength of the MHW Strategy. The Strategy's design process was comprehensive and involved broad consultation with industry stakeholders, academic experts, and those with lived experience of mental health conditions.	Achieved

Domain	Key evaluation question	Key Findings	Assessment
		People with lived experience of mental health conditions were involved throughout the Strategy both in a governance and oversight capacity, and directly involved in the development of programs and services. Programs and processes were developed using a co-design model with customers to ensure that the products and services developed under the strategy met their needs.	
	What barriers or risks to implementation were anticipated and how effectively were these managed?	Barriers and risks were anticipated and managed through broad and meaningful sector consultation and stakeholder involvement throughout the lifespan of the strategy and application of available evidence. SafeWork stakeholders reflected positively on this process and how it has influenced the design and outcomes of the Strategy.	N/A
	What barriers and enablers influenced implementation of the activity streams and projects, and how effectively were these addressed?	The MHW Strategy was a complex whole of NSW Government project with multiple agencies and external partners involved in delivering activities and programs. The Strategy included a wide range of interventions and supports focused on different workplace needs, industries, and business sizes. While stakeholders universally agreed that working with SafeWork NSW was a positive experience, the multi-agency approach did create some challenges for delivery.	N/A
	To what extent did people with lived experience of mental health issues contribute to the implementation and evaluation of MHW Strategy activity streams and projects?	Including and valuing the input of people with lived experience of workplace mental health was evident throughout the planning and design aspects of the strategy and associated activities and programs. In addition to consultation, SIRA made a significant investment in developing and curating a reference group of people with lived experience of managing mental health challenges at work. This group was fundamental in designing, implementing, and reviewing initiatives led by SIRA. In addition, the lived experience reference group was fundamental in developing a framework for SIRA on how to engage in co-design with this group.	Achieved

Domain	Key evaluation question	Key Findings	Assessment
	How appropriate and effective were the governance arrangements in supporting MHW Strategy implementation?	The governance arrangements for the MHW Strategy were effective but complex. The overall governance structure enabled the use of a human-centred design approach to develop the Strategy. However, the segregation of the Strategy into workstreams and specific projects created a siloed structure of work which added a level of governance complexity due to the lack of data flows for reporting.	Achieved
Reach	**How effective were the activity streams in reaching their target audiences?**	The overall reach goals for the strategy were met as were most of the program specific reach goals, however targeting of high-risk industries was not as successful as intended. Vendor marketing and telemarketing campaigns were identified as particularly effective in driving engagement.	Partially Achieved
	What was the pattern of reach across all sectors, and specifically across high-risk sectors?	While precise patterns of reach were not able to be determined using the available data, higher levels of engagement were reported by employers in targeted sectors.	N/A
Short term outcomes	**Has the MHW Strategy resulted in an increase in workplace mental health awareness and understanding for NSW employers, employees, and the community?**	Levels of awareness and engagement in employers and employees reported in the BMT have increased since the beginning of the strategy. This finding is consistent with reports from employers in in-depth interviews of increased awareness and understanding about how mental health applies to their workplace. The Code of Practice has been particularly influential in raising employer awareness of the importance of mental health at work.	Achieved
	Are SafeWork NSW's workplace mental health products, resources, training, and services appropriate for the needs of high-risk sectors?	Under the revised strategy, the DPC program was targeted at high-risk industries, regional businesses, and small businesses. As of 30 June 2022, there had been a total of 789 triage calls and 566 businesses had received	Partially achieved

Domain	Key evaluation question	Key Findings	Assessment
		guidance through the program, 105 of which were from high-risk industries. Feedback from stakeholders was overwhelmingly positive.	
	Does SafeWork NSW direct targeted communication to high-risk sectors about available workplace mental health products and services?	While data was not available to directly measure reach to high-risk sectors, the Ambassador program was a notable success in this area with Ambassadors using their connections and credibility in their own sectors to improve communications and cut through with high-risk sectors.	Achieving
	Has the distributed communication reached high risk sectors?	Lack of referral tracking limits the conclusions that can be make about the reach of communications to specific sectors.	N/A
	Has funding been allocated for workplace mental health research?	No financial data was provided for the final evaluation.	N/A
	Have employers engaged with SafeWork NSW capability building initiatives?	Employers have shown good levels of engagement with programs, but engagement has largely been through businesses acting proactively. Businesses who hold high risk in relation to mental health at work should remain a target of future work.	Partially achieved
	What has impacted on engagement with these initiatives?	Pressures on businesses (related to Covid-19, time, financial, staffing, etc) have increased dramatically over the life of the Strategy, impacting engagement. Clearly communicating what is involved in participating in programs, time commitments, benefits, and outcomes to businesses in a practical way may improve engagement and retention rates.	N/A
Medium term outcomes	**Are NSW employers utilising workplace mental health products, resources, training, and services?**	NSW employers are utilising the range of workplace mental health products, resources, training, and services provided under the strategy however, targeting of businesses with high risk in this area could be improved. Additionally, there are opportunities to highlight the value of the products, resources, training, and	Achieved

