

# PSYCHOSOCIAL SAFETY SOLUTIONS

Building a mental health strategy

## Acknowledgment

This country always has been, and always will be Aboriginal land.

We acknowledge the connection to these lands, waterways and skies that Aboriginal people have held for time immemorial and pay respects to their leaders.

We also acknowledge ngā iwi Māori as the Tangata Whenua of Aotearoa and work to uphold the Treaty of Waitangi.





#### About Me

- Not a psychologist... and that is ok!
- Have worked on a number of mental health strategies throughout my ten years in the safety field
- I have always had help and expertise alongside me
- I get frustrated at the discourse that surrounds mental health strategies...

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This is a safe place!

Why did I start PSS?

What do I love?

What does the world need?

What am I good at?

What can I be paid to do?

## My ikigai



But enough about me...

Mhy are you here?

Comcare boss stresses Government's focus on psychological safety in the

Tip of the iceberg. The jobs most at risk of

Victoria ramps up regulation to address psychosocial hazards in the

psychologicalinjury Finally Admits It Has Some Serious Culture and Overwork Problems After Someone Died at the Office Why you should care...

## Beyond legislation

- You are likely in a people and/or leadership position, and a robust mental health strategy is focused on the needs of its people
- It has been proven time and time again that improved psychosocial safety standards and a flourishing team has significant benefits in relation to:

the Hhack in

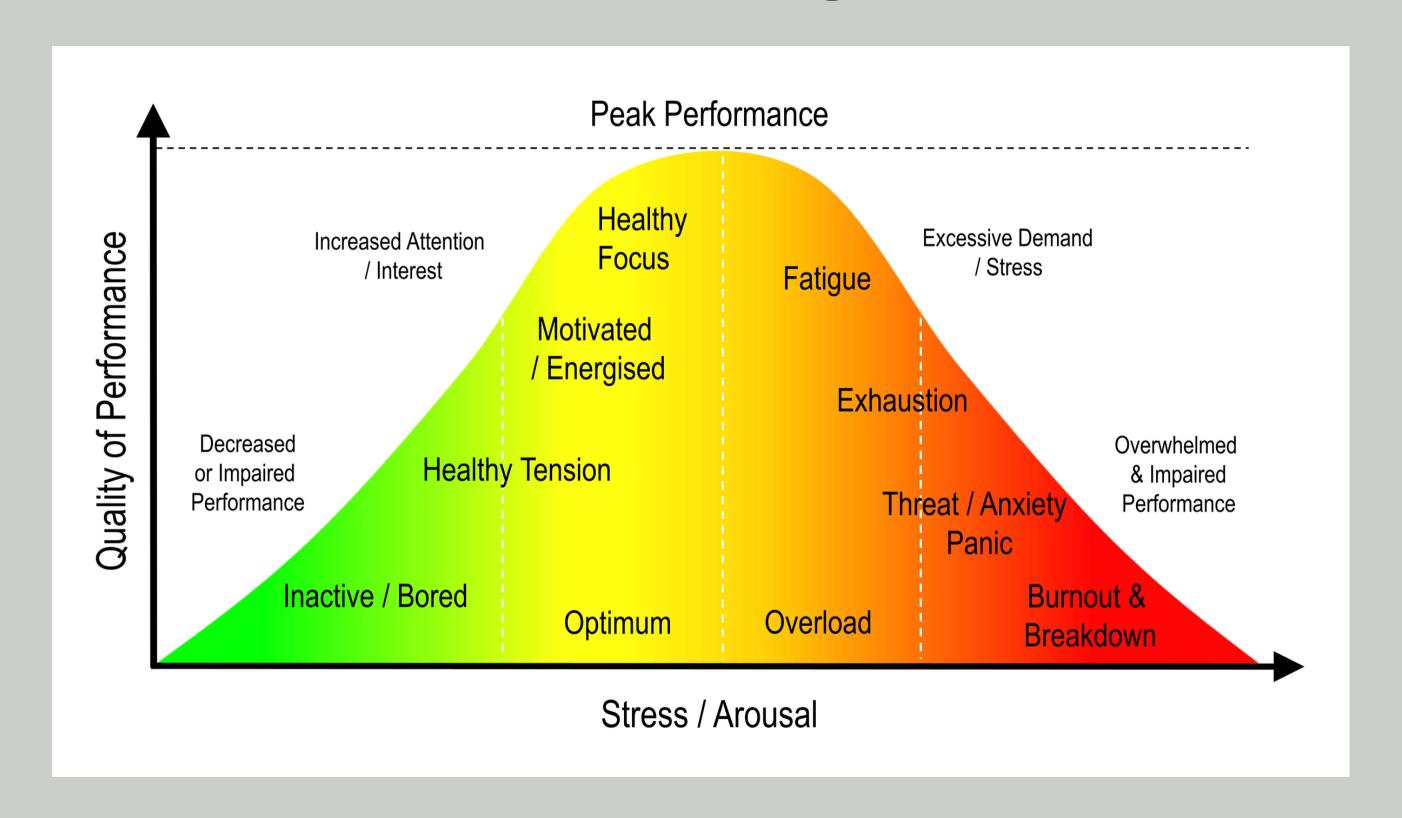
- sales;
- culture;
- retention;
- absenteeism;
- productivity;
- o and so on!
- More than that, it is the right thing to do.

