



Psychosocial risk management: Protecting worker wellbeing

Angela McGregor
Senior Advisor

Mentally Healthy Work

September 2024

WORKSAFE

Mahi Haumarū Aotearoa

Health and safety at work

Health and Safety at Work

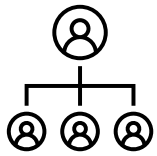
Duty of care and roles

A guiding principle of HSWA is that workers and other persons should be given the highest level of protection against harm to their health, safety, and welfare from work risks as is reasonably practicable.



Primary duty of care

PCBUs must ensure, so far as is reasonably practicable, the health and safety of workers, and that other persons are not put at risk by its work



Due diligence

Officers must exercise due diligence to ensure the PCBU meets its health and safety obligations



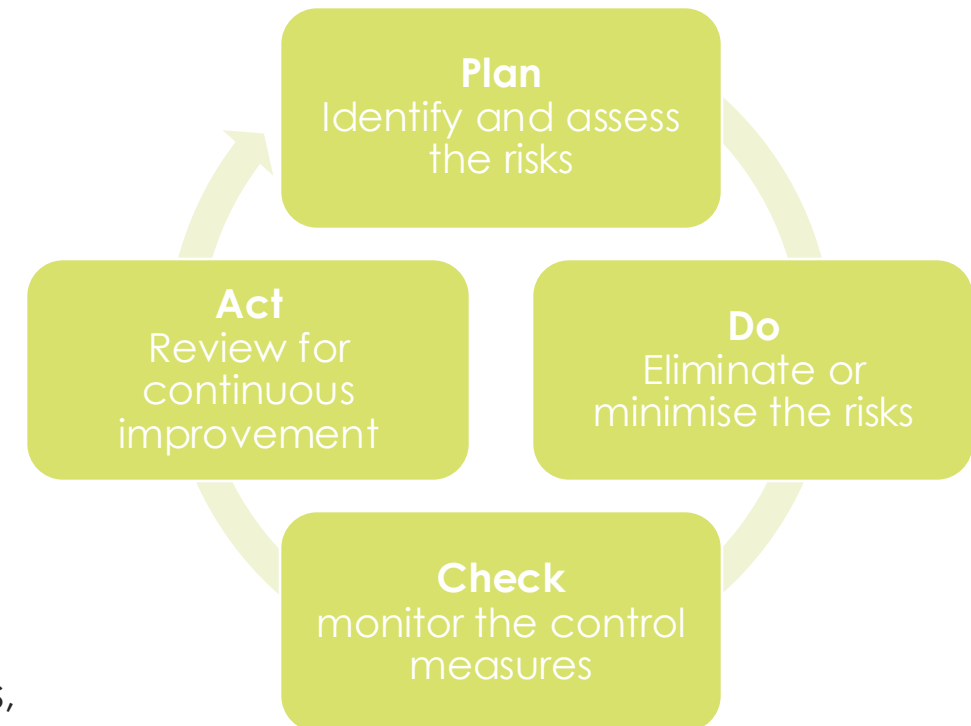
Take reasonable care

Workers have their own health and safety duty to take reasonable care to keep themselves and others healthy and safe when carrying out work

