Preventing Psychological Injury in the Workplace

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Contents

Psychosocial Hazards

Way defines "psychosocial" as the interrelationships between an individual's thoughts and behaviours (i.e. psychology) and their social environment.

The term "psychosocial hazards" is often broadly used in context of specific occupational hazards such as work stress, bullying or harassment, occupational violence (i.e. customer aggression, both physical and verbal), fatigue resulting from long hours of work or shifting work demands in excess of worker's capacity to deliver. (Way 2012).

Psychological Injury

↗ Workers' psychological and physical health can be adversely affected by exposure to a poorly designed or managed work environment, a traumatic event, workplace violence, fatigue, bullying or harassment and excessive or prolonged work pressures. Any of these factors can increase the likelihood of workers experiencing a stress response.

↗ Stress Response can then result in a psychological Injury

↗ Psychological injury resulting from work-related stress can result in mental health conditions such as depression, anxiety, adjustment disorder and post- traumatic stress disorders (Quick et al. 1997).

↗ There is evidence in literature that workplaces can play a proactive role in ensuring the psychological health and wellbeing of workers.

Theoretical Models

- *The Implications of the Demand/Control Model (Quick et.al)*

- *Demand Control Model (Karasek)*

- *Organisations Health Model (Cottton and Hart)*

- *Systems Approach to Job Stress (La Montagne, Valance & Keegal 2007)*
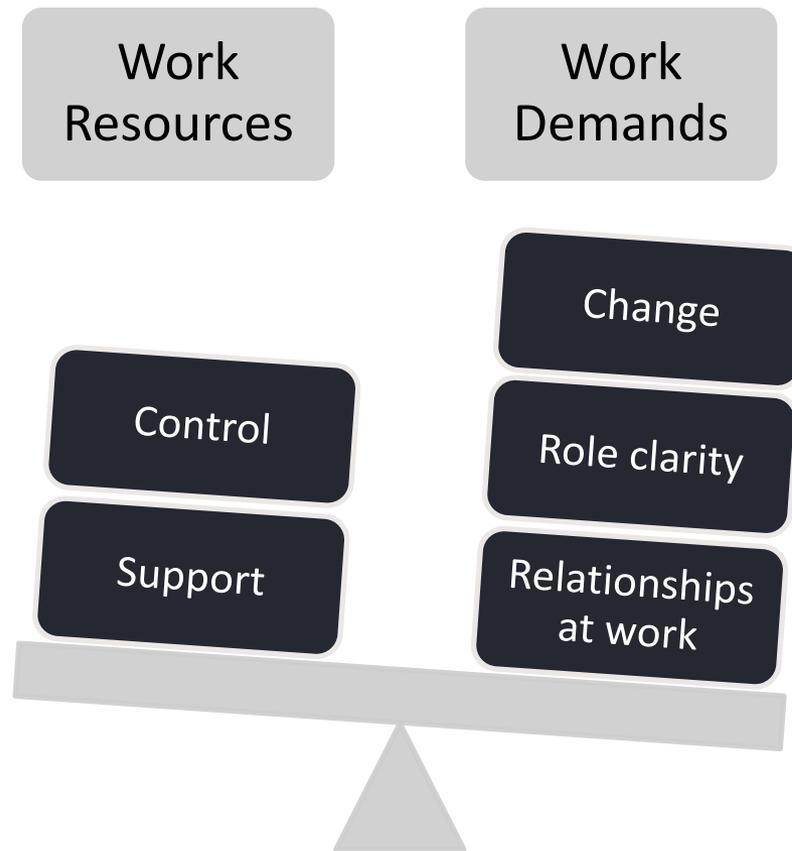
The Implications of the Demand/Control Model

Employee Outcomes

Organisational Effectiveness

Physiological Strain
- Cardiovascular strain
- Immune deficiency disorders
- Musculoskeletal disorders
- Gastrointestinal disorders
- Sleep disturbances