# The mental health continuum

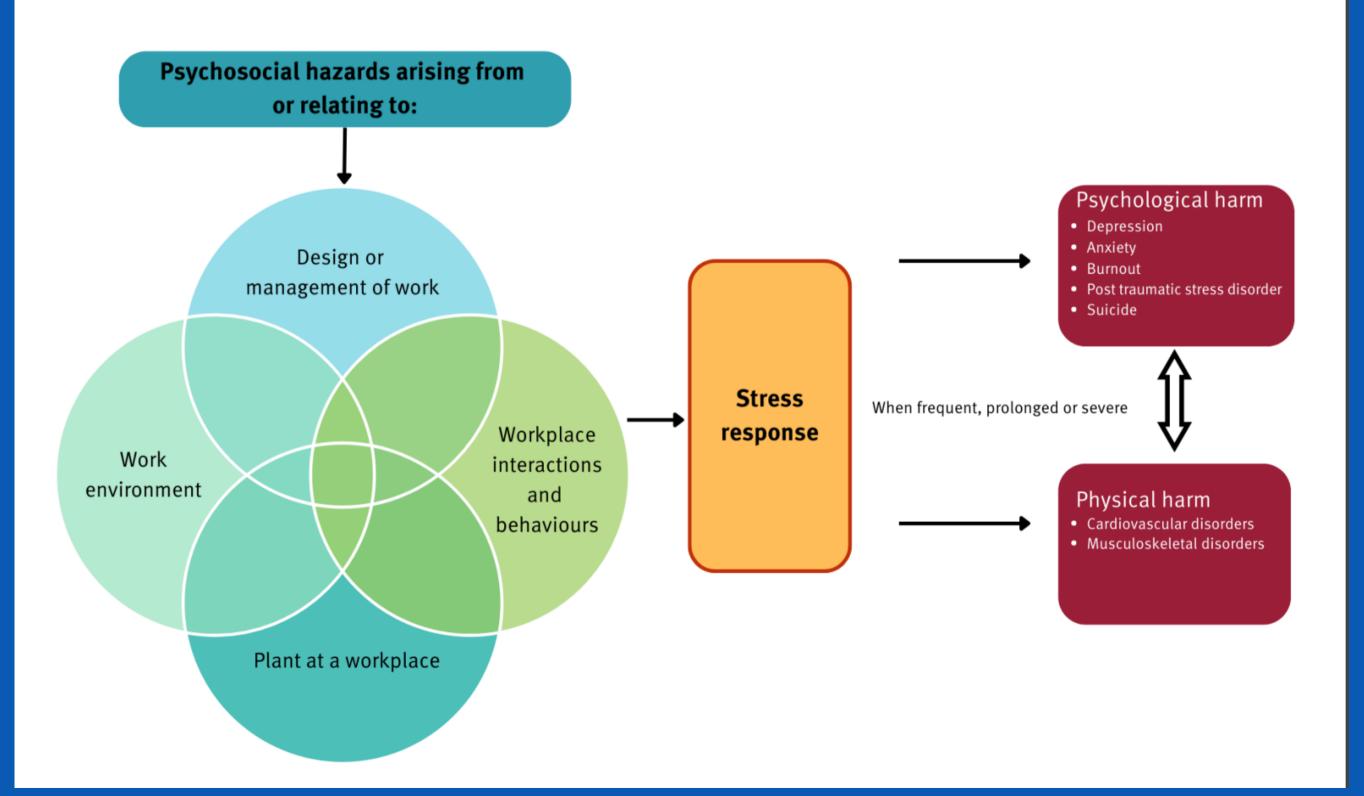
IN CRISIS	STRUGGLING	UNSETTLED	THRIVING	EXCELLING
<ul> <li>Very anxious</li> <li>Very low mood</li> <li>Absenteeism</li> <li>Exhausted</li> <li>Sickness, physical pains</li> <li>Isolation</li> <li>Very poor sleep</li> <li>Weight loss</li> <li>Psychotic break</li> <li>Severe drug/alcohol abuse</li> </ul>	<ul> <li>Anxious</li> <li>Depressed, sad</li> <li>Low self-esteem</li> <li>Tired</li> <li>Poor work performance</li> <li>Presenteeism</li> <li>Poor concentration</li> <li>Poor sleep</li> <li>Poor appetite</li> <li>Drug/alcohol abuse</li> </ul>	Worried, nervous     Edgy     Irritable     Frustrated     Self-doubting     Sad, gloomy     Trouble sleeping     Tired     Distracted     Decreased social activity	<ul> <li>Normal mood, some variations</li> <li>Positive</li> <li>Calm</li> <li>Functioning normally in job</li> <li>Sleeping well</li> <li>Focused</li> <li>Eating normally</li> <li>Normal social activity</li> </ul>	<ul> <li>Cheerful, joyful</li> <li>Solution focused</li> <li>Energetic</li> <li>High job performance</li> <li>Prioritising sleep and recovery</li> <li>'Flow' - intense engagement</li> <li>Fully realising potential</li> <li>Actively seeking connections</li> </ul>

(Mental Health Matters n.d.)

## Understanding stress



## Relationship of psych hazards to injury outcomes

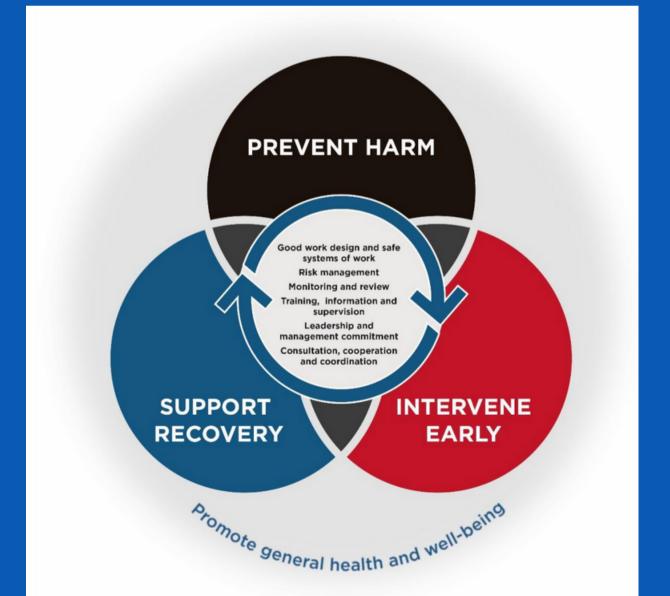


Where to start...