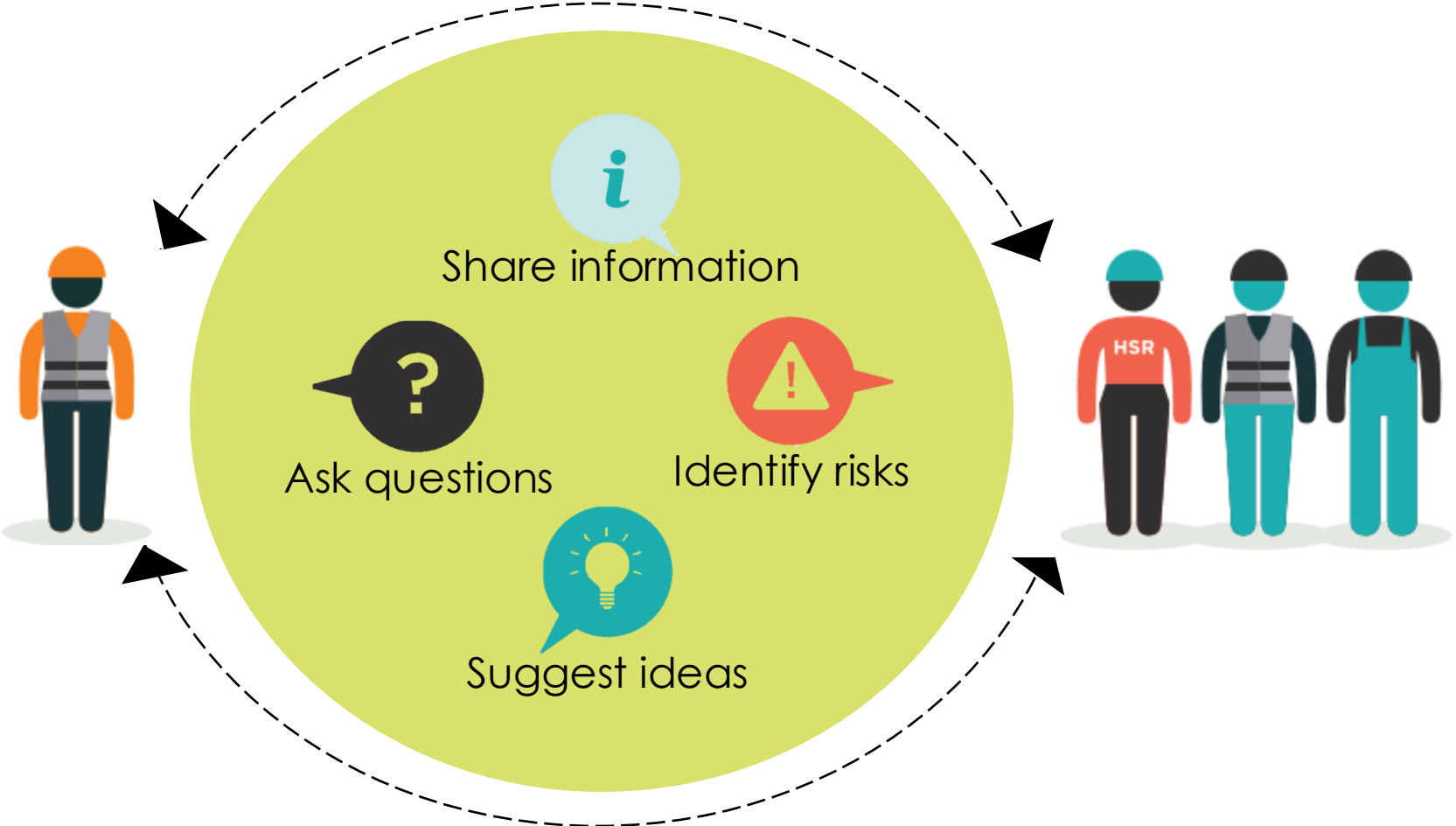
Managing work risks

Different businesses will have different health and safety risks. It all depends on the type of work you do.

- Start with identifying and understanding what your work-related health and safety risks are
- Do what is reasonable and practicable to eliminate those risks.
- Where the risk cannot be eliminated, it must be minimised so far as is reasonably practicable.
- Focus on your business's critical risks first before managing less serious risks.
- Review your work activities on an ongoing basis to identify any new risks that need to be managed.
- Always ask workers for input on identifying health and safety risks, and when choosing solutions.



