

# Annex II

## Indicators and scorecard

The challenging work that United Nations personnel undertake, often under high pressure and in dangerous locations, makes it imperative that the workplace be a safe place.

This means that action must be taken to create a healthy workplace culture, policies and practices must be in place to support this, managers must be trained to understand mental health and well-being, individuals must be provided with the tools that they need to stay healthy and support must be provided to those in need.

Organizations are encouraged to take action in as many of the domains as possible. However, not all indicators are appropriate for all organizations. It is understood that different organizations will have different structures, goals and personnel profiles, and priorities will therefore be established accordingly.

Drawing from the WHO/ILO model of prevent, promote and support, individuals, managers and organizations are asked to take action under each of the headings to positively affect organizational culture. The actions will be laid out in action plans developed by organizations in accordance with their specific conditions and available resources. An example of an action plan can be found in the Implementation Guide that accompanies the scorecard.

PREVENT	PROMOTE	SUPPORT
1. Risk assessment (prevention and mitigation)	3. Manager training	7. Enabling dignified work
2. Policy and practice mainstreaming	4. Stigma reduction activities	8. Access to psychosocial support
	5. Mental health literacy training	9. Quality control for psychosocial support
	6. Implementation of well-being initiatives	
Cross-cutting		
10. Leadership 11. Reporting 12. Participation		

Prevent

Indicator 1: risk assessment

APPROACHES REQUIREMENTS	MEETS REQUIREMENTS	EXCEEDS REQUIREMENTS
Current <b>risk assessment</b> activities <b>include</b> a psychosocial section	Current <b>risk assessment</b> activities <b>include</b> a psychosocial section	Current <b>risk assessment</b> activities <b>include</b> a psychosocial section
A review of <b>psychosocial risks*</b> has been <b>undertaken*</b>	A review of <b>psychosocial risks*</b> has been <b>undertaken*</b>	A review of <b>psychosocial risks*</b> has been <b>undertaken*</b>
	A psychosocial <b>risk assessment mitigation action plan</b> has been <b>created and implemented**</b>	A psychosocial <b>risk assessment mitigation action plan</b> has been <b>created and implemented**</b>
		<b>Review and improvement</b> process in place for psychosocial risk mitigation
		Evaluation of risk mitigation strategies included in managers' performance appraisals

\* Psychosocial risks include workload management, work-life harmony, job control, working hours and interpersonal relationships.

\*\* May be a pilot programme at one or more duty stations.

# Prevent

## Indicator 2: policy and practice mainstreaming

APPROACHES REQUIREMENTS	MEETS REQUIREMENTS	EXCEEDS REQUIREMENTS
Mental health and well-being <b>review of existing policies*</b> and practices related to people management across the employee lifespan**	Mental health and well-being <b>review of existing policies*</b> and practices related to people management across the employee lifespan**	Mental health and well-being <b>review of existing policies*</b> and practices related to people management across the employee lifespan**
	Based on the mental health and well-being review, policies flagged as related to people management are <b>edited or authored</b> to ensure inclusion of mental health and well-being considerations	Based on the mental health and well-being review, policies flagged as related to people management are <b>edited or authored</b> to ensure inclusion of mental health and well-being considerations
		All policies related to people management are regularly reviewed, and accountability mechanisms are implemented

\* Examples may include the areas of pre- and post-deployment, recruitment, workload management, workforce planning, flexible working arrangements, work-life harmony, return to work, sick leave policy, reasonable accommodation, policy on mobility, prevention of harassment, occupational health and safety, performance management, values and behaviour framework, people/human resources strategy, diversity, equity and inclusion, disability, lesbian, gay, bisexual, transgender and intersex persons, and staff safety and security.

\*\* Recruitment, onboarding, reassignment and retirement/termination.

Promote

Indicator 3: manager education and training

APPROACHES REQUIREMENTS	MEETS REQUIREMENTS	EXCEEDS REQUIREMENTS
Training* for new managers on workplace mental health and well-being is <b>included in induction</b>	Training* for new managers on workplace mental health and well-being is <b>included in induction</b>	Training* for new managers on workplace mental health and well-being is <b>included in induction</b>
	Training* for all managers on workplace mental health and well-being is <b>integrated</b> into managers’ development and learning initiatives	Training* for all managers on workplace mental health and well-being is <b>integrated</b> into managers’ development and learning initiatives
	Managers have access to <b>coaching and guidance</b> related to mental health and well-being in the workplace	Managers have access to <b>coaching and guidance</b> related to mental health and well-being in the workplace
		Manager education and training initiatives are <b>evaluated</b> , and results are integrated to ensure continuous improvement

\* Modifying the “Lead & Learn” programme or similar courses according to organizational needs.

