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Identifying & Managing Psychosocial Hazards

Dr Sherrilyn Mills

Make a difference.

Dr Sherrilyn Mills

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Your Speaker

Sherrilyn Mills has been involved in Workers' Compensation, Injury Management, Vocational Rehabilitation and Occupational Health and Safety since 1997. Sherrilyn has a Master's in Occupational Health and Safety, Bachelor of Commerce with a Double Major in Human Resource Management and Industrial Relations and PHD from Curtin University. Sherrilyn's research investigated individual, organisational and psychosocial factors that prevent return to work and result in long duration workers' compensation claims.

Sherrilyn commenced her career working for numerous Workers' Compensation Insurers assisting with the management of complex workers' compensation claims, WorkCover Advocacy and Consultancy services in Work Health and Safety and Injury Management systems development, implementation and audit. Subsequent to the insurance industry, Sherrilyn has predominantly worked as a consultant with a broad spectrum of businesses including government, oil and gas, mining, transport, construction, labour hire, health and education and general industry. As a consultant to a variety of national companies, her services predominantly included auditing, development and implementation of management system, workers' compensation and injury management advice and the implementation of corporate safety programs to facilitate cultural change.

Agenda

- History of investigation into Psychosocial Factors

- Defining Psychosocial

- Friction and Adverse Outcomes

- Elements that can increase the probability

  of accident, illness and injuries

- Elements arising from leadership, organisations

  and individual factors

- Psychosocial hazards that cause harm

- Prevention Factors

- Risk controls and measures that can be implemented

- Legislative Requirements

Impact of Psychological Ill-health and Injuries

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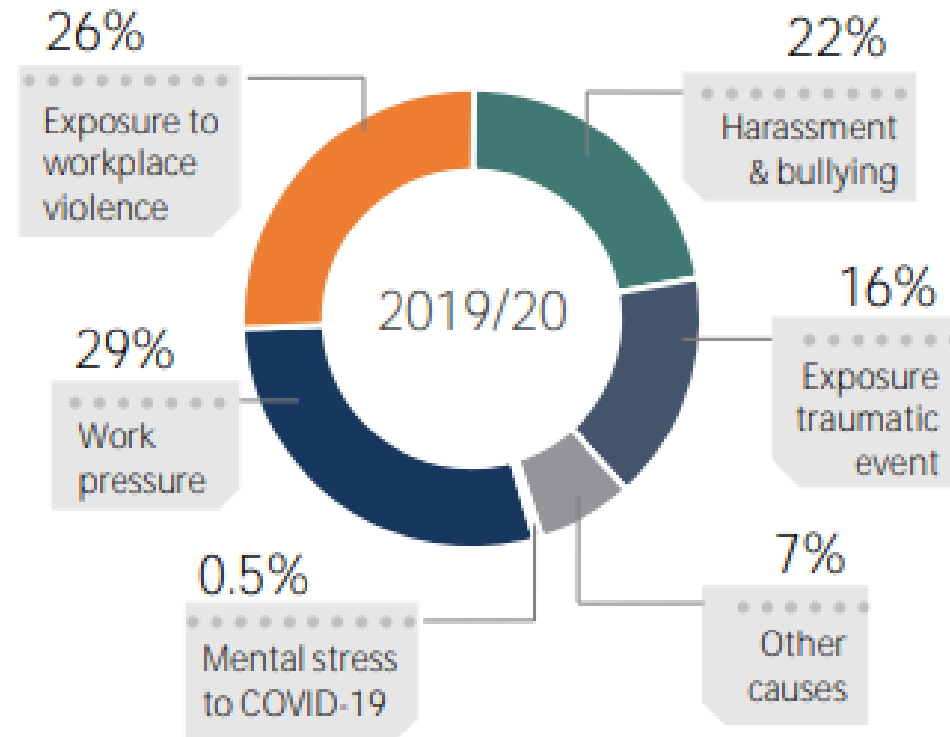HEALTH | SAFETY | ENVIRONMENT

Untreated mental illness = $11b

Absenteeism = $ 4.7b

Presenteeism = $6.1b

Compensation payments = $ 146m

PWC, 2014

Impact of Psychological Ill-health and Injuries

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Causes of stress-related claims

26%
Exposure to workplace violence

22%
Harassment & bullying

2019/20

16%
Exposure traumatic event

29%
Work pressure

0.5%
Mental stress to COVID-19

7%
Other causes

Safe Work Australia – Statistical Note 2021

Stress-related claim numbers

2016/17	2017/18	2018/19	2019/20	4-year trend
360	387	462	427	▲

Over four years, the number of accepted stress-related lost-time claims increased by 19%. In 2019/20, there were 427 stress-related lost-time claims lodged, representing 3% of all accepted lost-time workers' compensation claims.

