Preventing and Responding to Workplace Stress

Scope (Staff): All CAHS employees, contractors, visitors, volunteers, clients/patients
Scope (Area): CAHS (PCH, Community Health, CAMHS)

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Aim
This guideline provides an overview into the prevention of workplace stress, in order to ensure the health and safety of employees.

Risk

Definitions
Bullying: overt bullying examples can include: abusive, insulting or offensive language, behaviour or language that frightens, humiliates, belittles or degrades, including criticism that is delivered with yelling and screaming.

Contractor: a person who is engaged to provide a service to CAHS through a contract for services.

Employee: a person who is employed directly by CAHS through a contract of employment.

Hazard: a situation or thing that has the potential to harm a person.

- Hazards at work may include (however not limited to): manual tasks, chemical exposure, contact with objects, slip trip falls, aggression from patients, aggression from visitors and working in confined spaces.

Incident: unplanned event in the workplace resulting in, or has the potential for injury, illness, damage or other loss to staff, patients, visitors or the organisation. The injury or illness may require treatment and / or time away from work.

Line Manager / Supervisor: a person who has responsibility for management and supervision of employees.

Psychological Hazards: anything in the design or management of work that increases the risk of work-related stress.

Risk: the possibility of an unwanted event occurring measured in terms of possible consequences and likelihood of the event occurring.

Risk Control: is taking action to eliminate health and safety risks so far as is reasonably practicable, and if that is not possible, minimising them so far as is reasonably practicable. Eliminating a hazard will also eliminate any risks associated with that hazard.

Safety and Health Representative: an employee who has been properly elected under Part IV Division 1 of the OSH Act to represent other employees in the interests of safety and health at the workplace for which they were elected.

Stress Response: the physical, mental and emotional reactions that occur when demands exceed the ability or resources to cope.

Visitor: person visiting the hospital/workplace - parent, carer, relative, or other.
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**Workplace**: a place where employees are, or are likely to be, during the course of their work. This includes attendance at off-site locations and travel in a government vehicle during the course of work.

**Workplace Stress**: when an employee perceives the demands of their work exceed their ability or resources to cope.

**Principles**

- CAHS has statutory obligations under Section 19 of the *Occupational Health and Safety Act 1984* to provide, so far as is reasonably practicable, a safe and healthy workplace for all employees.

- CAHS adopts a proactive approach to risk assessment to identify where risks need to be controlled and provides guidance to management and staff on implementing adequate control measures.
  - Refer to CAHS Risk Management policy.

- Employees have a right to cease or refuse to carry out work if they have a reasonable concern that carrying out the work would expose them to a serious risk to their Health and Safety.
  - Refer to the CAHS Occupational Health and Safety policy.

**Types of Workplace Stress**

- An employee may be exposed to workplace stress via the following hazards:
  - high job demands
  - low job demands
  - low job control
  - poor support
  - poor or difficult workplace relationships
  - difficult relationships with CAHS clients and their families
  - lack of role clarity
  - poor organisational change management
  - low recognition and reward
  - poor organisational justice
  - poor environmental conditions
  - remote work
  - isolated work
  - violent or traumatic events

- Stress responses describe the physical, mental and emotional reactions arising when employees perceive that their work demands exceed the ability to cope. If job stress is excessive or prolonged, it may lead to a psychological or physical injury.
Roles and Responsibilities

**CAHS Executive**

- The CAHS Executives are responsible for the following:
  - provide commitment, support and dedication to the safety of all staff
  - provide Executive leadership for the management of workplace stress
  - accountable for the occupational safety and health of all CAHS employees
  - support and facilitate a safety culture across CAHS and ensure the prevention of workplace stress is recognised and addressed as essential
  - ensure that heads of department, managers and supervisors have the knowledge and skills to prevent or reduce workplace stressors
  - encourage CAHS staff to speak up utilising the mechanisms provided by the health service when experiencing stress related to work

**Head of Department / Manager / Supervisor**

- Line managers at all levels within CAHS are responsible for ensuring the safety, health and wellbeing of all employees under their supervision and management.