Promote

Indicator 4: stigma reduction activities

APPROACHES REQUIREMENTS	MEETS REQUIREMENTS	EXCEEDS REQUIREMENTS
<b>Data</b> are gathered to understand stigma within the organization	<b>Data</b> are gathered to understand stigma within the organization	<b>Data</b> are gathered to understand stigma within the organization
An <b>interdisciplinary</b> stigma working group is established to agree on appropriate evidence-based actions	An <b>interdisciplinary</b> stigma working group is established to agree on appropriate evidence-based actions	An <b>interdisciplinary</b> stigma working group is established to agree on appropriate evidence-based actions
	Stigma reduction <b>interventions</b> , informed by evidence-based research and persons with lived experience, are <b>enacted</b>	Stigma reduction <b>interventions</b> , informed by evidence-based research and persons with lived experience, are <b>enacted</b>
		A stigma reduction campaign is <b>mainstreamed</b> , and data are collected to measure impact

Promote

Indicator 5: mental health literacy

APPROACHES REQUIREMENTS	MEETS REQUIREMENTS	EXCEEDS REQUIREMENTS
Mental health literacy training is <b>included in</b> onboarding learning programmes	Mental health literacy training is <b>included in</b> onboarding learning programmes	Mental health literacy training is <b>included in</b> onboarding learning programmes
	Mental health literacy training is <b>available</b> to all existing personnel in learning programmes	Mental health literacy training is <b>available</b> to all existing personnel in learning programmes
		<b>Targeted training</b> , such as suicide prevention, for specific roles (e.g. human resources, security and front-line workers) is provided

Promote

Indicator 6: implementation of well-being initiatives

APPROACHES REQUIREMENTS	MEETS REQUIREMENTS	EXCEEDS REQUIREMENTS
A process for implementing evidence-informed <b>well-being activities</b> is developed (e.g. interdisciplinary well-being* working group)	A process for implementing evidence-informed <b>well-being activities</b> is developed (e.g. interdisciplinary well-being* working group)	A process for implementing evidence-informed <b>well-being activities</b> is developed (e.g. interdisciplinary well-being* working group)
	Personnel can gain access to evidence-informed training programmes and <b>well-being tools online</b>	Staff can gain access to evidence-informed training programmes and <b>well-being tools online</b>
	Well-being initiatives are <b>accessible</b> organization-wide	Well-being initiatives are <b>accessible</b> organization-wide
		Well-being initiatives are monitored for uptake and utility and are <b>assessed</b> regularly

\* Well-being topics may include but are not limited to stress management, sleep hygiene, mindfulness, yoga and healthy eating.

Support

Indicator 7: enabling dignified work (reasonable accommodation and return to work)

APPROACHES REQUIREMENTS	MEETS REQUIREMENTS	EXCEEDS REQUIREMENTS
Ad hoc implementation of reasonable accommodation and return to work	Ad hoc implementation of reasonable accommodation and return to work, without formal guidelines	Ad hoc implementation of reasonable accommodation and return to work
	Reasonable accommodation policy exists and is <b>implemented consistently through a multidisciplinary approach</b>	Reasonable accommodation policy exists and is <b>implemented consistently through a multidisciplinary approach</b>
	Clients can provide <b>feedback</b> on the practice and policy	Clients can provide <b>feedback</b> on the practice and policy
		<b>Case management</b> is provided for personnel

## Support

### Indicator 8: access to psychosocial support

APPROACHES REQUIREMENTS	MEETS REQUIREMENTS	EXCEEDS REQUIREMENTS
<b>Information available</b> to all personnel on support services (in-house and external)	<b>Information available</b> to all personnel on support services (in-house and external)	<b>Information available</b> to all personnel on support services (in-house and external)
<b>Assess/review</b> current insurance carriers for mental health coverage. Mapping of clients for insurance coverage*	<b>Assess/review</b> current insurance carriers for mental health coverage. Mapping of clients for insurance coverage*	<b>Assess/review</b> current insurance carriers for mental health coverage. Mapping of clients for insurance coverage*
	From the onset of a United Nations contract, all <b>personnel and their dependants have insurance</b> coverage, including for mental health needs	From the onset of a United Nations contract, all <b>personnel and their dependants have insurance</b> coverage, including for mental health needs
	Support within 72 hours, regardless of duty station	Support within 72 hours, regardless of duty station
	Support in cases of <b>critical incident</b> and crisis management	Support in cases of <b>critical incident</b> and crisis management
	Support for <b>conflict resolution</b> (reconciliation, conflict coaching and mediation)	Support for <b>conflict resolution</b> (reconciliation, conflict coaching and mediation)
	<b>Predeployment</b> counselling <b>Post-deployment</b> counselling	<b>Predeployment</b> counselling <b>Post-deployment</b> counselling
	<b>Proactive counselling</b> support for staff in an unstable/high-risk environment	<b>Proactive counselling</b> support for staff in an unstable/high-risk environment
		<b>Family Liaison Officer</b> available to address the well-being needs of the families of staff
		Ensure that appropriate** insurance coverage includes coverage for the mental health needs of all United Nations personnel and their dependants

\* Including dependants and non-staff (long-term consultants).