Worker engagement and participation



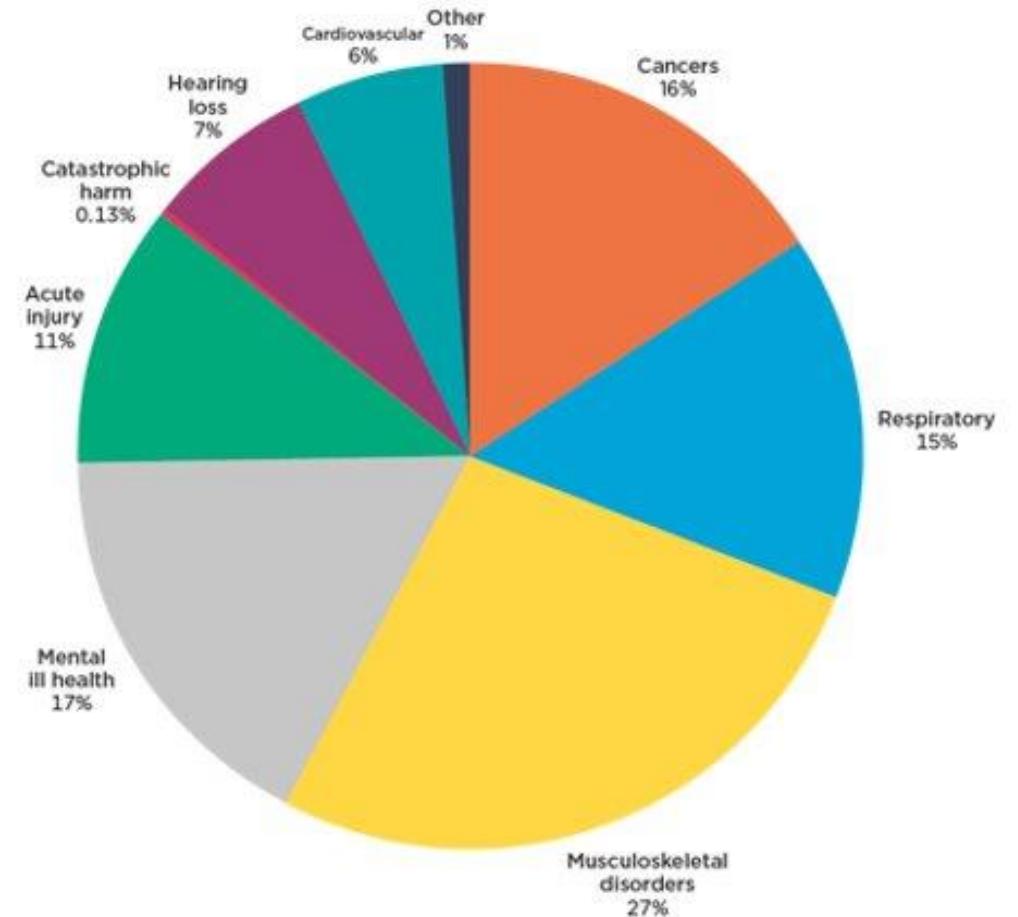
Critical risks identified in health

1. Violence and aggression
2. Workplace injuries: moving and handling, slips and trips
3. Working in the community and lone working
4. Psychosocial harm, such as fatigue and stress
5. Contractor management
6. Hazardous substances
7. Transport and traffic safety management
8. Exposure to infectious diseases