Psychosocial Strain
- Anxiety
- Depression

Job Attitudes
- Satisfaction, Morale, Engagement
- Burnout

Behavioural
- Absenteeism
- Turnover
- Performance deficits
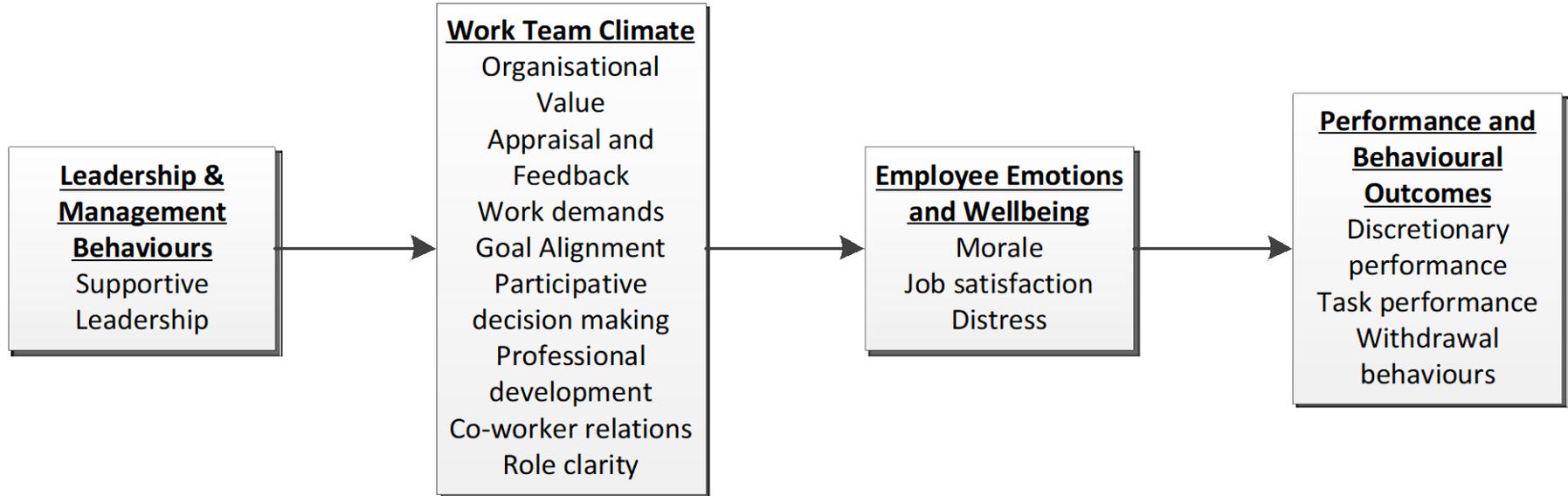- Increased accidents
- Reduced productivity
- Compensation claims

Source: (Quick et al. 1997)

Potential Imbalance between Work Demands and Work Resources
Contributing to Work Stress

Work Resources

Work Demands

Change

Control

Role clarity

Support

Relationships at work

Source: (Karasek & Way 2012)

Organisational Health Model

Leadership & Management Behaviours
Supportive Leadership

→

Work Team Climate
Organisational Value
Appraisal and Feedback
Work demands
Goal Alignment
Participative decision making
Professional development
Co-worker relations
Role clarity

→

Employee Emotions and Wellbeing
Morale
Job satisfaction
Distress

→

Performance and Behavioural Outcomes
Discretionary performance
Task performance
Withdrawal behaviours

Source: (Cotton & Hart 2003)

Systems Approach to Job Stress

LaMontagne, A, Vallance & Keegel 2007) concluded that there is unrealised potential through an integrated job stress and workplace health promotion programs as part of the systems approach to interventions.

Risk-control plans (interventions) therefore should embrace the following factors:

➤ Interventions to control the risk should be organisation and work-group specific, and be adapted to the needs, cultures, politics and economic realities of the organisation/work group

➤ Interventions to control the risk should be targeted to problem work stressors identified via risk assessment

➤ Risk-control plans should focus on primary prevention, but also include secondary and tertiary prevention activities

➤ Risk-control plans should focus on organisational-level interventions, but also include individual-level interventions

LaMontagne, A, Vallance & Keegel 2007)

WHS/OHS Legislation

↗ Health' is defined in the WHS Act as both physical and psychological health.

