

Managing Work While Returning

Returning to work after a period of mental illness is an important step, but the adjustment period can be challenging. This leaflet focuses on how to manage work demands while rebuilding capacity and protecting recovery.

Returning to Work Is a Transition, Not an Endpoint

Returning to work does not mean recovery is complete.

The early return-to-work phase often involves:

- Reduced stamina
- Fluctuating concentration
- Emotional vulnerability
- Increased fatigue

These experiences are common and usually improve gradually.

Expect Fluctuations in Capacity

During the return phase:

- Some days will feel easier than others
- Productivity may vary
- Confidence may lag behind ability

Fluctuation does not mean failure or relapse.

Pacing Your Workload

Helpful pacing strategies include:

- Starting with reduced hours or duties
- Avoiding unnecessary overtime
- Taking regular breaks
- Spreading demanding tasks across the day

Pacing protects recovery and supports sustainable performance.

Prioritising Tasks

It can help to:

- Identify essential versus non-essential tasks
- Focus on one task at a time
- Reduce multitasking where possible

Cognitive load is often higher during recovery.

Managing Fatigue

Mental fatigue is common during recovery.

Helpful strategies may include:

- Structured breaks
- Short walks or quiet pauses
- Avoiding back-to-back high-demand tasks
- Maintaining regular sleep and meal patterns

Fatigue often improves with time and consistent routine.

Managing Stress at Work

During early return:

- Stress tolerance may be reduced
- Previously manageable pressures may feel overwhelming

Helpful approaches include:

- Setting realistic expectations
- Avoiding major role changes early on
- Using agreed workplace adjustments

Stress management supports relapse prevention.

Communication at Work

Clear and contained communication can help.

This may involve:

- Agreeing on expectations with a manager
- Clarifying duties and limits
- Avoiding unnecessary disclosure

You are not required to share personal health details beyond what is needed for adjustments.

Using Workplace Adjustments

Workplace adjustments may include:

- Flexible start and finish times
- Reduced workload
- Modified duties
- Quiet or low-stimulus environments

Adjustments are often temporary and reviewed as capacity improves.

Managing Setbacks at Work

Setbacks may occur.

If symptoms worsen:

- Do not push through at all costs
- Review workload and expectations
- Seek early support

Early adjustment is preferable to prolonged deterioration.

Balancing Work and Recovery

Work is one part of recovery, not the whole of it.

Recovery is supported by:

- Adequate rest
- Ongoing treatment

- Healthy routines outside work
- Social and emotional support

Over-prioritising work can slow recovery.

Role of the Treating Psychiatrist

The treating psychiatrist may:

- Review symptoms and functioning
- Comment on work capacity where appropriate
- Support gradual and safe progression

They do not determine workplace policy or performance expectations.

When to Review Work Arrangements

Review may be needed if:

- Fatigue remains significant
- Symptoms worsen
- Work stress increases
- Adjustments are no longer appropriate

Regular review supports sustainable return.

Summary

Managing work while returning involves pacing, flexibility, and realistic expectations. Gradual progression, early adjustment, and ongoing support help protect recovery and support long-term functioning.