2019/20	Lost-time claims	Stress-related claims
Claim numbers	14,132	427 (3%)
Total claim costs	$830.6m	$50.3m (6.1%)
Total days lost	1,479,906	87,835 (5.9%)
Average claim costs	$58,775	$117,701
Average days lost	105 days	206 days

History of Investigation into Psychosocial Factors

School of Public Health

Towards the Prevention of long-duration workers compensation claims
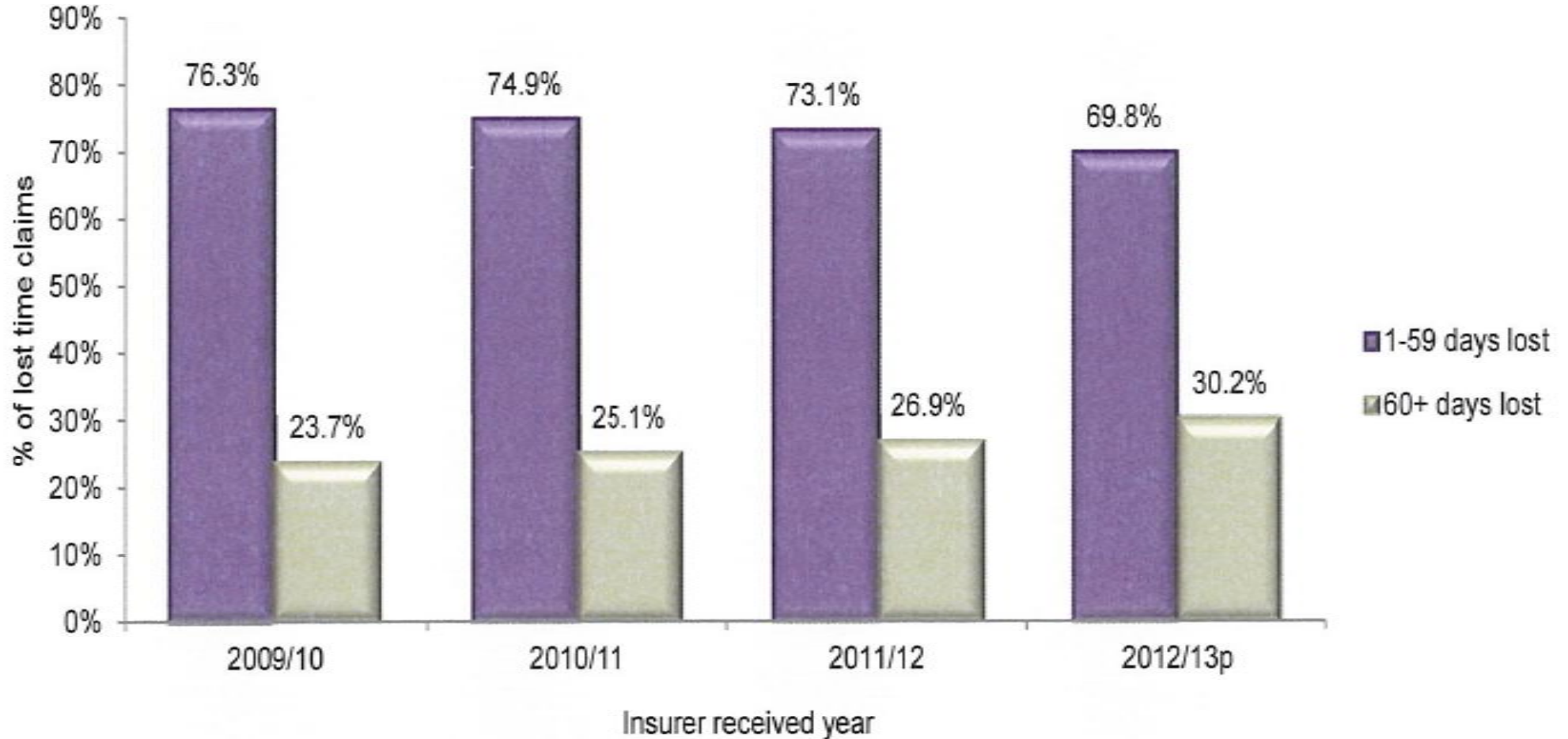
- Pre-claim intervention and strategy

Sherrilyn Shaw-Mills

This thesis is presented for the degree of Doctor of Philosophy – Public Health
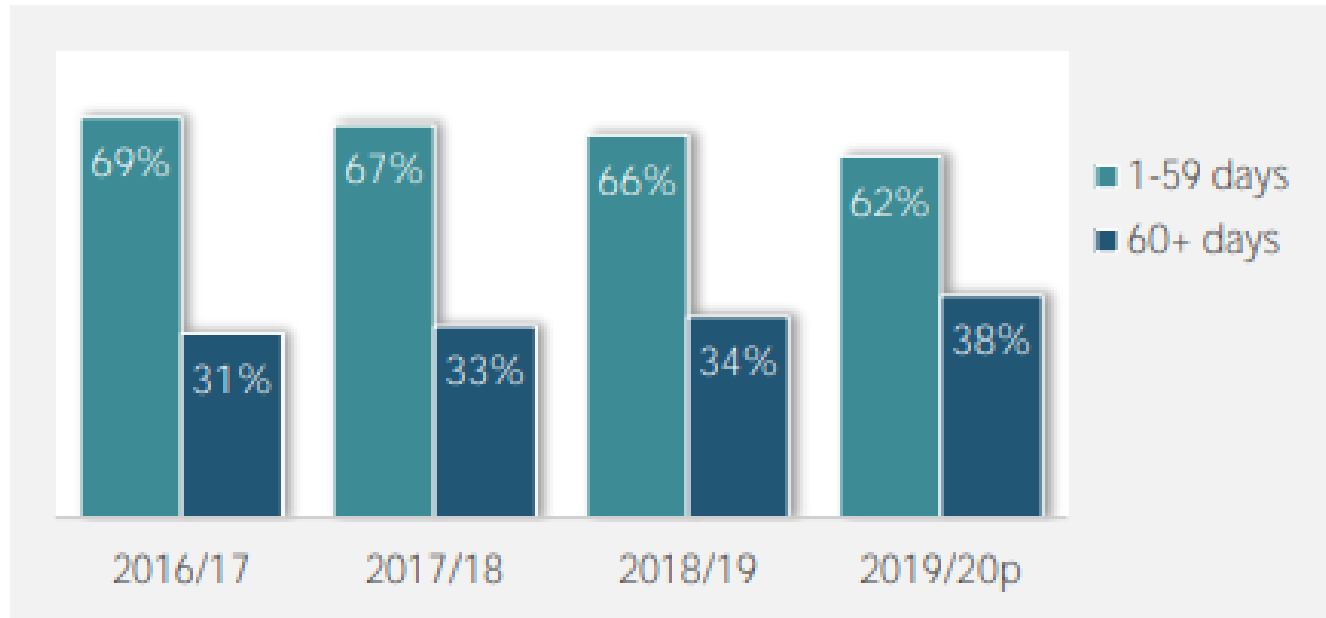
of