↗ This duty requires taking practical steps to identify, assess and control reasonably foreseeable psychological risks.

↗ The duty is to ensure the health and safety of workers and other people at the workplace so far as is reasonably practicable, including by:

   ↗ providing and maintaining a work environment without risk to health and safety

   ↗ providing and maintaining safe systems of work

   ↗ monitoring the health of workers and the conditions at the workplace

   ↗ consulting with workers and their representatives on work health and safety matters, and

   ↗ providing information, training, instruction and supervision so workers can safely perform their work activities.

Start with what we found:

The complexities of psychosocial hazards and the nature of interventions to reduce these hazards depend on a variety of inherent risk associated with risk factors: such as

↗ job design,

↗ team/group dynamics,

↗ organisational factors such as safety cultures, values, attitudes

There is no "one" risk factor that could be targeted to create a mentally healthy workplace.

A combination of risk factors would need to be addressed through interventions at the **primary, secondary and tertiary level.**

Also, the interventions would need to be specific and appropriate to the types of work/tasks and risks experienced in the organisation and address the key risk factors identified in the organisation through a comprehensive risk assessment process

The Hypothesis

↗ Significant research and evidence that undertaking an integrated systems based risk assessment approach will prevent psychological injury.

↗ In order to prevent psychological injury, an organisation must consider implementing both Occupational Health and Safety framework including OHS systems as well as health and wellbeing programs.

↗ A combination of risk factors would need to be addressed through interventions at the **primary, secondary and tertiary level.**

↗ Also, the interventions would need to be specific and appropriate to the types of work/tasks and risks experienced in the organisation and address the key risk factors identified in the organisation through a comprehensive risk assessment process

↗ In practice test the theory associated with LaMontagne, A, Vallance & Keegel 2007)

The Project Objectives

↗ Profile the types of work and the demographics of the workforce that are at most risk of developing into a psychosocial injury in workers.

↗ The extent of contribution of psychosocial risk factors to ill-health

↗ Structured risk assessment process that would need to be developed

↗ The types of intervention strategies that can be adopted in order to improve the psychosocial climate and mitigate the risk of injuries in a regulatory environment.

↗ Evaluating these intervention programs to assess the effectiveness in reducing risk associated with psychosocial hazards.

Project Research Questions

↗ What are the psychosocial risk factors that contribute to psychological injury at this organisation?

↗ What are the best practice risk methodology that can be used in conducting a risk assessment ?

↗ identifying approaches to intervention strategies in order to improve the psychosocial climate and mitigate the risk of injuries?

↗ Do the implementation of the interventions reduce the incidence of psychological injury and hence the worker's compensation premium rate?

Project Methodology

- Both a qualitative and quantitative approach was used to obtain data and establish outcomes.

- Utilising the methodologies from the literature review, an action based research project based approach was used.

Project Methodology

↗ In this cyclic action research project, information gathering was conducted through:

↗ Observations

↗ Data Analysis (Injury and Claims data)

↗ Informal Interviews/Communication

↗ Literature Reviews

↗ Stress Survey

Project Data

- At an organisational level there is a lack of awareness by managers on psychosocial hazards and/or risk factors that can contribute to psychological injury in their team. How managers can contribute to psychological Injury.

- Psychological fit for certain "high risk" jobs were not established through the recruitment process.

- Poor awareness of mental health issues and how that can impact performance

- Not reporting signs of distress to managers

- Frequent changes in people leaders (who bring inconsistent management practices and changes to business practices).