## Building a strategy

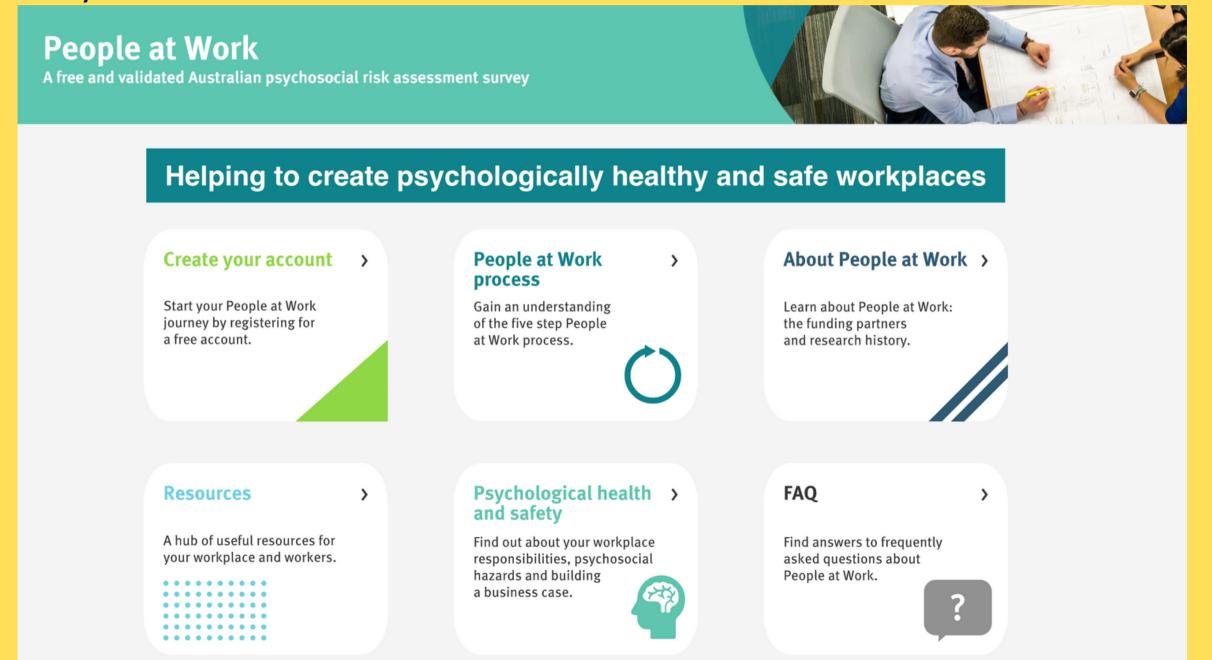
- How will you consult?
- How will you consider your unknown unknowns?
- How will you make your mental health strategy recognisable?
- What values of your business align to (or could be aligned to) psych safety?

The systematic approach to preventing harm and supporting recovery:



## Understand your baseline

- An external review is a great place to start there are so many companies out there who are well-equipped to support (note do your research!) and, if your budget doesn't allow it, try one of the many free tools available online
- Remember, you don't need to be a psychologist to understand risk, but I would always recommend utilising an organisational psychologist or psychiatrist where you can to further understand the risks we are referring to today



## Understanding your baseline

- Do you have a risk register?
- Does your risk assessment tool consider psychosocial risks?
- Does your inspection template consider psychosocial risks?
- What are your goals and how do you measure success (and thereby your current status)?
- What wellbeing support do you currently provide employees?
  - Do they know about those support offerings?
- How many psych-related incidents have you had in the last three years?
- How many psych claims have you had in the last three years?
- Do HR and H&S share complaints relating to bullying/harassment/overload?
- Do you offer an EAP service?
  - What is your utilisation %?
  - How does that compare to others in your industry?
  - What is the work-relatedness of EAP engagement?
  - Opes it even matter?!