- Line managers must ensure they are familiar with policies, procedures, processes and practices relating to the prevention of workplace stress at CAHS. These responsibilities include:
  - provide information, training and supervision to all employees
  - implement and maintain safe work practices, environment and hazard management
  - monitor and evaluate controls related to the prevention of stress in the workplace as part of continuous improvement
  - investigating the workplace, actively identifying workplace stress-related risks, assessing those risks, applying risk controls, managing and monitoring, in line with this guideline, CAHS Occupational Health and Safety policy, applicable legislation, and Human Resources (HR) policies and procedures
  - notifying the employee reporting the workplace stress related hazard or incident, of the outcome of the investigation and the action to be taken
  - ensuring that staff complete Mandatory and Core Requirement Training and promote other training programs designed to protect their health and safety
    - e.g. Assertive Communication, Bullying in the Workplace, Conflict Resolution, Emergency Management, Aggression Management and Corporate Induction.
  - when not practicable to avoid hazards ensure support, education, training, etc on the prevention of workplace stress is made available, be mindful of signs of problems and offer additional support to any employees who are known to be experiencing workplace stress
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- proactively monitor staff to support best work practice in terms of work scheduling, workload, work patterns and rostering
  - Refer to the CAHS Employee Record of Attendance (CAHS Policy Manual) policy.
- consult with employees and elected safety and health representatives on changes to the workplace
- complete Workplace Hazard Inspection (WHI) biannually (July-Dec, Jan-Jun)
  - Refer to the CAHS Workplace Hazard Inspection (CAHS Policy Manual) policy.
- complete OSH investigations of hazards and incidents relating to workplace stress and use the CAHS Psychosocial Risk Assessment when required
- ensure staff are aware of the Employee Assistance Program (EAP)
  - Refer to the CAHS Employee Assistance Program policy.
- Ensure staff are aware of the CAHS wellness program
  - Refer to the CAHS Staff Wellness Hub.
- seek early advice and support from the OSH or HR departments if difficulties arise

**Employee / Contractor**

- Employees / Contractors have the responsibility to:
  - comply with safe work practices
  - complete mandatory training as required and demonstrate in a workplace setting
  - take opportunity to complete other relevant training offered by CAHS, where relevant to the reduction of workplace stress, and strategies
  - complete early identification of issues related to workplace stress, requesting support where required and reporting this to their line manager, OSH or HR
  - report hazards or incidents which may cause or have caused workplace stress, as per the CAHS Occupational Health and Safety policy and legislation
  - cooperate with their employer to implement strategies to reduce workplace stress
  - seek assistance through the Employee Assistance Program if appropriate
  - take appropriate leave – avoid behaviours / practices that may contribute to the development of fatigue
    - Refer to the CAHS Leave Management (CAHS Policy Manual) policy.

**Volunteers / Visitors / Students**

- Volunteers / Visitors / Students have the responsibility to:
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- cooperate with OSH requirements and not wilfully interfere with any aspects of safety and health in the workplace
  - Refer to the CAHS Volunteer Management, Work Experience and Guest Visits policies.

**OSH Department**

- The OSH Department is responsible for:
  - providing OSH advice and support in relation to the health and safety risks associated with workplace stress
  - Refer to the CAHS Occupational Health and Safety policy.
  - Disseminating information about OSH services and training so that staff and managers are aware of the resources that can be accessed.
  - Refer to the Head of Department / Manager / Supervisor requirements above.