Curtin University

History of Investigation into Psychosocial Factors

Percentage lost time claims by days (WorkCover WA, 2014, p. 14)

History of Investigation into Psychosocial Factors

Lost-time claims by days lost

	2016/17	2017/18	2018/19	2019/20p
1-59 days	69%	67%	66%	62%
60+ days	31%	33%	34%	38%

Over the last four years, the proportion of 1-59 days lost claims to all lost-time claims reduced from 69% to 62%.

In contrast, the proportion of claims with 60+ days lost increased from 31% to 38% over four years.

Annual Statistical Report 2021, WorkCover WA

Defining Psychosocial

- Kendall, Linton and Main (1997) the term psychosocial refers to the interaction between the person and their social environment and the influences in their behaviour.

- The interactions with these factors and the individual may influence behaviour, levels of distress, attitudes and beliefs and subjective experiences of pain. Even well intentioned actions can inadvertently result in counterproductive outcomes (Kendall, Linton, & Main, 1997).

Defining Psychosocial

Division 11 — Psychosocial risks

[Heading inserted: SL 2022/214 r. 5.]

55A. **Meaning of psychosocial hazard**

A ***psychosocial hazard*** is a hazard that —

(a) arises from, or relates to —

    (i) the design or management of work; or

    (ii) a work environment; or

    (iii) plant at a workplace; or

    (iv) workplace interactions or behaviours;

and

(b) may cause psychological harm (whether or not it may also cause physical harm).

[Regulation 55A inserted: SL 2022/214 r. 5.]

55B. **Meaning of psychosocial risk**

A ***psychosocial risk*** is a risk to the health or safety of a worker or other person arising from a psychosocial hazard.

[Regulation 55B inserted: SL 2022/214 r. 5.]

Work Health and Safety (General) Regulations 2022 and Work Health and Safety (Mines) Regulations 2022

Defining Psychosocial

Psycho-pathological	Cognitive	Human adaptive	Combination of diathesis-stress, cognitive & adaptive perspectives	Organisational psychology
• Pre-disposing personality or psychopathological factors. (Cherkin, Deyo, Street, & Barlow, 1996; Crook, Moldofsky, & Shannon, 1998; Engel, Von Korff, & Katon, 1996; Feuerstein & Thebarge, 1991; Gatchel, Polatin, & Mayer, 1995; Klenerman et al., 1995; Main, Wood, Hollis, Spanswick, & Waddell, 1992; Thomas et al., 1999; Turk, 2002)	• Beliefs; • Perceptions; • Expectations of control; and • Self-efficacy as they relate to pain and disability.	• Coping beliefs; and • Coping styles. (Burton, Tillotson, Main, & Hollis, 1995; Klenerman et al., 1995; Linton & Buer, 1995; Tate, Yassi, & Cooper, 1999) Factors include perceived support from peers, supervisors and family and how these may be predictive of pain and disability (Feuerstein, Berkowitz, & Huang, 1999; Krause, Ragland, Greiner, Syme, & Fisher, 1997; van der Weide, Verbeek, Sallé, & van Dijk, 1999)	• Fear, • Catastrophising; • Avoidance; and • Greater experiences of pain and disability. (Turk, 2002)	Work stress; • Poor job satisfaction; and work performance; • Availability of unscheduled breaks; • Job modification, • Job demands; • Work quantity, • Monotony/ work tempo; • Lack of control; and • Problematic relations with co-workers have predictive value on pain and disability. (Bigos et al., 1991; Coste, Delecoeuillerie, De Lara, LeParc, & Paolaggi, 1994; Hemingway, Shipley, Stansfeld, & Marmot, 1997; Infante-Rivard & Lortie, 1996; Krause, Frank, Dasinger, Sullivan, & Sinclair, 2001; Thomas et al., 1999; van der Weide et al., 1999)