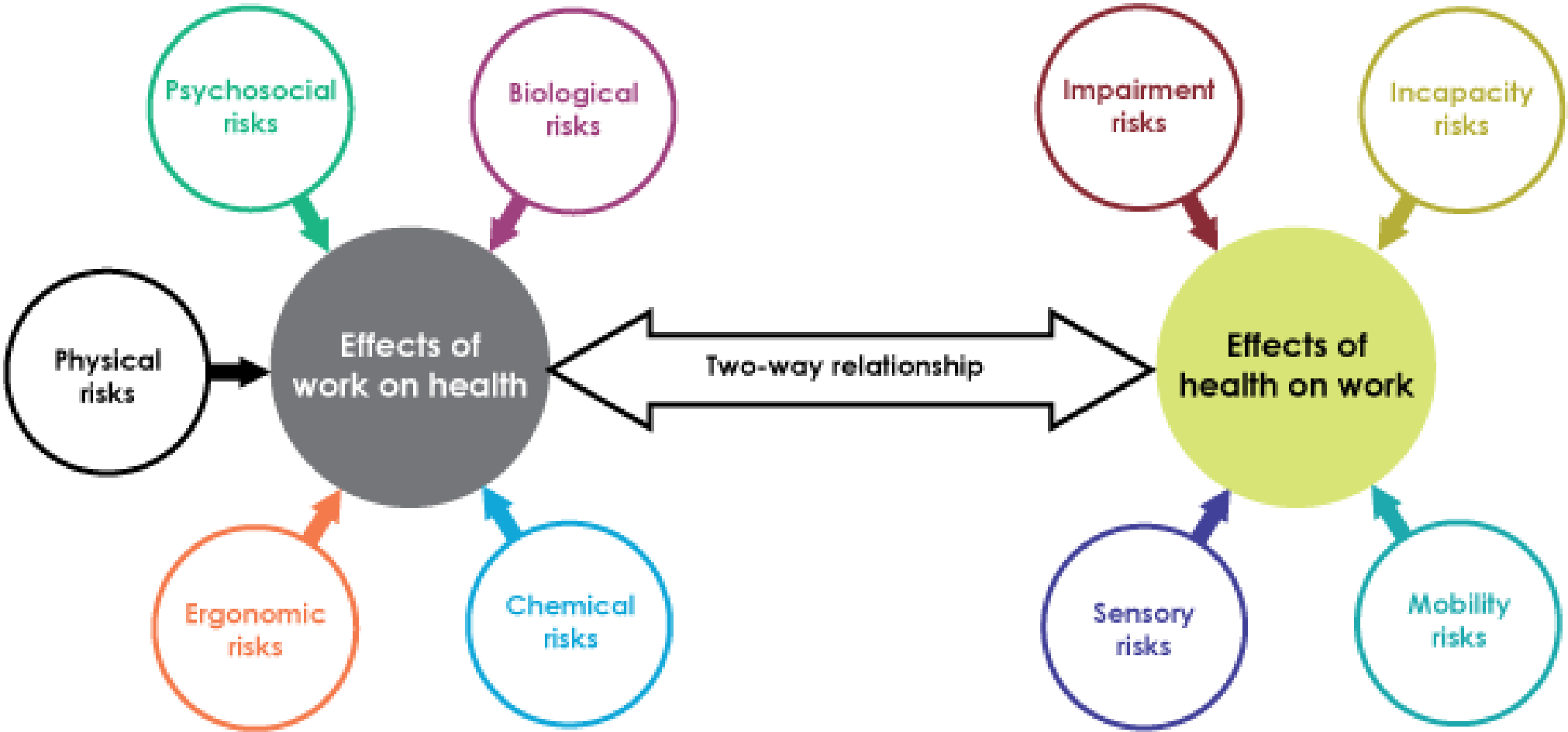


Burden of Harm on Workers' Health in Aotearoa

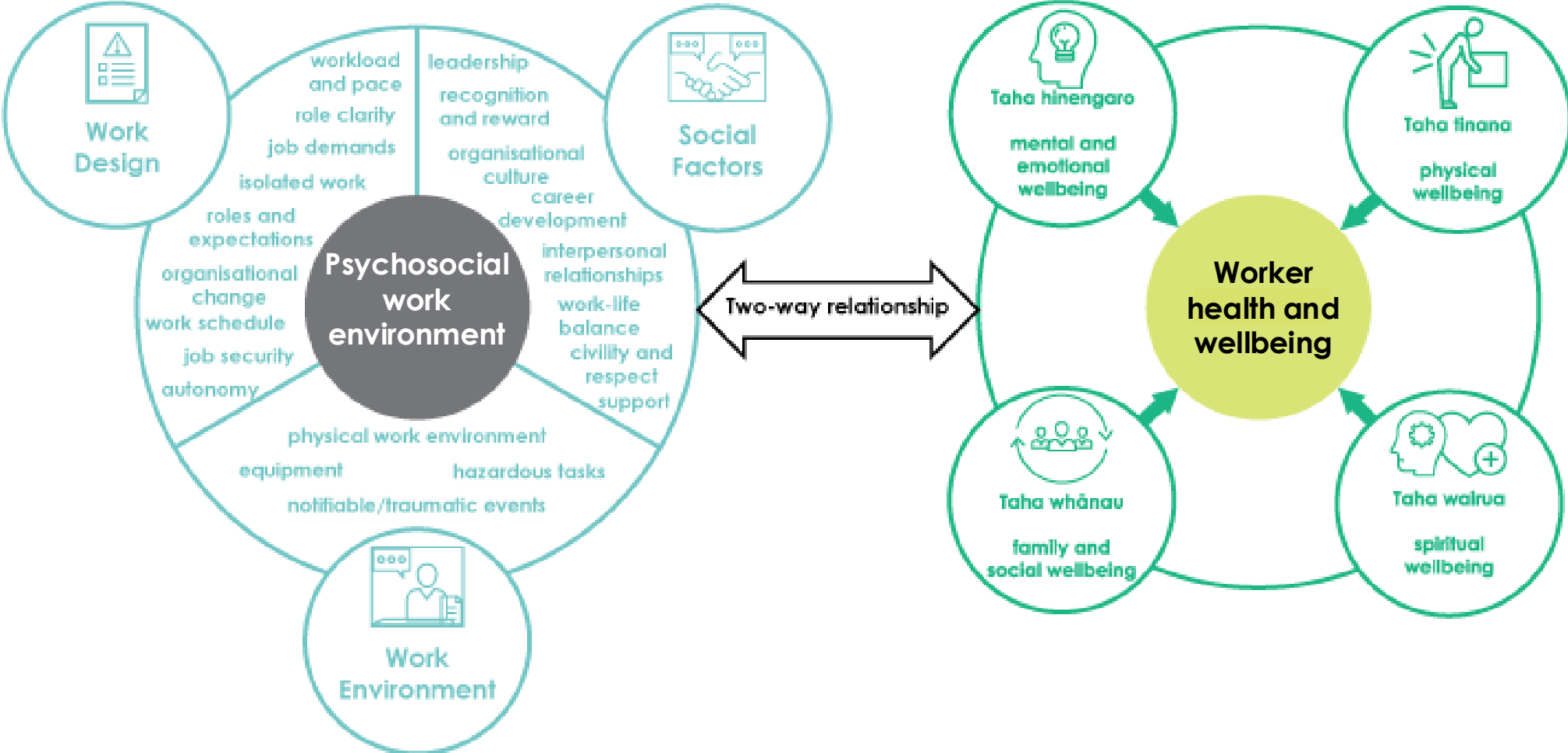
- Work-related ill health makes up 88% of the total burden of work-related harm.
- An estimated 750-900 deaths occur in New Zealand each year due to work-related ill health.
- 5,000-6,000 hospitalisations occur each year due to health conditions caused by work.
- This burden equates to 50,000 total annual work-related disability adjusted life years lost, and at least \$2 billion in social cost each year.



Work-related Health



Psychosocial Factors



Harms from being exposed to psychosocial risks

Taha Hinengaro Mental & emotional wellbeing	Taha Whānau Family and social wellbeing	Taha Tinana Physical wellbeing	Taha Wairua Spiritual wellbeing
Low mood Irritability Reduced ability to concentrate Mental distress/stress Fatigue Clinical depression Anxiety Burnout	Lower family satisfaction Social isolation Reduced family related performance Withdrawal from activities Anti-social behaviour Bullying Interpersonal issues	Poor sleep Fatigue Higher blood pressure Higher cholesterol Higher cortisol reactivity Neuroendocrine stress Cardiovascular stress response Musculoskeletal disorders Digestive issues	Low motivation and drive Reduced sense of connection and belonging Feelings of helplessness Reduced sense of identity Lower engagement in activities Reduced citizenship behaviours

Psychosocial Hazards



The nature of how work is designed includes roles and expectations, job demands, workload, job control, role clarity, and more.

- Role overload or underload (high or low workloads or demands)
- Role conflict or lack of role clarity, Low job control
- Exposure to traumatic events
- Job security and precarious work
- Poor organisational change consultation
- Remote or isolated work



Relationships or social aspects of work refers to both the relationships between people but also the relationship workers have with different systems at work.

- Poor support from supervisors and managers
- Poor co-worker support
- Conflict or poor workplace relationships, Workplace violence
- Bullying, harassment including sexual harassment
- Poor procedural justice (processes for making decisions)
- Inadequate reward and recognition



Physical aspects of the work environment including office set up, facilities, and equipment.

- Lack of tools, equipment or other resources to complete work tasks (e.g. a lack of appropriate PPE)
- Lack of suitable tools or equipment
- Poor equipment or tool maintenance
- Hazardous physical working environments
- Extreme conditions or situations
- Unstable environments

Psychosocial risks for New Zealand healthcare workers

Common psychosocial risks for healthcare workers



Exposure to offensive behaviours in healthcare

Over half of healthcare workers report exposure (as a victim or witness) to at least one offensive behaviour in the previous 12 months.