Domain	Key evaluation question	Key Findings	Assessment
		services developed under the MHW Strategy (as compared to other products in the mental health at work sector).	
	What products, resources, training, and services have the highest usage rates?	Mental Health at Work Training is the most utilised project, with 10,484 individuals trained from June 2021 to June 2022. Workplace Pulse Check has a total of 8,344 completions, with 63,742 unique pageviews to the landing page.	N/A
	Is there any difference in usage rates across employers?	There are differing patterns of usage rates across different programs under the strategy. Medium and small businesses make up the largest proportion of users of direct practical coaching (84% of triage calls and 79% of businesses who receive guidance). The professional, scientific and technical services sector has the highest uptake in Mental Health at Work Training and use of Direct Practical Coaching of the high-risk industries. Mental Health at Work Training was primarily used by businesses in metro areas (84%) and medium-sized businesses (66%). There were five Key Sectors using Mental Health at Work Training: ▪ Healthcare and social assistance ▪ Professional, scientific, and technical services ▪ Education and training ▪ Other Services ▪ Construction	N/A
	What value do NSW employers place in workplace mental health products, resources, training, and services?	While no financial data was included in the final evaluation, employers frequently identified the programs provided under the Strategy being available at no cost as a significant benefit which allowed them to access support. All small	N/A

Domain	Key evaluation question	Key Findings	Assessment
		business owners identified that the programs being available at no cost as an enabler of participation.	
	What products, resources, training, and services are the most valued?	Employers who participated in evaluation interviews reported gaining the most value from the Direct Practical Coaching program as this could be targeted to meet the needs of each individual business. Mental Health at Work coaching was the most utilised project in the Strategy with 25,841 individuals trained to June 2022.	N/A
	Have NSW employers planned and implemented new initiatives to improve workplace mental health?	Data from the BMT indicates that the number of NSW businesses taking effective action or integrated & sustained action on workplace mental health has increased 22% since 2017. This finding was reflected in the in-depth interviews conducted with employers who universally identified that they had made changes in their workplaces as a result of the training and intended to continue to work towards improving mental health at work.	Achieved
	What is the uptake/participation by employees of new workplace mental health initiatives implemented by NSW employers?	Employers who participated in interviews as part of this evaluation all reported implementing 'whole of business' initiatives with many employers identifying that they had rolled out mental health training across their organisations. In addition, data from the BMT indicated that employees could identify significant and consistent growth in their workplaces acting to create mentally healthy workplaces suggesting that employees are involved with these initiatives.	N/A
	To what extent are new mental health initiatives sustained by NSW employers beyond initial implementation?	Data from the BMT indicates that employers are taking sustained action to make changes to support mental health at work. Employers who participated in interviews as part of this evaluation universally reported that they had made changes to their workplaces which had been maintained after their involvement with the programs had ceased.	N/A

Domain	Key evaluation question	Key Findings	Assessment
	Have research projects been undertaken?	Three key research projects were completed in partnership between SafeWork NSW and the Centre for Work Health and Safety. These were: 1. A systematic literature review on interventions to improve mental health in Australian workplaces. 2. A qualitative study that explored the barriers, facilitators, and motivators to managing psychosocial risks within the workplace. 3. An action research study testing an intervention targeted at improving the competency, skills and confidence of WHS and HR personnel in re-designing work as a control for psychosocial risks. SIRA has also completed two research projects with university partners. In partnership with icare, the following research projects were undertaken: ▪ Design For Care: – Monash University – Literature Review into Risk Factors for Psychological Injury (General Public Access) – Monash University – Retrospective Cohort Study on Psychological Injury in NSW's Healthcare & Social Assistance Industry (General Public Access) ▪ Front of Mind: – DRAFT – BDI / UNSW - A systematic review and meta-analysis of workplace mental health screening (Submitted to journal for peer review, awaiting acceptance) – UNSW – Randomised Controlled Trial of a Resilience Program versus Repeated Assessment on Psychological Distress in Correctional Officers in Australia (Submitted to journal for peer review, awaiting acceptance) – Griffith University - Literature Review – Mental health in high-stress occupations and work settings: A review of evidence-based strategies to protect mental health at work (Unpublished) – Matilda Centre - A systematic review of the efficacy, effectiveness, and cost-effectiveness of workplace-based interventions for the prevention and treatment of problematic substance use (Published in Elsevier Journal of Substance Abuse Treatment Nov-22)	Achieved