Then what?

Consult + Control

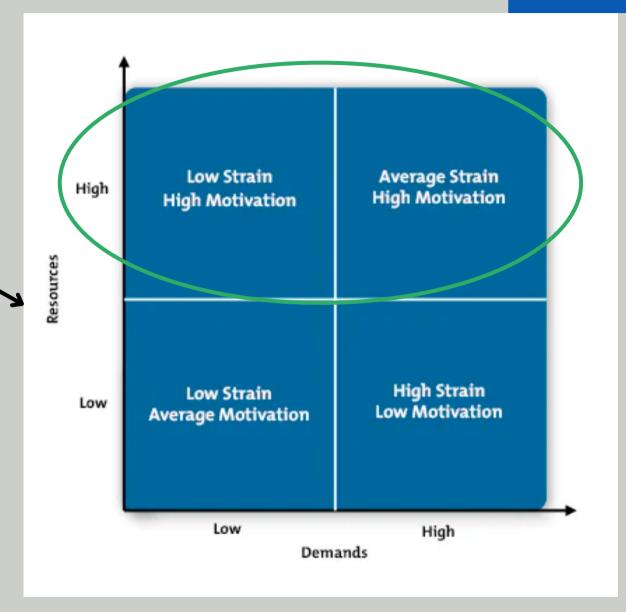
#### Risk identification

#### • Common risks:

- Job demands (both high and low)
- Low job control
- Low role clarity
- Traumatic events
- Harassment/bullying

#### • Define your risks:

- Retail/healthcare/hospitality: occupational violence
- Casualised workforce: uncertainty around job security
- Manufacturing: shift work
- Social work: emotional drain