Origins of psychosocial modelling
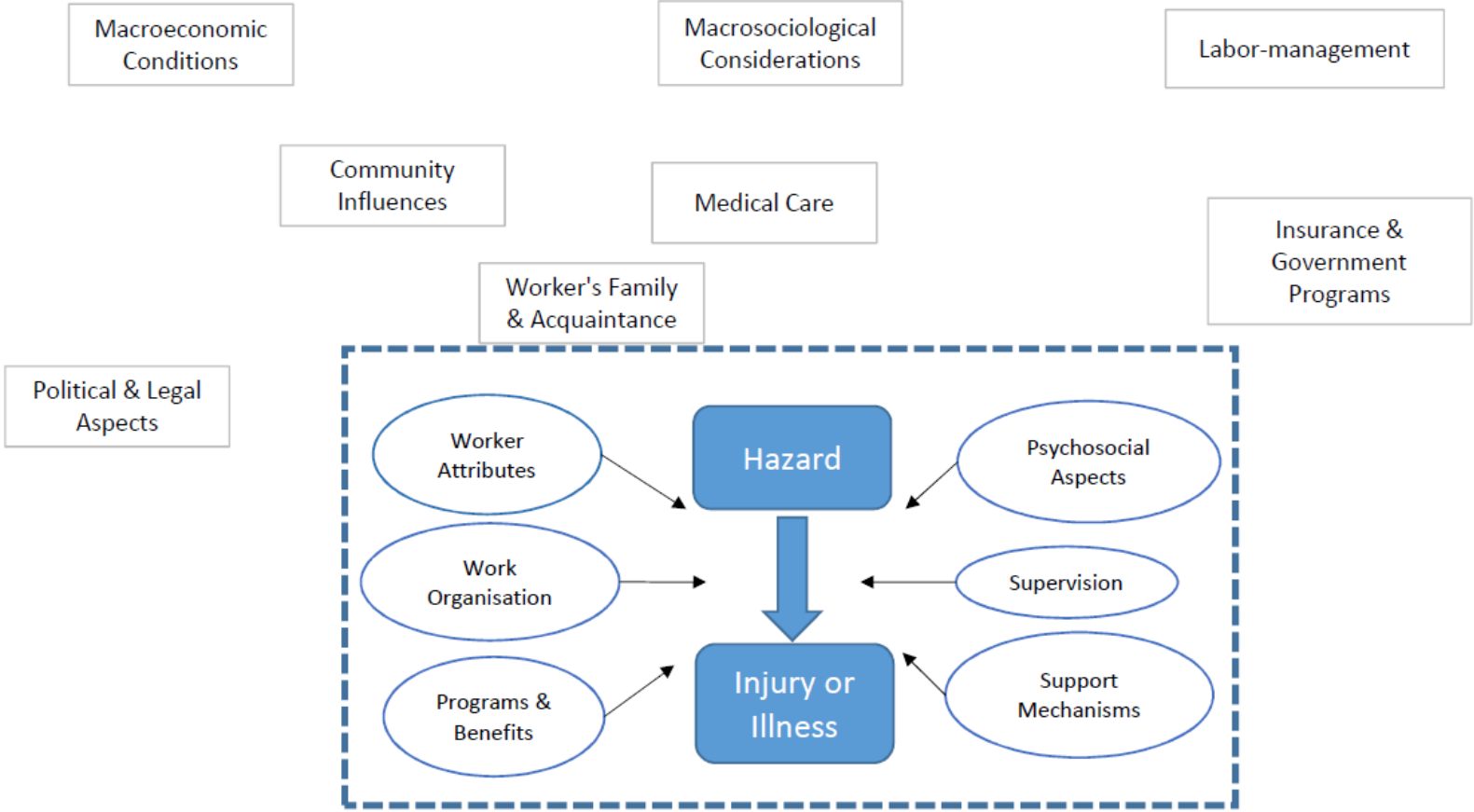(Schultz et al., 2004, p. 78).