Domain	Key evaluation question	Key Findings	Assessment
		– Matilda Centre - A systematic review of the efficacy, effectiveness and cost-effectiveness of stepped-care interventions for the prevention and treatment of problematic substance use (Published in Frontiers in Public Health journal Nov-22) ▪ Respect and Resilience – Respect and Resilience in Retail and Fast Food: Approaches to reduce the incidence and employee impacts of dysfunctional customer behaviour (General public access) – Respect and Resilience: Development, Implementation and Program Evaluation (General public access)	
	Have meaningful research and findings been made available to workplaces, particularly those in high-risk sectors?	Reports on the three studies conducted in partnership with the CWHS were published in October 2022. The action research study completed as part of this research program was focused on the four identified high-risk industries, as per the NSW Mentally Healthy Workplaces Strategy 2018-22: Professional, scientific, and technical service industries; Information media and telecommunications; Transport, postal, and warehousing; and Manufacturing. Additional pieces of research made available include: ▪ When Size Matters: Creating Mentally Healthy Workplaces (SIRA publication with Newcastle Uni) ▪ Mental Health of Australian micro-business owners: Final research grant report (SIRA publication with Newcastle Uni) ▪ Recovery at work support tools rapid review (SIRA research) ▪ ▪	Achieved
	Are employers being enabled to apply evidence in their practices?	Data from the direct practical coaching program provides the clearest evidence of employers being enabled to apply evidence-based programs, interventions, and solutions in their workplaces. Of the business who participated in DPC, 92% agree their capacity to take action to create a mentally healthy workplace had	Achieved

Domain	Key evaluation question	Key Findings	Assessment
		increased, that they feel better equipped to addressing mental health at work (96%), intend to keep working towards a mentally healthy workplace (96%), their coaching needs were met (96%), and they made changes from the coaching (91%).	
Long term outcomes	**Have employers demonstrated a capability uplift in creating mentally healthy workplaces?**	Both quantitative and qualitative data collected as part of the final evaluation indicated that there have been improvements in employers' confidence and capability to create mentally healthy workplaces. The numbers of businesses taking effective action to ensure a mentally healthy workplace have increased over the life of the Strategy and this aligns with findings from interviews with employers who had participated in programs under the MHW Strategy.	Achieved
	Are there any areas of employer capability which are further progressed than others?	Results from the 2022 BMT indicate employers are more likely (when compared to results from 2017) to use data to inform the prevention of injury and illness in the workplace, to provide support to their staff, to monitor the uptake and use of support services, and to provide tailored education and training to staff. These results align with the findings from interviews with employers who reported making changes to awareness in their workplace, being aware of and addressing specific risks, and increases in the use of employer-provided support services.	N/A
	What differences in capability change is evident across sectors, particularly target sectors?	Comparisons between the 2017 and 2022 BMT indicate businesses of all sizes are showing improvement on key metrics; however, regional businesses self-rated their performance better than their metropolitan counterparts. The targeting of regional business may have contributed to this difference.	N/A
	Do employees report positive workplace mental health practices?	In the 2022 BMT, employees reported improved confidence in their workplace to effectively respond to mental health issues and 50% say that their workplace is mentally healthy, up a statistically significant 1.5%, since 2020. Additionally, 77% of employees believe positive actions are embedded across the workplace to ensure good mental health.	Achieved

Domain	Key evaluation question	Key Findings	Assessment
	Do employees report that workplace psychosocial risks and hazards addressed/mitigated appropriately?	The 2022 BMT results show positive shifts since 2020 on all culture and risk management attributes including a focus on managers are approachable about mental health and wellbeing and an emphasis on providing training on mental health risks. This finding was reinforced by employers interviewed who all reported making changes in their workplace to reduce psychosocial risks and improve support for employees.	Achieved
	What differences in workplace mental health is evident across sectors, particularly target sectors according to employee feedback?	The 2022 BMT results show that in each of the four priority industries, employees reported increased workplace activity focused on improving mental health outcomes. In in-depth interviews employers and employees indicated that an increased emphasis on mental health at work had led to improved rates of employee satisfaction, enhanced wellbeing, improved team cohesion, and improved employee retention. Due to limits in sample size, it was not possible to draw comparisons across sectors.	N/A
	To what extent do employees and employers report that social connections are improved in their workplaces and communities?	Available data related to this question is limited. In interviews with employers, it was frequently reported that social connections in the workplace had improved. Employers described their teams as being more cohesive, that employees were likely to check-in with colleagues, and were more likely to provide support to colleagues even if this was beyond the scope of their role.	N/A
	What factors have influenced the changes experienced?	While improved social connections and rapport among employees were reported as outcomes by employers, specific data related to this question was limited and broad conclusions could not be made.	N/A
	What patterns of improvements in social connections exist for different workplaces, industries, and communities?	While interviews conducted with employers across different industries and workplaces indicated that social connections within the workplace had improved, the sample size was small and does not allow for comparisons to be made across different workplaces, industries, or communities.	N/A

Domain	Key evaluation question	Key Findings	Assessment
	Has productivity increased through reduced workers' compensation claims related to mental health issues?	The Workers compensation claims data provided for the final evaluation was not able to be used as a proxy for productivity.	N/A
	Has productivity increased through reduced absenteeism?		N/A
	Has productivity increased through improved recovery at work?	No data about rates of recovery at work was provided for the final evaluation.	N/A
	Has productivity increased through improved employer cost savings?	No financial data was provided as part of the final evaluation so employer cost savings cannot be estimated or calculated.	N/A
Economic	**What has been the financial return on investment for the MHW Strategy?**	Economic analyses were not included in the final evaluation	N/A
	What has been the social return on investment for the MHW Strategy?		N/A

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