I am pleased to be part of this 2nd forum as I was last February in Washington.

Cushman & Wakefield is represented today from both our U.S. and Canadian operations. As a global commercial real estate services company, we certainly endorse the view that mental health is a significant global business and economy issue.

The Global roundtable’s name never seemed more apropos.

The issue is pervasive – therefore global – and distributed around the world.

This year, I assumed the chair of the board of governors of one of Canada’s great universities with a major commitment to medical education and health management.

I refer to McMaster University in Hamilton, one of only three Canadian universities listed in the top 100 universities in the world. (Apologies for the commercial)

At McMaster, we share the belief that business and science are natural allies in the fight against mental illness and it is time we joined that fight together – beyond philanthropy – in terms that reflect the strategic stake we have in reducing and preventing mental illnesses in the labour force.

Now, my job this afternoon is to set out guidelines to help organizational leaders – including CEOs – show leadership in promoting mental health and productivity.

But first, how did we get to the point that CEO mental guidelines were even a practical possibility.
The road starts with the CEO themselves.

In 2003, the roundtable conducted an extensive – unprecedented – CEO survey on mental health in which chief executives (including me) answered a number of questions by phone.

There was remarkable consensus.

The CEOs who were surveyed agreed that their leadership – our leadership – is necessary to change the way mental health problems are perceived and managed in the workplace and, further, mental health policies can protect productivity and help recruit and retain good people.

With these findings in hand, the roundtable then convened a series of meetings across the country with business people, clinicians and workplace specialists to find out what was needed to help employers equip themselves to function profitably in the current environment.

This produced two major initiatives.

One, a roadmap for mental disability management and, two, a comprehensive business and economic plan which included a range of CEO guidelines which have been further refined and which I will announce today.

Guidelines, though, are words on paper unless the values they reflect are a living creed in the process of managing a business.

Such a creed of good management begins and ends with the concept of human decency.

So, following are 10 CEO guidelines for mental health and productivity:

**CEO guideline one:**

Build mental health into your vision of a healthy workplace.

Last year, the roundtable and the national quality institute worked together to incorporate mental health into the NQI’s criteria for its healthy workplace award.

This is a great step forward.

**CEO guideline two**

Champion mental health in the workplace openly.

Give your people every opportunity to learn and talk about the subject, what it means to them, their families, and their co-workers.

**CEO guideline three**

Create a critical threshold of knowledge about what’s happening in your own organization.
Audit your disability experience, review each long-term disability file – there is a person behind the paper – and the longer that person is off, the less likely they will come back.

As part of this, align performance and disability management practices as two sides of one coin.

People on disability leave are assets with continuing value, not damaged goods stored out of sight, out of mind.

*Given today’s venue, let me put this in blunt military terms: Don’t shoot the wounded.*

**CEO guideline four**

Based on the findings of that audit, set hard, achievable management and financial targets to reduce, and prevent disabilities among employees diagnosed with depression.

This means creating a workplace where trust facilitates early intervention and job accommodation promotes recovery on-the-job.

**CEO guideline five**

Build-up the competence vested in your human resources staff to serve as empowered advocates for mental health in the workplace and engage line managers to become accountable for returning people to work from disability leave on sound management and medical grounds.

This calls for training and, in some cases *attitude adjustment*.

**CEO guideline six**

Take an investment portfolio approach to manage and measure the benefits of spending on mental health in the workplace.

Business is not done in isolation, one category of spending at a time.

Neither should spending on employee health.

An example:

Rising group drug costs are a concern.

But what are the benefits in terms of reducing disability leave, sustaining productivity and so on.

Managed in isolation, we can’t answer that question.

Managed in combination, we can.
CE0 guideline seven (flowing from number six)

Engage your chief financial officer and top human resources executive as co-leaders of mental health in the workplace.

Without the CFO, CEO leadership is tough.

I want to be candid about this.

CFO’s can shunt these issues aside as mere expense items to be managed and contained as such.

I am all for containing expenses – I am also in favour of understanding which of these is an opportunity cost that should be optimized.

I am pleased our CFO, Rene Gulliver, has participated in the CFO mental health task force which will report shortly.

CE0 guideline eight

Put a value on research and inquiry.

We need best practices to manage mental health in the workplace.

We don’t have them.

And, by that, I mean we don’t have them.

The workplace is, today, an important venue for research, early detection and intervention.

It is the place people spend most of their waking hours with people they’re closest to.

Peer support is as important as medication in recovering from mental illness.

I applaud the Canadian armed forces and the RCMP for their leading work in this area.

CE0 guideline nine

Taking that a step further, see your workplace as a place of prevention.

A great goal: preventing disability – dangerous job stress – stigma and discrimination – promoting early diagnosis and access to care, ……itself, a disability prevention measure.

Shortly, from Dr. Ron Kessler – considered the greatest workplace mental health researcher in the world – we will hear about the profitability of early screening for depression in the workforce.
Early screening is something for all of us just as depression is something we all need to think about.

Just as we routinely have “flu shot days” at work, we should promote “screening days” – days for a “check-up from the neck-up” (as Ontario mood disorders calls it).

This brings me to CEO guideline ten.

Walk the talk.

If screening for depression is good for our employees, it’s good for CEOs.

So, by walking the talk, I will walk right out of this room, right now – with Dr. David Goldbloom – to have my very first check-up from the neck-up – my first depression screening.

I am told it is painless.

I know it is shameless.

David and I will be back in a half hour or so, and I will report on how it went.

Colum exits with Donna and Dr. Goldbloom to a private location. when they return, Bill will ask Colum to report back.)