Defining Psychosocial
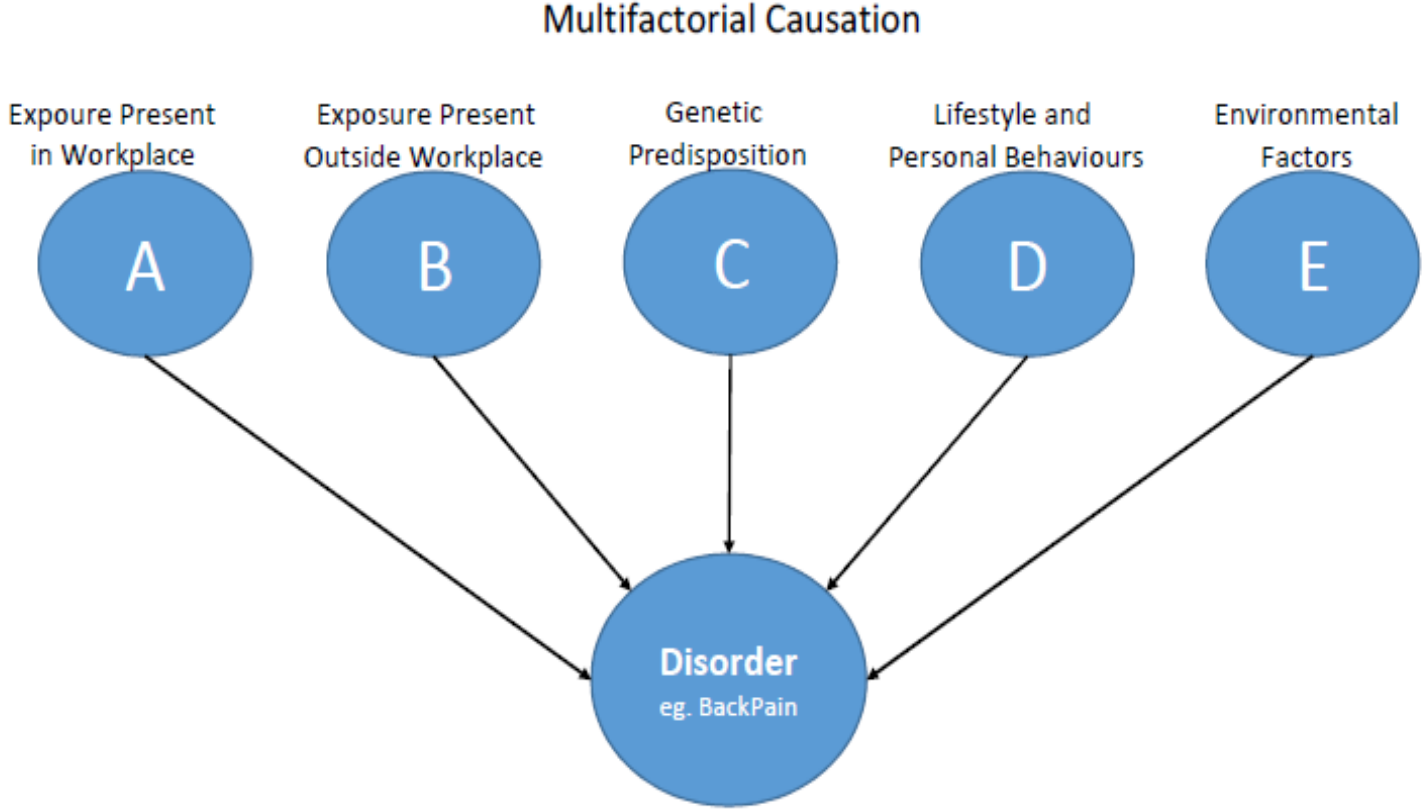
The Multi-factorial causation of psychosocial aspects relating to workplace injuries (Dembe, 2003 p.78).

Defining Psychosocial

How the broader social environment affects psychosocial reactions to injury or illness (Dembe, 2003 p. 15

Friction and Adverse Outcomes

- Research undertaken by the International Underwriting Association of London (IUA) and Association of British Insurers (ABI) Rehabilitation Working Party (2004)

- 20-30% of personal injury cases the victim suffers disability and distress significantly greater than might be expected from the injury alone

- In about 5% of cases the physical and social outcomes are adversely affected to the extent that cannot be explained by the initial or remaining injury

Friction

- Characterized by conflict tension and "friction"

- Hom *et al.* (2001) and Cotton (2003) employee withdrawal from the workgroup and work environment as a means of coping with the friction caused due to the dissatisfaction with their role and the dissatisfaction and effects on health

Forms of withdrawal:

- Absenteeism,

- Presenteeism

- Workers' Compensation Claims

- Accrued leave entitlements

- Unpaid sick leave

Friction

Causes of Frictions:

- Conflict and poor relationships with managers, supervisors and colleagues
- Job dissatisfaction
- Role ambiguity
- Job Status
- Workload
- Family /. Work life balance
- Incompatibility between worker capability and job role
- Individual health and personality factors
- High work demand both physical and psychological
- Lack of job control
- Strain of work both physical and psychological
- Occupation
- Size of organisation
- Union membership

Elements that can Increase the probability of Accidents, Injuries and Illness

? What is company culture?

"The amalgamation of organizational values, the environment created by leadership, communication style and general atmosphere of a company."