\*\* Ensure that reimbursement is client-friendly, involves an easy one-step process and direct to recognized mental health services without a prescription/referral.



# Support

## Indicator 9: quality control for psychosocial support

APPROACHES REQUIREMENTS	MEETS REQUIREMENTS	EXCEEDS REQUIREMENTS
<b>Complete mapping</b> of currently available psychosocial services (in-house and external)	<b>Complete mapping</b> of currently available psychosocial services (in-house and external)	<b>Complete mapping</b> of currently available psychosocial services (in-house and external)
<b>Establishment of lead</b> for psychosocial support with responsibility for oversight of the psychosocial programme	<b>Establishment of lead</b> for psychosocial support with responsibility for oversight of the psychosocial programme	<b>Establishment of lead</b> for psychosocial support with responsibility for oversight of the psychosocial programme
Provide <b>clinical supervision</b> to staff counsellors	Provide <b>clinical supervision</b> to staff counsellors	Provide <b>clinical supervision</b> to staff counsellors
	Support within 72 hours, regardless of duty station	Support within 72 hours, regardless of duty station
	<b>Ensure that providers are licensed/ accredited</b> and that those who are not have a plan in place to achieve in accordance with United Nations Staff/Stress Counsellors Special Interest Group guidelines	<b>Ensure that providers are licensed/ accredited</b> and that those who are not have a plan in place to achieve in accordance with United Nations Staff/Stress Counsellors Special Interest Group guidelines
		Ensure that a <b>feedback mechanism</b> exists for client input and review
		A minimum of <b>20 hours per year for continuing</b> education is available

Cross-cutting

Indicator 10: leadership

APPROACHES REQUIREMENTS	MEETS REQUIREMENTS	EXCEEDS REQUIREMENTS
<b>Leadership focal point</b> is assigned to assume overall responsibility for mental health programming	<b>Leadership focal point</b> is assigned to assume overall responsibility for mental health programming	<b>Leadership focal point</b> is assigned to assume overall responsibility for mental health programming
<b>Leadership regularly* communicates</b> with staff about the importance of mental health and well-being	<b>Leadership regularly* communicates</b> with staff about the importance of mental health and well-being	<b>Leadership regularly* communicates</b> with staff about the importance of mental health and well-being
	<b>Leadership assigns or assumes responsibility for key actions</b> in a highly visible manner to demonstrate action being taken	<b>Leadership assigns or assumes responsibility for key actions</b> in a highly visible manner to demonstrate action being taken
	Mental health and well-being** is included as an <b>assessment criterion</b> for leaders' performance	Mental health and well-being** is included as an <b>assessment criterion</b> for leaders' performance**
	<b>Ensure that providers are licensed/ accredited</b> and that those who are not have a plan in place to achieve in accordance with United Nations Staff/Stress Counsellors Special Interest Group guidelines	<b>Ensure that providers are licensed/ accredited</b> and that those who are not have a plan in place to achieve in accordance with United Nations Staff/Stress Counsellors Special Interest Group guidelines
		Leadership takes an active role in <b>securing funding</b> for implementation of the Mental Health and Well-being Strategy

\* Three or more times per year.

\*\* Should include recruitment criteria, performance planning, and inclusion in 360-degree assessments. Should be focused on the manager's behaviour in supporting good mental health and reducing psychosocial risks in the workplace.

## Cross-cutting

### Indicator 11: reporting

APPROACHES REQUIREMENTS	MEETS REQUIREMENTS	EXCEEDS REQUIREMENTS
Organization takes part in United Nations Health Intelligence survey a minimum of every two years	Organization takes part in United Nations Health Intelligence survey a minimum of every two years	Organization takes part in United Nations Health Intelligence survey a minimum of every two years
Yearly completion of the Mental Health and Well-being <b>scorecard</b>	Yearly completion of the Mental Health and Well-being <b>scorecard</b>	Yearly completion of the Mental Health and Well-being <b>scorecard</b>
	Mental Health and Well-being <b>action plan</b> created, and progress reported* to personnel	Mental Health and Well-being <b>action plan</b> created, and progress reported* to personnel

\* Includes a report on action taken, developed yearly and shared with staff.

## Cross-cutting

### Indicator 12: participation

APPROACHES REQUIREMENTS	MEETS REQUIREMENTS	EXCEEDS REQUIREMENTS
All relevant mental health and well-being committees, working groups and/or task forces seek membership and/or input from those with <b>lived experience</b> *	All relevant mental health and well-being committees, working groups and/or task forces seek membership and/or input from those with <b>lived experience</b> *	All relevant mental health and well-being committees, working groups and/or task forces seek membership and/or input from those with <b>lived experience</b> *
	Organization has either a <b>representative or a focal point</b> for the implementation board	Organization has either a <b>representative or a focal point</b> for the implementation board
		Organization has <b>dedicated resources</b> to the system-wide implementation effort, either financially or in-kind

\* The process for including the voices of personnel with a lived experience of poor mental health is established.