

Case Study

Workplace Wellbeing Hub

Embedding Mental Health into Municipal Safety Programs City of Memphis, Tennessee

Organization snapshot

- **Sector:** Municipal government
- **Location:** City of Memphis, Tennessee
- **Workforce:** 7,000+ employees
- **Interviewee:** Administrator, Workplace Safety & Compliance
- **Primary Focus:** Integrating mental health into a comprehensive municipal safety program and exploring appropriate ways to measure impact within public-sector constraints

Background: redefining safety as both mental and physical

The City of Memphis employs more than 7,000 people across high-risk roles: police, fire, public works, sanitation/solid waste, and other frontline services. The Workplace Safety & Compliance Administrator leads a broad safety portfolio that includes:

- Safety programs (with mental and physical health integrated)
- Drug and alcohol testing
- Infection control

From this perspective, safety is defined holistically: "We consider safety in our realm as being mental and physical." A safe workplace is not just free of slips, trips, and falls, it is one where employees' mental health needs are recognized, supported, and addressed. Historically, like many organizations, the safety program emphasized traditional hazards. After COVID-19, however, it was clear that psychological risks and mental health crises could make the workplace unsafe, both for the individual and for coworkers. This became a catalyst for strengthening how mental health is discussed, supported and incorporated into the city's safety culture.

Governance and partnership structure

Mental health is not owned by a single champion; it is supported by coordinated teams across the Human Resources function:

- **Human Resources Department:** Houses the Workplace Safety & Compliance team
- **Total Rewards:** Includes a dedicated Wellness Division, responsible for mental health benefits, wellness programs and employee supports
- **Division Safety Staff:** Safety personnel embedded in the field are trained to keep an eye out for mental health concerns as well as physical hazards

This structure ensures mental health is treated as a shared responsibility, not an isolated initiative. Safety and wellness work as a cohesive team and collaborate on:

- Injury and incident follow-up
- Drug and alcohol testing and return-to-work processes
- Health and wellness programming that addresses both physical and emotional needs

The city's approach is intentionally team-based:

"It's a team approach at the City of Memphis... it all circles back to providing a safe workplace."

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Mental health benefits and supports

The City of Memphis has invested in robust mental health benefits, often surprising peers in national conversations:

- **Partnership with Baptist Hospital's "Concern" Program (EAP):**
 - Provides mental health services for grief, stress, financial strain, and a wide range of emotional and behavioral health concerns.
 - Integrates with the city's drug testing program, offering second-chance opportunities for employees who experience substance use issues.
- **Family-Centered Coverage:**
The city's philosophy is that supporting only the employee is not enough. "If I go home and everybody at home needs help as well, am I really being helped?" By opening services to household members, the city aims for "total, complete coverage."
- **Second-Chance Approach to Substance Use:**
Instead of a purely punitive response to failed drug tests, the city offers treatment pathways and return-to-duty programs, creating a more supportive, recovery-oriented culture.

This benefit structure is seen internally as one of the city's standout practices: "This is one of the perks that I love about the City of Memphis, because they care about who's in my home as well."

Integrating mental health into safety programs

Rather than treating mental health as a standalone topic, Memphis weaves it directly into the safety program. By normalizing mental health and embedding it into standard safety education, the city positions psychological wellbeing as an expected part of a safe work environment with:

- **Quarterly Safety Roundtables**
Mental health is a standard agenda item, not an add-on. Roundtables address traditional safety topics alongside stress, emotional wellbeing, and psychological risks.
- **Annual Safety Fair**
The city's annual safety fair highlights EAP resources and brings in specialized speakers, including a vicarious trauma therapist to address workers who repeatedly re-enter traumatic situations (e.g., police officers, firefighters, public works, solid waste workers)
- **Workplace Safety Conference**
The annual workplace safety conference includes mental health as a core safety topic—treated with the same seriousness as other hazards.
- **Language and framing to reduce stigma**
Recognizing that the phrase "mental health" can feel intimidating or stigmatizing for some workers, the city intentionally uses alternative framings:
 - Emotional intelligence
 - "How do I feel in the workplace?"
 - Courses such as "It's Okay Not to Be Okay"