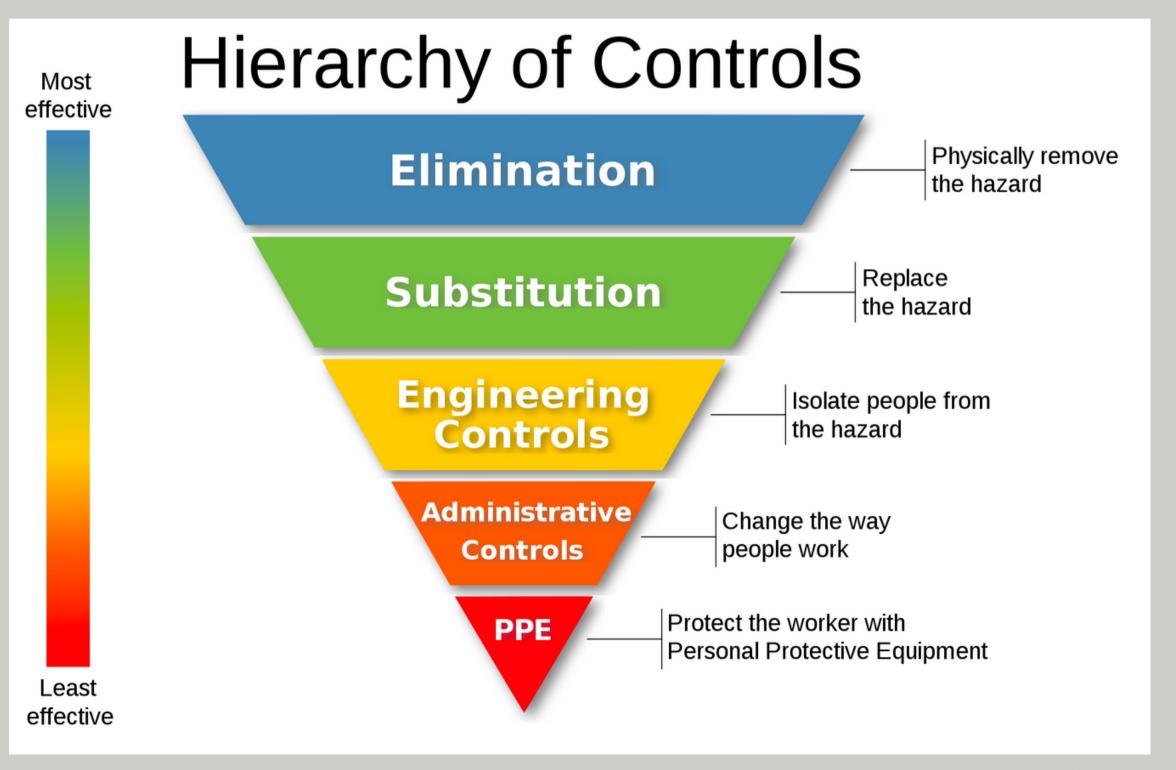


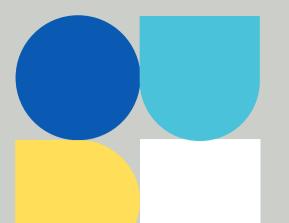
(Bakker and Demerouti 2007)

Remember - some stress is good!

#### Risk control

Remember - safety professionals control risks every day - don't overcomplicate this...





## Incident response

- Mental health first aid vs psychological first aid it can be an unhelpful discourse
- The principles of psychological first aid are endorsed by the Red Cross and the World Health Organisation and are cheap to implement so it is a great way to improve leadership capacity

#### **Psychological** first aid is:

- NOT debriefing
- NOT obtaining details of traumatic experiences and losses
- NOT treating
- NOT labelling or diagnosing
- NOT counselling
- NOT something that only professionals can do