**HR Department**

- The HR Department is responsible for:
  - providing HR advice and support to managers and employees in relation to the management of workplace stress and options available to employees

**Identification**

- Workplace stress hazard identification can occur via a similar process for physical risks:
  - analysing workplace data (i.e. sick leave records, incident forms, grievances, workers’ compensation numbers, staff turnover, performance development reviews, etc)
  - direct observations (i.e. informal conversations with workers, observed changes in behaviour, walk around the workplace, etc)
  - employee Surveys – targeted or broad
    - Refer to the CAHS Psychosocial Risk Assessment checklist to assist with identification of workplace stress related hazards in the workplace.

**Investigation**

- The level of risk can be assessed by considering:
  - the nature of the hazard – what is the capacity for harm
  - the extent of exposure to the hazard – the duration, frequency and intensity of exposure
  - individual differences – how workers deal with exposure to psychological hazards may vary

- There are three types of risk factors that can cause workplace stress: organisational, environmental and individual.
Organisational risk:

- Although there are many work-related risk factors that can lead to a psychological and physical injury, there are eight work-related risk factors that have been widely researched and are known to impact on employee well-being and adverse psychological and physical health. These risk factors are:

  * Autonomy / control
    - The amount of authority the employee has over the way they do their job.

  * Change:
    - Involves planned and unplanned change in the work environment. Changes can occur at three levels: personal (i.e. changes to position and responsibilities), management (i.e. new supervisors or processes and procedures), and organisational (i.e. takeover, restructure or redundancies).

  * Job demands
    - The amount of workload the employee is expected to complete, this includes timelines for completing work.

  * Organisational justice
    - Refers to the perceptions of fairness about work procedures and how they are enacted. It involves procedural fairness and relational fairness.
      - Procedural fairness refers to the procedures used by a decision-maker / organisation, rather than the actual outcome reached.
      - Relational fairness refers to the degree of dignity and respect afforded to an employee during the process.

  * Relationships
    - The extent of good working relationships in the workplace. This can include the presence of bullying and harassment issues in the workplace.

  * Rewards and recognition
    - Involves rewarding employee efforts and recognising (or lack of) individual and department contributions and achievements within the organisation.

  * Role conflict / ambiguity
    - The extent that the employee’s tasks and duties are clearly defined (i.e. understaffing can lead to employees doing tasks for more than one position).

  * Support
    - The level of support the employee perceives from management and colleagues.

  * Environmental Risk
    - Physical and chemical risk factors (as well as biological agents) can influence employees' comfort and performance within the work environment and contribute to work-related stress.
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- Environmental sources of work-related stress include: noise, temperature and humidity, lighting, vibration, air quality, and unguarded plant and machinery.
  - An example of this is open plan offices which can be noisy, difficult to maintain concentration when interrupted and put confidentiality of cases at risk, causing work-related stress.

**Individual Risk**

- People respond to work-related stress differently and this can, in part, be related (or contributed) to a person’s previous experiences, external stressors in their personal life, coping styles, personality style, available support and physiological factors which are external to the work environment.
  - Refer to the CAHS *Fitness for Work* policy.
- Differences in people’s responses to stress do not reduce an employer’s legal duty and responsibility to minimise exposure to work-related stress.
- Employees may also experience psychological injuries from aggressive or violent incidents that occur in the workplace. Psychological injuries from aggression can occur from either cumulative events or as a result of a traumatic event.
  - Refer to the CAHS *Critical Incident Impact Management* (Debrief) policy.
- Bullying in the workplace is one risk factor of work-related stress. There are equal opportunity laws which are designed to protect persons in the workplace from harassment by supervisors or colleagues.
  - Refer to the CAHS *Grievance Resolution* policy.
- Harassment may be intentional or result from a lack of awareness of various cultural, religious or other factors affecting an individual or group. Action against harassers can be taken where bullying activity is based on sex or ethnicity.