Key protective factors for healthcare workers



Leadership and Psychosocial Safety Climate (PSC)



MANAGEMENT PRIORITISATION

How does the organisation demonstrate that staff wellbeing is a priority?



MANAGEMENT COMMITMENT

How does management address wellbeing issues and what processes are in place to facilitate this?



ORGANISATIONAL COMMUNICATION

How does the organisation ensure effective communication with staff about work-related impacts on wellbeing (i.e. psychosocial hazards)?



ORGANISATIONAL PARTICIPATION

How are staff encouraged to have input into work-related impact on wellbeing (i.e. psychosocial hazards)?

PSC and offensive behaviours in healthcare

PSC RISK LEVEL	% OF WORKERS	% OF WORKERS EXPOSED TO:		
		BULLYING	SEXUAL HARRASSMENT	THREATS OF VIOLENCE
LOW	39%	14%	7%	26%
MEDIUM	11%	32%	13%	31%
HIGH	33%	40%	13%	37%
VERY HIGH	17%	64%	22%	50%

50%
high to very high risk

>4X
Increase in exposure

~3X
Increase in exposure

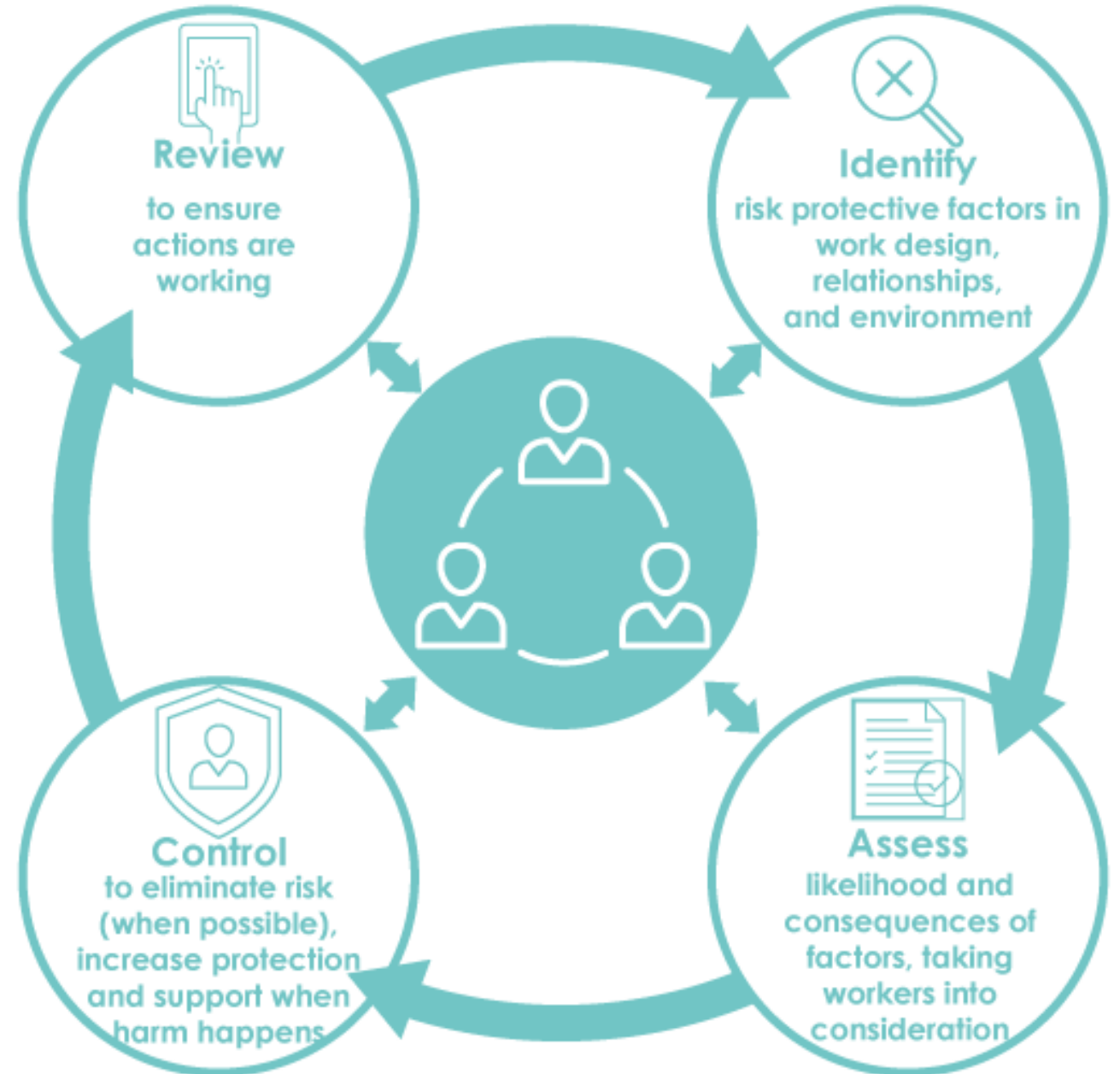
~2X
Increase in exposure

Key elements to create mentally healthy work

- ❑ Working towards a mentally healthy workplace culture
- ❑ Supportive and competent leaders
- ❑ Work design for mental wellbeing
- ❑ Fair treatment and respect
- ❑ Workplaces that prioritise worker wellbeing
- ❑ Inclusive decision making