- Inconsistent application of the performance management framework (i.e. managers not dealing with behavioural/performance issues in a timely manner or delegating to team leaders)

- Lack of early intervention in claims management

- Lack of timely management of interpersonal behavioral conflicts and reports of bullying and harassment in the workplace

Project Plan

- ↗ Gap Analysis Report

- ↗ Project Brief

- ↗ Identification of hazards/risk areas/Risk Assessment

- ↗ Establish Steering Committee

- ↗ Consult with key business units on current status

- ↗ Development of intervention programs

- ↗ Implement Intervention Programs

- ↗ Report on effectiveness of interventions and recommendations to management

Intervention model for implementing workplace interventions to prevent psychological injury in the workplace
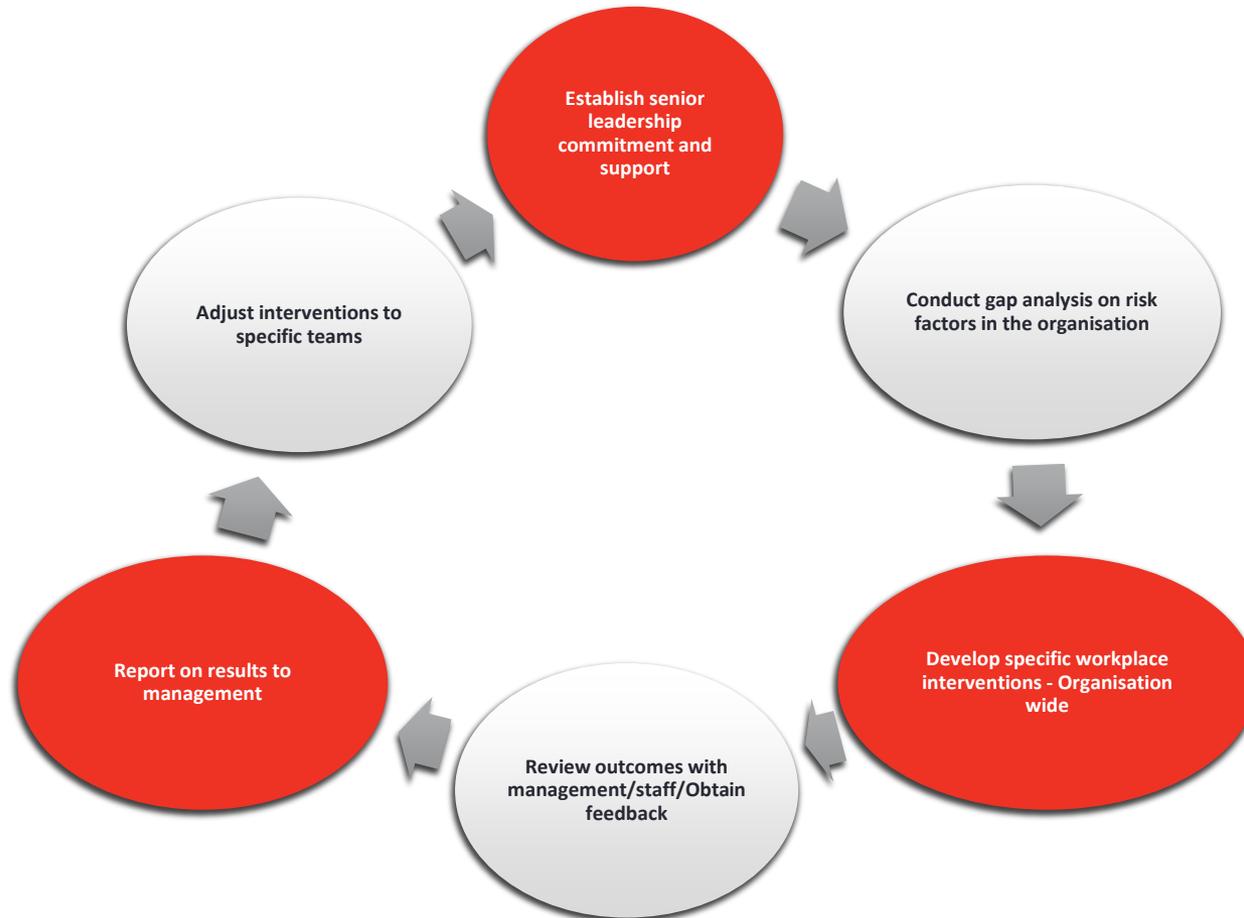
Intervention Programs