- IT IS: something that anyone with the appropriate training can use to help calm a person in distress and support their recovery

## Psychological First Aid

Principles	Actions
LOOK	<ul> <li>Check for safety.</li> <li>Check for people with obvious urgent basic needs.</li> <li>Check for people with serious distress reactions.</li> </ul>
LISTEN	<ul> <li>Approach people who may need support.</li> <li>Ask about people's needs and concerns.</li> <li>Listen to people and help them to feel calm.</li> </ul>
LINK	<ul> <li>Help people address basic needs and access services.</li> <li>Help people cope with problems.</li> <li>Give information.</li> <li>Connect people with loved ones and social support.</li> </ul>

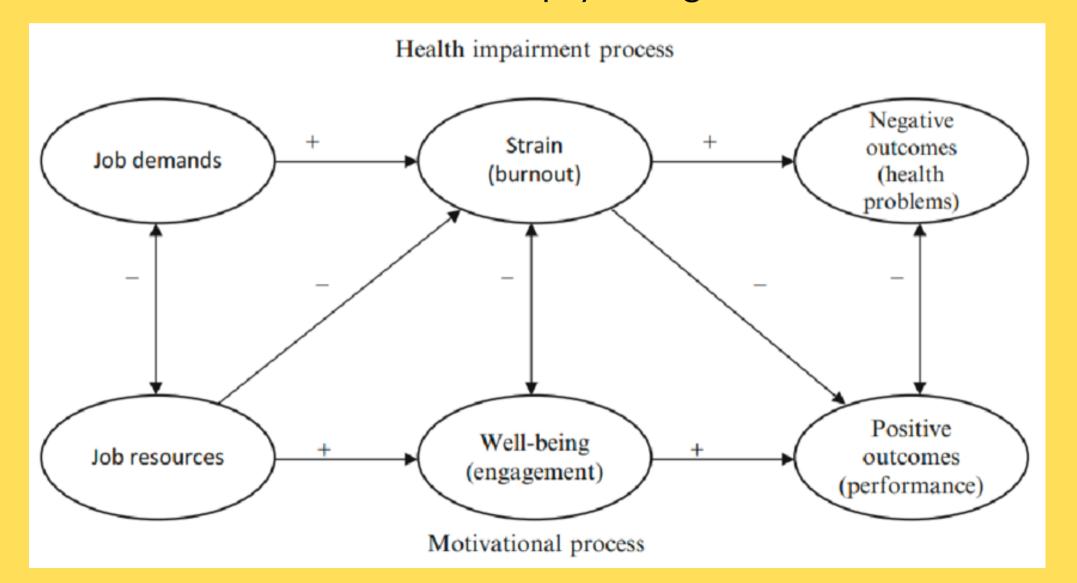
## A case study...