Elements that can Increase the probability of Accidents, Injuries and Illness
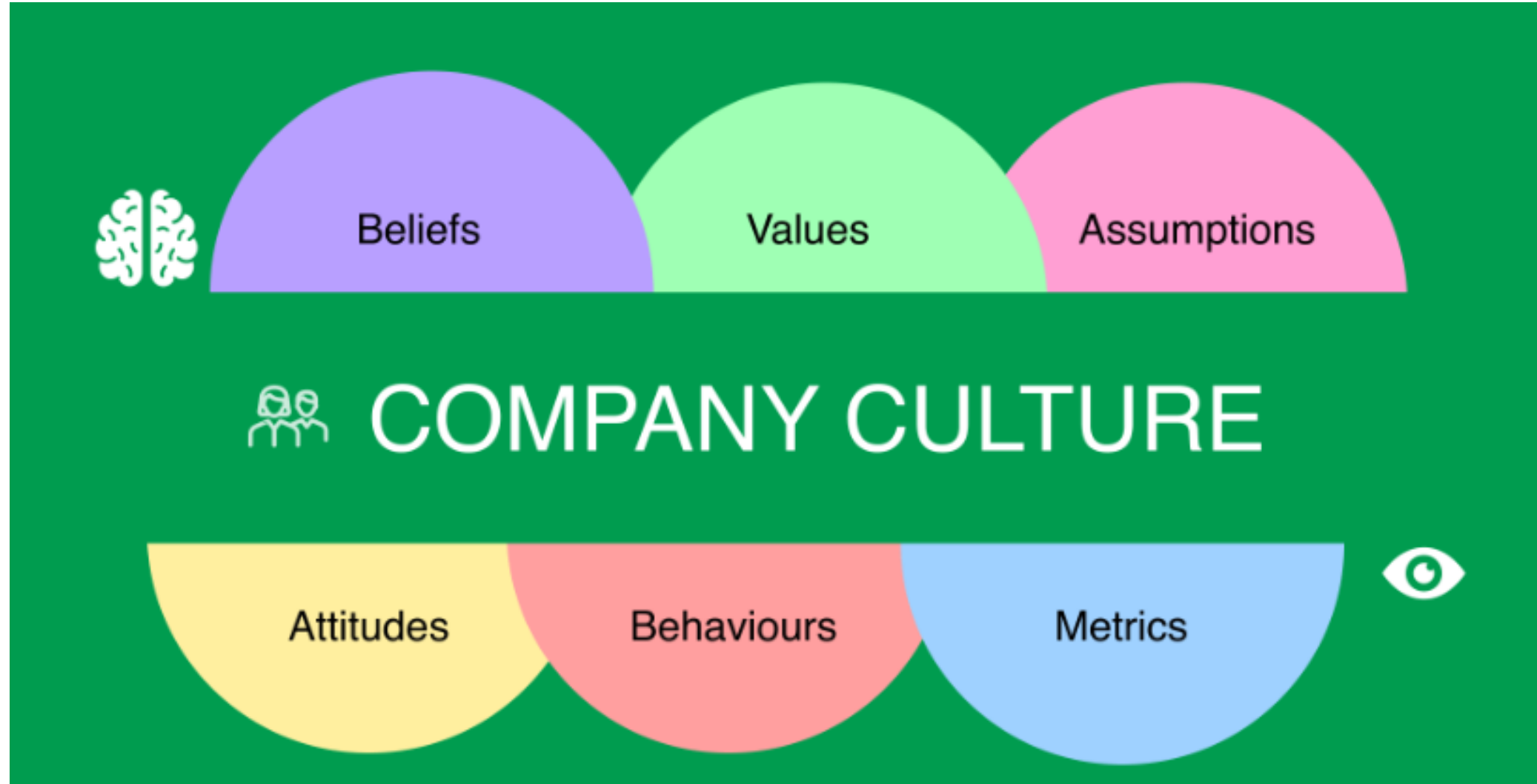
Elements Arising from Individual, Organisational and Psychosocial factor

Table 19: Green Flags or Pre-incident Flags contributing to the onset of injury and illness and duration of incapacity.

An employee who is more likely to be an LDC, their role will include the following: • higher level of psychological and physical demand; • low skill discretion; • poor co-worker support; • high job demand; • low control and autonomy.
An employee who is more likely to be an LDC, will demonstrate the following characteristics: • history of mental health issues ; • union membership; • job dissatisfaction; • problematic relationship with co-workers and/or supervisor; • history of poor attendance or absenteeism; • individual has poor coping skills.
An organisation of an employee who is more likely to be an LDC, will demonstrate the following characteristics: • Contract of employment where the employee is engaged other than permanent; • Lack of Human Resource personnel; • Do not conduct pre-employment medicals; • Do not formally induct their employees or contractors; • Do not have job descriptions for their employees; • Organisation has a lack of supportive organisational culture

