

Wellness Action Plan (WAP) Template

1. What helps you stay mentally healthy at work? (For example: taking a lunch break, keeping a to do list)

2. What can your manager do to support you to stay mentally healthy at work? (For example: regular feedback and supervision, explaining wider developments in organisation)

3. Are there any situations at work that can trigger poor mental health for you? (For example: conflict at work, organisational change, something not going to plan)

4. How might stress / poor mental health difficulties impact on your work? (For example: find it difficult to make decisions, hard to prioritise work tasks)

5. Are there any early warning signs that we might notice when you are starting to feel stressed/ mentally unwell? (For example: changes in normal working patterns, withdrawing from colleagues)

6. What support could be put in place to minimise triggers or to support you to manage symptoms? (For example: extra catch-up time with line manager)

7. If we notice early warning signs that you are feeling stressed or unwell – what should we do? (For example: talk to me discreetly about it, contact someone that I have asked to be contacted) Please include contact names and numbers if you would like your line manager to get in touch with someone if you become unwell.

Contact name 1: _____ Number _____

Contact name 2: _____ Number _____

8. What steps can you take if you start to feel unwell at work? (For example: take a break from your desk and go for a short walk, ask your line manager for support)

Steps...

- 1)
- 2)
- 3)
- 4)
- 5)

Employee Signature: _____ Date _____

Manager Signature: _____ Date _____

Date to be reviewed _____