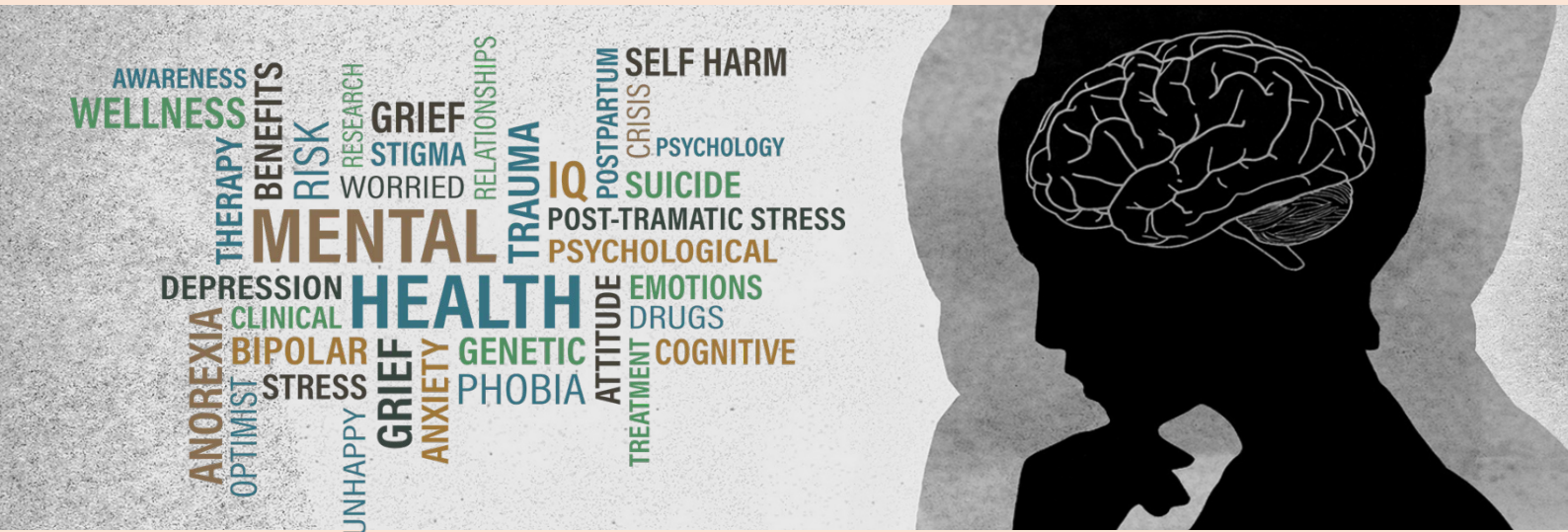


<b>This Wellness Action Plan has been created for:</b>		<b>Name:</b>
		<b>Team:</b>
<b>It was agreed on:</b>		<b>By:</b>



## INTRODUCTION

This wellness action plan is a confidential document that is agreed between you and Beyond Limits. It aims to identify key factors that will protect your mental health and well-being at work.

Every colleague should have a wellness action plan whether they have an existing mental health problem or not.

A wellness action plan is a proactive approach, rather than a reactive response to managing mental health.

## THIS WELLNESS ACTION PLAN INCLUDES:

- Approaches that you can use and adapt to support your own mental wellbeing. (i.e., taking designated breaks).
- Individualised signs and symptoms of stress or mental ill health (i.e., anxiety, changes in behaviour, etc.).
- Any triggers in the workplace that could lead to you experiencing stress or mental ill health (i.e., lack of communication, lack of control).
- Potential impacts of stress or mental ill health on performance (i.e., being demotivated or unable manage workload).

- Actions that you and Beyond Limits can take if there are signs of mental ill health (i.e., reasonable adjustments).

## PLEASE NOTE:

This plan should be reviewed annually. However, it is important to provide the opportunity to review the plan in response to any changing needs or requirements.

## YOUR WELLNESS ACTION PLAN

THE PLAN	
1. What will help you to stay healthy at work? (e.g., taking a proper lunch break, getting some exercise during the day, keeping a to-do list, a lighter and more space in the office).	
2. What could your manager do to support you to stay mentally healthy at work? (e.g., give regular feedback, have regular catch ups, allow flexible working, explain).	
3. Are there any work situations that can trigger poor mental health for you? (e.g., conflict at work, organisational change, tight deadlines, things not going to plan).	
4. How could poor mental health impact on your work? (e.g., make decision-making difficult, make you confused, headaches, make you tired, make concentration difficult).	

<p>6. What could be put in place to minimise risks of poor mental health or help you to manage the impact? (e.g., extra catch-up time with manager, guidance on prioritising workload, flexible working, consideration of adjustments).</p>	
<p>7. Is there anything in your preferred individual work style or temperament that your manager should be aware of? (e.g., preference for more or less 1:1 or email contact, a need for quiet reflection time before or after meetings, having clear deadlines and expectations for a task, tendency for high/low energy levels in the morning/afternoon).</p>	
<p>8. If we notice early warning signs, what should we do? (e.g., talk to you discreetly about it, contact a named person).</p>	
<p>10. Is there anything else that you would like to include in this plan?</p>	

This Wellness Action Plan will be reviewed on:	
Signature of Colleague for whom this plan has been agreed:	
Signature of Mental Health First Aider (MHFA) or Manager:	