Elements Arising from Individual, Organisational and Psychosocial factor

HSE Global Psychosocial Elements, Factors and Hazards

Risk Control and Strategies
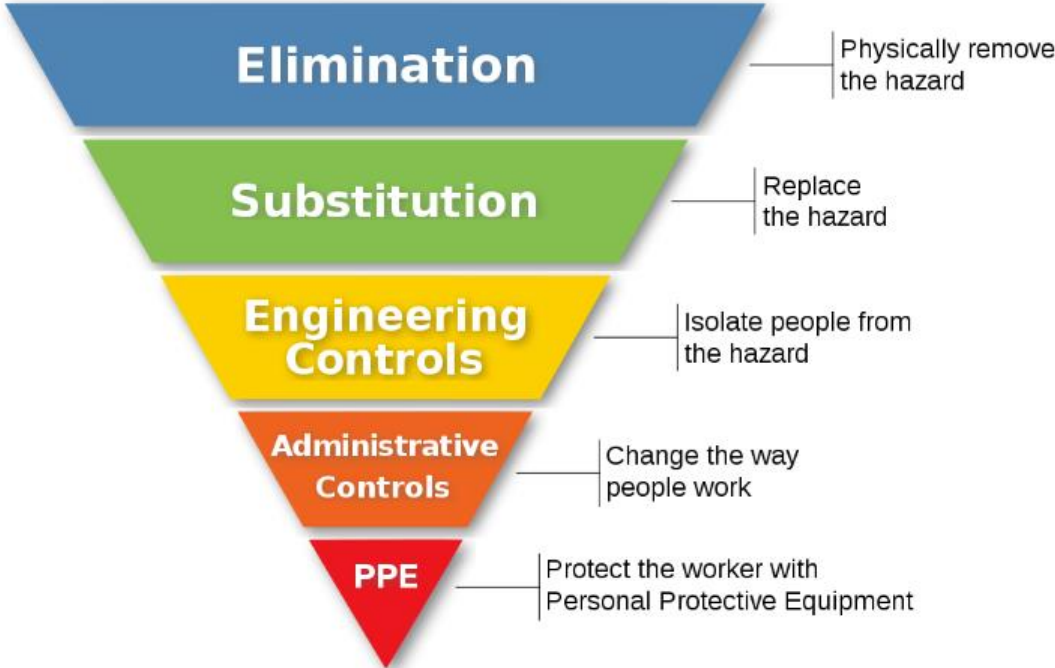

HSE Global 4 Step Risk Management Process

Risk Control and Strategies

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- Every workplace and worker is unique, separate issues and challenges

- Use a risk assessment matrix approach

- Apply Hierarchy of Control approach

- Consultative workshop approach with Key Stakeholders to agree on controls

- Consultation with the workforce that it effects psychosocial impact and benefit essential

- One fit approach does not work for all organisations

Risk Matrix

Consequence (Severity of injury or damage)	Likelihood / Probability		
	LIKELY	MODERATE	UNLIKELY
HIGH (1)	HIGH	HIGH	MEDIUM
MEDIUM (2)	HIGH	MEDIUM	LOW
LOW (3)	MEDIUM	LOW	LOW

Hierarchy of Controls

Elimination — Physically remove the hazard

Substitution — Replace the hazard

Engineering Controls — Isolate people from the hazard

Administrative Controls — Change the way people work

PPE — Protect the worker with Personal Protective Equipment

Risk Control and Strategies

Examples :

- Training, education and awareness

- Improved communication and consultation

- Career planning and development

- Appropriate detailed job descriptions with functional and cognitive demands analysis

- Improved reward and recognition specific to workers and workforce

- Individual health and wellbeing goal planning included in performance management discussions

- Improved work rosters and working hours

Model of Management for Prevention of LDC

MODEL OF MANAGEMENT FOR PREVENTION OF LDC

PREVENTION

PRIMARY

implementation of Health into Safety Management Systems — Leadership — Health & Wellbeing Policy and Procedure — Prevention of Occupational Stress

Organisational Health & Wellbeing — Performance Management — Job Autonomy — Recording and Review of Organisational Data

Implementation of Climate Surveys — Optimum Work/Home Balance — Job Redesign & Modification — Work Team Dynamics

SECONDARY

Pre-Incident Early Intervention — Employee Assistance Programs — Mediation — Pre employment Medicals and Fitness for Work Monitoring and Surveillance

Consultant, Occupational Physician or General Practitioner — Wellbeing Programs — Masseurs

TERTIARY

Organisational Health & Wellbeing — Implementation of Effective Claims Management Process — Addressing Barriers

Implementation of Psychosocial Barrier Screening Early with Ill or Injured

Mentally Healthy Workplaces

- The Work, Health and Safety Act 2020, WA, section 19, requires the person conducting the business or undertaking must ensure, so far as is reasonably practicable, that the health and safety of other persons is not put at risk from work carried out as part of the conduct of the business or undertaking.

- Note: **Health means physical and psychological health**
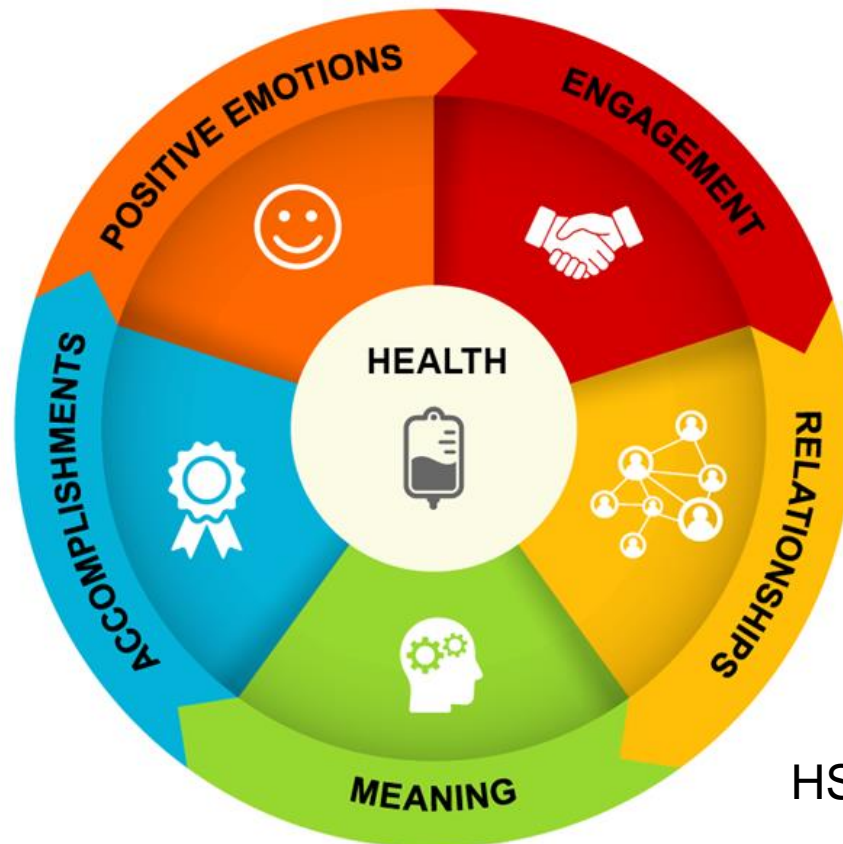
HSE Global Health Model