Managing psychosocial risks

Four Steps of Health Risk Management

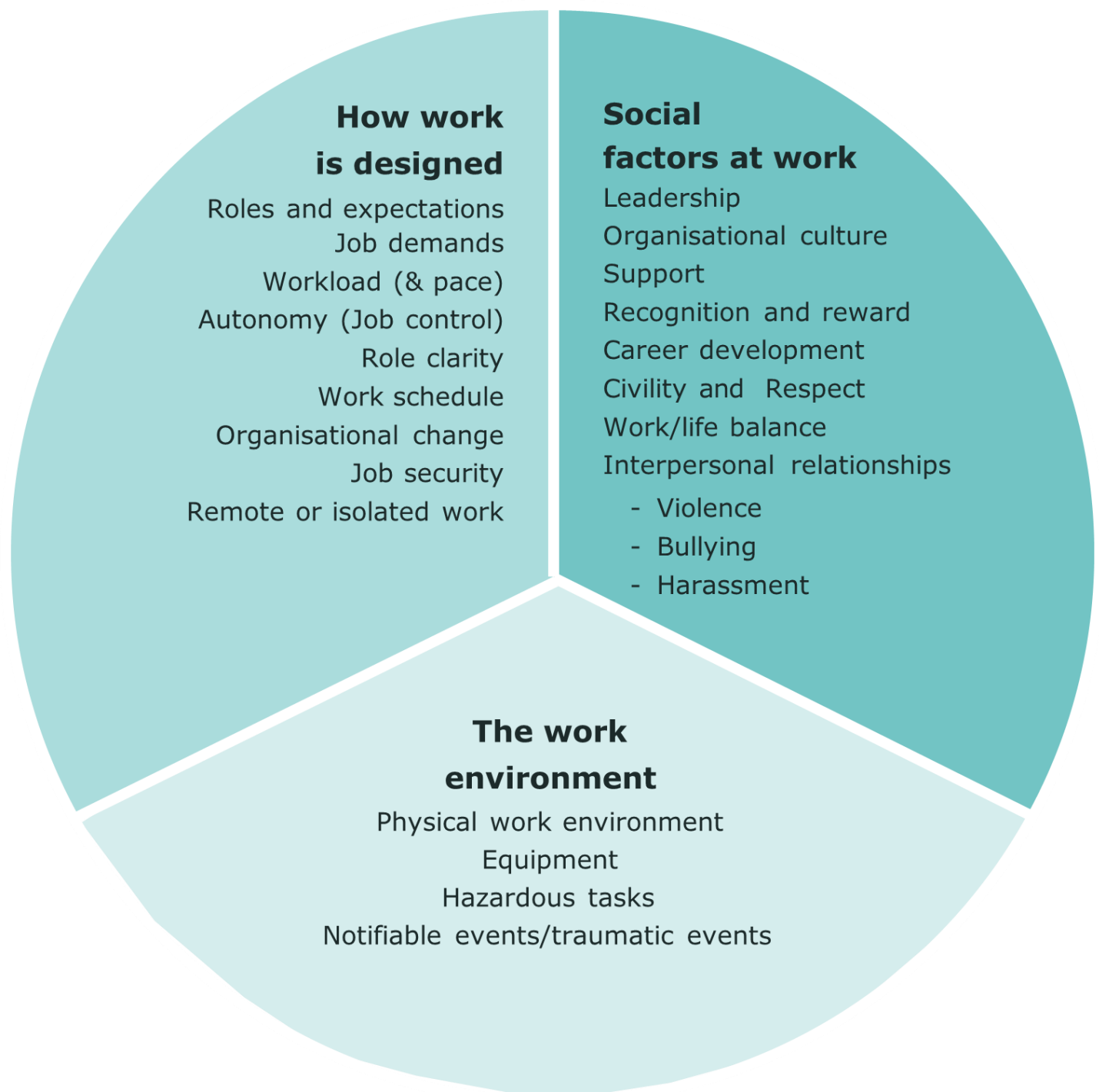


1. Identify

Psychosocial Factors

To identify the parts of work that have the potential to cause harm look at:

1. The type of work you do and how it is organised.
2. The leadership, support and social relationships at work.
3. The environment in which you carry out the work and what workers are exposed to in that environment.



Identifying Psychosocial hazards

What at work has the potential to cause harm?



What are the demands & pressures on workers? (mentally, emotionally, socially, physically)

Are workers exposed to anything stressful, emotional or traumatic?

What at work impacts how workers feel?

What are the relationships like at work?

What impacts how workers think and feel about their role?

Could workers be exposed to offensive behaviours?

How does work impact workers' sense of belonging, identity or self-worth?


Hazards	Potential harm/ consequence	Likelihood	Who affected	Controls	Monitoring
Supporting patients' emotional needs, grief, anger, frustration and other feelings about health and health system.					

2. Assess



To identify and assess the risks arising from your work hazards think about:

- What the potential consequences of exposure to the hazard are.
- How likely the consequences are.
- Who might be exposed to the hazard.

		LIKELIHOOD				
		Very unlikely to happen	Unlikely to happen	Possibly could happen	Likely to happen	Very likely to happen
CONSEQUENCE	Catastrophic	Moderate	Moderate	High	Critical	Critical