- Two cohorts of leaders:
  - Group one were afraid to ask 'R U OK?' in case someone said 'no'
  - Group two were taking on far too much of their staff's concerns (answering distress calls on the weekends, picking them up from the city etc)
- The principles of psychological first aid allowed the organisation to address both cohorts



## Culture Survey Adjustments

- Consider whether your survey assesses all elements of the job demands-resources model:
  - Emotional demands;
  - Cognitive demands (mental effort);
  - Time demands;
  - Physical demands;
  - Demands associated with organisational change; and
  - Demands caused by a lack of organisational justice
- Low scores could indicate a risk of burnout or psychological strain



#### A cheat sheet

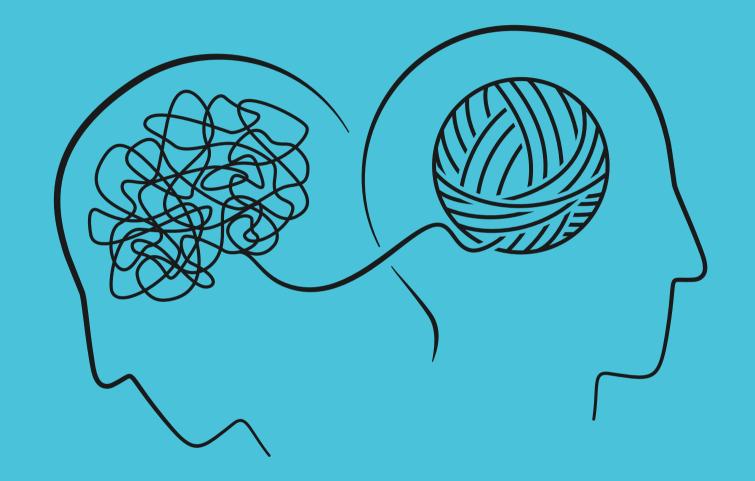
- Some of the key recommendations we regularly implement to improve the mental health of organisations:
  - Data-led decision-making... Are you currently reporting on mental health outcomes/trends in your environments?
  - Induction/awareness training for all staff
  - A mental health oversight/steering committee that includes senior leadership and, if possible, external expertise
  - A committee that consults with all levels of your organisation
  - An incident review process which is used to inform the prevention of future events

## A cheat sheet (continued)...

- Some of the key recommendations we regularly implement to improve the mental health of organisations:
  - Business-wide wellbeing initiatives including visible leadership participation (yoga gets a bad name... but there is value if it is part of a broader meaningful strategy)
  - External partnerships with recognisable brands Black Dog, Beyond Blue, Regulators, Ministry of Health NZ etc
  - Strong promotion of EAP it can't just be a poster!
  - Leader education and support (psychological first aid)
  - Empathetic, human leadership don't be afraid to show a bit of yourself

## Some final tips...

- Once you understand your staff's commentary, and you have considered the results of the psych risk assessment, be sure to act quickly, effectively and publicly
  - be proud of your strategy!
- Evolve, constantly and transparently:
  - The strategy is a living, breathing, accessible document, never stagnant and never in a drawer!
  - Empathy, honesty and transparency will help you build an effective strategy.
     Think about your COVID Safe Plans and the trust built with staff through such an open, accessible approach



## Thank you.

Any questions?



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10% of all profits from Psychosocial Safety Solutions is invested in Beyond Blue, supporting the mental health of those in need.