**Managing Risk**

**Consequences**

- The level of risk is a combination of the **Likelihood** that the hazard will cause an accident and the **probable Consequence** if it does occur. It can be determined by the following tables:

<table>
<thead>
<tr>
<th>Ranking Risk Factors by Likelihood</th>
<th>Ranking Risk Factors by Consequence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rare</td>
<td>1 Negligible</td>
</tr>
<tr>
<td>Rare</td>
<td>No treatment required</td>
</tr>
<tr>
<td>Unlikely</td>
<td>2 First Aid</td>
</tr>
<tr>
<td>Unlikely</td>
<td>First aid level medical treatment</td>
</tr>
<tr>
<td>Possible</td>
<td>3 Minor Injury</td>
</tr>
<tr>
<td>Possible</td>
<td>Minor (usually reversible) injury or illness resulting in days off work</td>
</tr>
<tr>
<td>Likely</td>
<td>4 Major Injury</td>
</tr>
<tr>
<td>Likely</td>
<td>Severe injury or illness with prolonged time off work</td>
</tr>
<tr>
<td>Very Likely</td>
<td>5 Fatality</td>
</tr>
<tr>
<td>Very Likely</td>
<td>Death or permanent disability</td>
</tr>
</tbody>
</table>
Likelihood & Consequences

<table>
<thead>
<tr>
<th>Likelihood</th>
<th>Negligible</th>
<th>First Aid</th>
<th>Minor Injury</th>
<th>Major Injury</th>
<th>Fatality</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rare</td>
<td>1</td>
<td>Low (1)</td>
<td>Low (2)</td>
<td>Low (3)</td>
<td>Medium (5)</td>
</tr>
<tr>
<td>Unlikely</td>
<td>2</td>
<td>Low (2)</td>
<td>Low (4)</td>
<td>Medium (6)</td>
<td>Medium (8)</td>
</tr>
<tr>
<td>Possible</td>
<td>3</td>
<td>Low (3)</td>
<td>Medium (6)</td>
<td>Medium (9)</td>
<td>High (12)</td>
</tr>
<tr>
<td>Likely</td>
<td>4</td>
<td>Low (4)</td>
<td>Medium (8)</td>
<td>High (12)</td>
<td>High (16)</td>
</tr>
<tr>
<td>Very</td>
<td>5</td>
<td>Medium (5)</td>
<td>High (10)</td>
<td>High (15)</td>
<td>Extreme (20)</td>
</tr>
</tbody>
</table>

### Controls

- Early intervention is very important if psychological risk factors are identified in the workplace, which may cause workplace stress. The risk assessment should determine the likelihood of workplace stress resulting in a psychological and/or physical injury, which will prompt actions to deal with those risk factors.

- There are three types of interventions for controlling psychological risk factors which relate to the timing and level of the intervention: primary, secondary and tertiary.
  - **Primary** interventions are aimed at the organisational and employee level.
  - **Secondary** and **tertiary** interventions are focused at the employee level.
    - A summary of each of the interventions and examples of risk controls is provided in the table below.

<table>
<thead>
<tr>
<th>Intervention</th>
<th>Timing</th>
<th>Target Level</th>
<th>Examples of risk controls</th>
</tr>
</thead>
</table>
| Primary      | Before hazards or injuries/ incidents are present. Developing employees ability to cope | Organisational and Employee | • Job redesign
• Leadership development training
• Flexible work arrangements
• Policies and procedures
• Supportive leadership |
| Secondary    | After the hazard or incident, but before an injury occurs. (Does not reduce risk factors form work environment) | Employee | • EAP
• Workload adjustments
• Individual stress related training |
| Tertiary     | After it has been medically established that an injury has occurred. | Employee | • As above and:
  o Psychiatric/ psychological treatment
  o Medication
  o Return to work programs |

- Ideally, risk controls should be aimed at the organisational level, they are generally preventative controls and designed to either eliminate or reduce the risk factors.
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- While addressing psychological risk factors through employee level strategies is a risk control measure (e.g. EAP), it should be used in conjunction with an organisational level approach, as it does not address the reduction of the risk factors in the workplace.