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Measuring impact: metrics, caution and gaps

Like many organizations, the City of Memphis acknowledges that mental health is harder to measure than traditional safety outcomes. Their approach balances data collection with respect for confidentiality:

- **What they track**
 - Types of services provided through their EAP/Concern program
 - Outcomes of return-to-duty programs after substance-related incidents
 - High-level tracking of certain conditions such as PTSD when tied to traumatic job exposures, while avoiding individual-level reporting for most mental health concerns
- **How they report**
 - A third-party vendor maintains and analyzes mental health and claims data.
 - The vendor presents biannual reports to city leadership that summarize service categories, trends, and financial impacts.
 - Reports cover overall cost savings and trends across health and benefits, not just mental health, but mental health-related indicators are part of the broader picture.
- **Linking mental health to safety outcomes**

The city is cautious about directly attributing specific incidents to mental health:

 - "It can be difficult to definitively say, 'Because I was anxious, I slipped and fell,' or 'Because of a mental health breakdown, I rear-ended another vehicle.'"
 - Instead, the safety program focuses on observable hazards and patterns (e.g., repeated behavioral changes after a traumatic incident may be correlated with mental health concerns)

The Administrator emphasizes that mental health metrics remain a key research gap, not just for Memphis but across sectors, "I think that mental health needs much further detailed research on how you can track it... I think it's a gap across the board because it's so new and it's so much. We need people really working in that area of research."

Employee voice and culture change

Employee feedback has been central to expanding mental health supports:

- **Pre-COVID surveys & safety conferences**

Before the pandemic, questionnaires and survey feedback from large safety fairs and conferences showed employees wanted more than a traditional EAP model. This demand helped justify embedding mental health into safety programming
- **Integrated surveys**

The city now integrates questions about mental health and wellbeing into broader surveys, rather than sending out standalone "mental health surveys" that might deter participation or feel risky to employees.

Over time, these efforts have contributed to a visible cultural shift:

"The biggest highlight for the City of Memphis is to see our police officers, our firemen, our public works, our solid waste people... come to the table and say, 'I feel safe. I know we have the whole story of concern, but I feel safe working for the City of Memphis.'" For Memphis, the most meaningful outcome is not just a data point, it's a workforce that feels safer, more supported and less afraid to do their jobs.

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Business case and ROI in a public sector context

While public entities do not always frame mental health programs in traditional ROI language, Memphis still examines financial outcomes:

- Their third-party vendor benchmarks trends across both public-sector peers (other municipalities) and private-sector organizations
- Biannual reports to leadership focus on:
 - Trends across healthcare and benefits spending overall
 - High-level indicators related to mental health
 - Opportunities to proactively implement new measures

The goal is to be good stewards of public funds while ensuring employees have access to meaningful support.

Communication, incentives and engagement

The Total Rewards team leads proactive communication and engagement:

- A dedicated Total Rewards website outlines:
 - Mental health and wellness resources
 - Classes and programs
 - Incentives tied to preventive care (e.g., dental cleanings) and participation
- Incentives and visible promotion make employees more likely to engage with wellness and mental health supports.
- Data from Total Rewards is shared with the safety program at regular joint meetings, ensuring a coordinated view of employee wellbeing.

Lessons learned and advice for other organizations

- **Don't be afraid of the "elephant in the room."**
Ignoring mental health does not make it go away; addressing it leads to a stronger, healthier culture.
- **Embed mental health into safety - not next to it**
Treat mental health like any other safety risk: include it in roundtables, fairs, conferences, and ongoing training.
- **Use language that reduces stigma**
Phrasing matters, concepts like emotional intelligence, workplace feelings and messaging such as "It's okay not to be okay" can open doors where the term "mental health" might shut them.
- **Partner across HR and Benefits**
Safety, wellness, Total Rewards, and EAP vendors must work as a unified team to create a seamless experience for employees.
- **Extend support to families**
When household members have access to mental health care, employees feel more genuinely supported.
- **Recognize the measurement gap and keep pushing**
Mental health metrics are complex, but organizations can still track what they can (service use, program participation, PTSD counts, return-to-duty outcomes) while advocating for better research and tools.