MHLEPQ
MENTAL HEALTH LIVED EXPERIENCE PEAK QUEENSLAND

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MENTAL HEALTH AND WELLBEING POLICY

1. Purpose

1.1 The purpose of this policy is for Mental Health Lived Experience Peak Queensland (MHLEPQ) to enact its fundamental value to be culturally, psychologically, and organisationally safe in all interactions.

2. Scope

2.1. This policy applies to all MHLEPQ office holders and employees (permanent, temporary, and casual) and all organisations and individuals acting as its agents (including contractors, consultants, representatives, and volunteers).

2.2. The responsibility for the implementation of this policy lies with the Board and as delegated Chief Executive Officer (CEO) or nominee.

3. Objectives

3.1 MHLEPQ aims to:

3.2 create a cultural, psychological, and organizationally safe system advocacy body for Queenslanders with mental health lived or livings experience

3.3 develop and sustain a respectful culture within the organization

3.4 practice compassionate, patience and integrity in every interaction

3.5 actively look for voices that are not heard.

4. Policy

4.1 The organization will induct all directors and employees in this policy.

4.2 This policy will be freely available to anyone within its scope.

4.3 Stigmatizing, discriminatory and/or culturally insensitive language and/or behaviours (including bullying and harassment) will not be tolerated.

4.4 Every Board and staff meeting will be an opportunity to have open conversations about mental and emotional health and wellbeing.

4.5 Staff and Board members can step back if required to support their mental health and wellbeing without questions asked.

4.6 A buddy system will operate amongst staff and Board members allowing a nominated peer to be a support person if required.

4.7 The organizational values of being inclusive and courageously curious will be applied. We will seek to understand first, then to be heard.

4.8 The physical work environment will be supportive of mental health and wellbeing if practicable.

4.9 MHLEPQ will provide systems that encourage predictable working hours, reasonable workloads, and flexible working practices, where appropriate and practical, to enhance employees' sense of control over their work organization.

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4.10 Any workplace or meeting area used by the organization will be accessible for people with reduced mobility.

4.11 Preference will be given to individuals with lived experience for opportunities at all levels of the organization. Where required reasonable adjustment in job and workplace design to accommodate the engagement of individuals with lived experience.

4.12 A return-to-work process will be co-designed between the staff and management following absence due to physical or mental ill-health. The focus in return-to-work process is on ability and not dis- or in-ability.

4.13 The privacy and confidentiality of any Board member or staff experiencing mental health issues will be assured to the greatest extend possible.

4.14 The organization will make available an Employee Assistance Program for staff, Board members and immediate family.

4.15 MHLEPQ will deal with identified cultural, physical and psychological hazards in the workplace according to the hierarchy of controls seeking system solutions wherever possible.

5. Responsibility

5.1. Any notification of a breach of this policy must be provided to the CEO, who will investigate the matter within a reasonable timeframe.

5.2. The CEO will notify the Board of any significant breach of this policy.

5.3. Any staff member notifying the CEO of a breach of this policy shall be considered a whistle blower unless such notification is manifestly frivolous or malicious.

5.4. Where the complaint is directed at the CEO, the notification may be made directly to the Chair of the Board.

5.5. Where the matter is not resolved to the satisfaction of the notifier then the matter will be dealt with according to the appropriate disputes or complaints procedure.

6. Monitoring and review

6.1. MHLEPQ will review this policy according to the Policy Governance Framework.

6.2. Effectiveness of the policy will be assessed through:

6.3. Feedback from office holders and employees (permanent, temporary, and casual) and other individuals (including contractors, consultants, representatives, and volunteers).

6.4. Review of the policy by the CEO (or delegate) to determine if objectives have been met and to identify barriers and enablers to ongoing policy implementation.

Drafted by	Jorgen Gullestrup	Version	V 1.0
Responsible person	Jorgen Gullestrup	Approved by Board	
		Scheduled review date	