- Once an injury occurs, assistance can be provided by the CAHS Injury Management Consultants.
  - The purpose is to enable an injured employee to remain at work or return to work, by outlining suitable work duties and providing support, if needed.
  - Refer to the CAHS Injury Management policy.

Records Management

- All documentation to be maintained in compliance with CAHS Records Management Policy, set out by the CAHS Recordkeeping Plan 2015027.

Compliance

- Each CAHS Directorate will be responsible for monitoring the requirements to be met within this guideline.

- Compliance monitoring methods can include:
  - number of incidents and hazard reports received for psychological injuries
  - number of grievances reported relating to workplace stress
  - EAP usage increases
  - Workers’ Compensation Claim numbers for psychological injuries
  - Lost Time Severity Rate for psychological injuries
  - Lost Time Incident Rate for psychological injuries
  - Return to Work Rate for psychological injuries
  - Excess leave (annual leave balance in excess of two accrued entitlements and/or long service leave which remains two years after the date of entitlement – subject to relevant industrial agreement)

Legislation

- There are legislative obligations in relation to this guideline and non-compliance may result in penalties being applied, under the Occupational Health and Safety Act 1984, Sections 19 and 20.

<table>
<thead>
<tr>
<th>Related CAHS internal policies, procedures and guidelines</th>
</tr>
</thead>
<tbody>
<tr>
<td>Occupational Health and Safety (CAHS Policy Manual)</td>
</tr>
<tr>
<td>Incident and Hazard Reporting (CAHS Policy Manual)</td>
</tr>
<tr>
<td>Fitness for Work (CAHS Policy Manual)</td>
</tr>
<tr>
<td>Fatigue Management (CAHS Policy Manual)</td>
</tr>
</tbody>
</table>
Risk Management (CAHS Policy Manual)

Injury Management (CAHS Policy Manual)

Critical Incident Impact Management (Debrief) (CAHS Policy Manual)

Aggressive, Offensive and Inappropriate Behaviour Management (CAHS Policy Manual)

Employee Assistance Program (CAHS Policy Manual)

Grievance Resolution (CAHS Policy Manual)

Staff support strategies related to incidents and inpatient environment (Acute CAMHS Policy Manual)

Code Black - Personal Threat (CAHS Policy)

Emergency Management (CAHS Policy Manual)

Mandatory and Core Requirement Training (CAHS Policy Manual)

Volunteer Management (CAHS Policy Manual)

Work Experience (CAHS Policy Manual)

Guest Visits (CAHS Policy Manual)

Workplace Hazard Inspection (CAHS Policy Manual)

Leave Management (CAHS Policy Manual)

References

Occupational Health and Safety Act 1984

Occupational Health and Safety Regulations 1996

Useful resources (including related forms)

Work-related psychological health and safety – national guidance material (Safe Work Australia)

CAHS Employee Electronic OSH Hazard/Incident Form

Employee Assistance Program (HealthPoint Page)

Equal Opportunity Commission Western Australia

Aggression in the Workplace (WorkSafe WA Safety Topic)

Code of Practice on Violence, Aggression and Bullying at Work (WorkSafe WA)
Preventing and Responding to Workplace Stress

Prevention of Workplace Violence and Aggression Policy and Guidelines (WA Department of Health (DOH))

Preventing and Responding to Workplace Bullying Policy (WA Health)

Employee Grievance Resolution Policy (WA Health)

Psychological Incident Investigation Checklist (CAHS OSH intranet) not uploaded...

Preventing work-related stress (WorkSafe WA Safety Topic)

CAHS Staff Wellness Hub (CAHS HealthPoint InfoHub)

CAHS HR intranet page (CAHS HealthPoint InfoHub)

This document can be made available in alternative formats on request for a person with a disability.

File Path: W:\Safety & Quality\CAHS\Policy\POLICY MANAGEMENT - Area Health Service\CAHS Policy\Placecards for HealthPoint\OSH Policies\Word\CAHS.OSH.PreventingAndRespondingToWorkplaceStress.docx

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