No.	Intervention	Risk Factor (s)	Team Involved in Implementing the Program	Business Scope
1	Proactively Managing Psychological Wellbeing Training	Job Design/Interpersonal relationships/Support	WHS/HR	Organisational/ Business unit
2	Health and Wellbeing Program	Job Design/Interpersonal relationships/Support	WHS	Business unit(s)
3	Development and implementation of OHS/Rehabilitation Policies and Procedures and Incident Reporting	Support/ Change	WHS	Organisational / Business unit
4	Psychosocial risk assessment	Job Design/Interpersonal relationships/Support/ Change	WHS	Organisational
5	Training sessions on how to use Manager Assist and EAP	Interpersonal relationships/Support	WHS	Organisational
6	Online training modules (Behaviour and Values & Safety in the Workplace)	Interpersonal relationships/Support/ Change	HR	Organisational
7	Change Management Training	Interpersonal relationships/Support/ Change	HR	Organisational
8	Early intervention in case management and rehabilitation	Interpersonal relationships/Support	WHS	Organisational

Evaluation of Programs addressing Psychological Injury

⤴ Most significant/successful programs included:

  ⤴ Manager training (Change, Bullying and Harassment, Impact of Job Design and Scheduling)

  ⤴ Health and wellbeing programs

  ⤴ Early Intervention (including incident management)

  ⤴ OHS Framework (polices and procedures)

⤴ Least Success Included:

  ⤴ Undertaking the psychosocial risk assessment

  ⤴ Establishing leadership support for program

Results

↗ Key psychosocial risk factors from this study were work demands associated with work overload (job design), changes within the organisation (organisational) and interpersonal conflict

↗ Intervention strategies that integrate an occupational health and safety risk management framework and workplace health promotion through the implementation of health and wellbeing programs, as a primary intervention were effective in mitigating the risk of psychological injury.

↗ Adequate employee engagement/management and change management processes in the workplace were critical

Recommendations

Conducting a risk assessment should consider the following steps:

1.   Identifying the sources of potential harm to employee health and wellbeing through consultation (hazard identification)
2.   Gather workplace data from injury reports, absenteeism, sick leave, claims, EAP
3.   Systematically assessing the risk of employees being harmed (risk assessment) – Consider conducting a safety and rehabilitation systems audit to review current processes.
4.   Developing and implementing a plan to (Risk Controls):
a.   Address the workplace factors that are risks of psychological injury through job design, training, work, health, safety and rehabilitation policies and procedures
b.   Minimize the impact of stress on employees through promoting a safety culture
c.   Provide safe and effective rehabilitation and return to work process for individuals once an injury has occurred
5.   Monitoring and reviewing the implementation and effectiveness of interventions against performance indicators and targets to ensure continuous improvement (Risk Evaluation)

Therefore, consider implementing an early intervention approach based on risk and take positive steps towards improving psychological health in your workplace.

Limitations of Project

↗ In terms of choice of interventions, one limitation of the project was that the interventions did not address all aspects of the results of root cause analysis.

↗ The project did not use the steering committee or focus groups but used informal discussions with managers and supervisors to consult and obtain the relevant information.

↗ The focus on establishing a psychological safe workplace culture and raising awareness of health and safety with limited interventions in a short timeframe was challenging.

↗ The other limitation was the timing for the project. The project was required to be completed in 12 months.

Conclusions

↗ Increase awareness of psychological wellbeing and trigger factors through training

↗ Develop a culture of a psychological safe work place through embedding work, health and safety programs though out all levels of the organisation

↗ Provide an early intervention program for safety and injury management

↗ Develop and implement a health and wellbeing program that controls potential risk factors

↗ Supporting recovery through rehabilitation

Key lessons for OHS Professionals

↗ Engage at the earliest with decision makers and stakeholders

↗ Develop a risk profile of the organisation and ensure intervention programs are customised for the organisation

↗ Utilise a risk management methodology

↗ Use evidence based research methodology to develop appropriate intervention programs (not all intervention programs are effective) and monitor progress

↗ Most importantly, consult and communicate with stakeholders throughout the process

↗ Evaluate interventions on a periodical basis for outcomes