Managing psychosocial hazards at work

Code of Practice

JULY 2022

Psychosocial Risk Legislation & COP Status

Psychosocial Hazards/ Risk Factors	WA	QLD	NSW	VIC	SA	NT	TAS	ACT
Job Demands	☒	☒	☒	☒	☒	☒	☒	☐
Job Control	☒	☒	☒	☒	☒	☒	☐	☐
Poor Support	☒	☒	☒	☒	☒	☒	☒	☒
Lack of Role Clarity	☒	☒	☒	☒	☒	☒	☐	☐
Poor Organisational Change Management	☒	☐	☒	☒	☒	☒	☒	☒
Inadequate Reward and Recognition	☒	☒	☒	☒	☒	☐	☐	☐
Poor Organisational Justice	☒	☒	☒	☒	☐	☒	☐	☐
Traumatic Events or Material	☒	☒	☒	☒	☒	☐	☐	☐
Remote or Isolated Work	☒	☒	☒	☒	☒	☐	☐	☒
Poor Physical Environment	☒	☒	☒	☒	☐	☐	☐	☒
Violence and Aggression	☒	☒	☒	☒	☒	☒	☒	☒
Bullying	☒	☒	☒	☐	☐	☒	☒	☐
Harassment	☒	☒	☒	☐	☐	☐	☒	☒
Conflict or Poor Workplace Relationships and interactions	☐	☒	☐	☒	☒	☒	☐	☒
Poor Work Design	☒	☒	☒	☒	☐	☒	☐	☐
OTHER								
Poor management of return-to-work plans for injured workers	☐	☐	☐	☐	☐	☒	☐	☐
Poor recovery support	☐	☐	☐	☐	☐	☐	☐	☒
Fatigue	☒	☐	☐	☐	☐	☐	☐	☐
Burnout	☒	☒	☐	☒	☐	☐	☐	☐

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Psychosocial Risk Legislation & COP Status

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	WA	QLD	NSW	VIC	SA	NT	TAS	ACT
Code of Practice (COP) Status	Active Feb-22	Active Nov 22/ April 23	Active May 21	Proposed 2023	No State COP	No State COP	No State COP	No State COP
Associated Regulations Status	Dec-22	No State Regulation	Oct 22	April 2023	No State Regulation	No State Regulation	Dec-22	Strategy 21-23
Legislation	March-22	Oct-22	Oct-22	2004 OHS Act	2012 WHS Act	2011 WHS Act	2012 WHS Act	2011 WHS Act
Legislation/ COP Specifics	COP: Psychosocial hazards in the workplace COP: Violence and aggression in the workplace COP: Workplace Behaviour COP: Mentally Healthy workplaces for FIFO workers	COP: Managing the risk of psychosocial hazards at work WHS Regulation Section 55A COP: Preventing and managing fatigue in the workplace Guide: Preventing and responding to workplace bullying.	COP: Managing psychosocial hazards at work COP: How to manage work health and safety risks WHS ACT: Section 274	Guide: Preventing and managing work-related stress: A guide for employers Document: Understanding mental health in the workplace. Fact Sheets: Fatigue, Bullying, Work-related Violence, Stress	Checklist: Psychological health safety checklist Checklist: Wellbeing Safety Scan Mental Health Act 2009 Guide: Precenting and responding to work-related violence guide Resource: People at Work	COP: How to manage work health and safety Risks	Resource: People at Work Resource: Head4Work Campaign: 2019 Safety is Everything campaign	Strategy: Managing Work-Related Psychosocial Hazards 21-23. Plan: Managing Work-Related Violence and Aggression Plan 21-23 Plan: Managing Work-Related Sexual Harassment Plan 21-23 Policy: Compliance and Enforcement Policy 20-24
Reference to Safe Work Australia (SWA) and other organisations	References risk management process adapted from SWA	SWA Guidance: The health and safety duty of an officer. SWA Guide: How to determine what is reasonably practicable to meet a health and safety duty. SWA Guide preventing and responding to workplace bullying	SWA Principles of Good Work Design SWA Work-related psychological health and safety: A systemic approach to meeting your duties		SWA: Psychological health and safety and bullying in Australian workplaces SWA: Preventing psychological injury under work health and safety laws WorkCover QLD	SWA: Work related psychological health and safety: A systemic approach to meeting your duties SWA Guide: Preventing and responding to workplace bullying.	SWA: Psychosocial health and safety and bullying in the workplace Report WorkCover QLD RU, OK?	SWA: how to manage work health and safety risks code of practice SWA: work-related psychological health, a systematic guide to meeting your duties SWA: preventing psychological injury under WHS Laws

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Thank you

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Feedback and Questions