	Major	Low	Moderate	Moderate	High	Critical
	Moderate	Low	Moderate	Moderate	Moderate	High
	Minor	Very Low	Low	Moderate	Moderate	Moderate
	Superficial	Very Low	Very Low	Low	Low	Moderate

Assessing Psychosocial hazards

- What the potential consequences of exposure to the hazard are?
- How likely are the consequences?
- Who might be exposed to the hazard?

Would the risk level change if...

A new worker/inexperienced worker?

If language barrier?

If repeated exposure?

If staff member down or away?

In different work locations or loan work?

If no controls in place?

Hazards	Potential harm/ consequence	Likelihood	Who affected	Controls	Monitoring
Supporting patients' emotional needs, grief, anger, frustration and other feelings about health and health system.	<p>Mental distress/stress, Irritability, Reduced ability to concentrate, Fatigue, Poor sleep.</p> <p>If not managed potential to escalate to aggressive client behaviour.</p>	<p>Very likely to happen, without controls. Harm very likely one of minor impact but adds up over time.</p>	<p>All Staff, Client facing staff at highest risk.</p>		

3. Control



**Reducing
Likelihood**

Before

**What does the
worker need
to deal with
the event?**

During

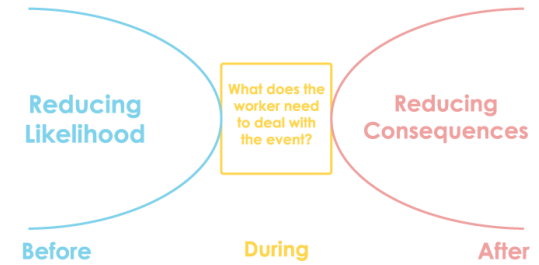
**Reducing
Consequences**

After

Identifying Controls

Can the hazard be eliminated? – if so do this!

If you can't eliminate the hazard:



What is needed to for a worker to deal with the risk as safely as possible?

What is needed before and during the task to manage the demands?

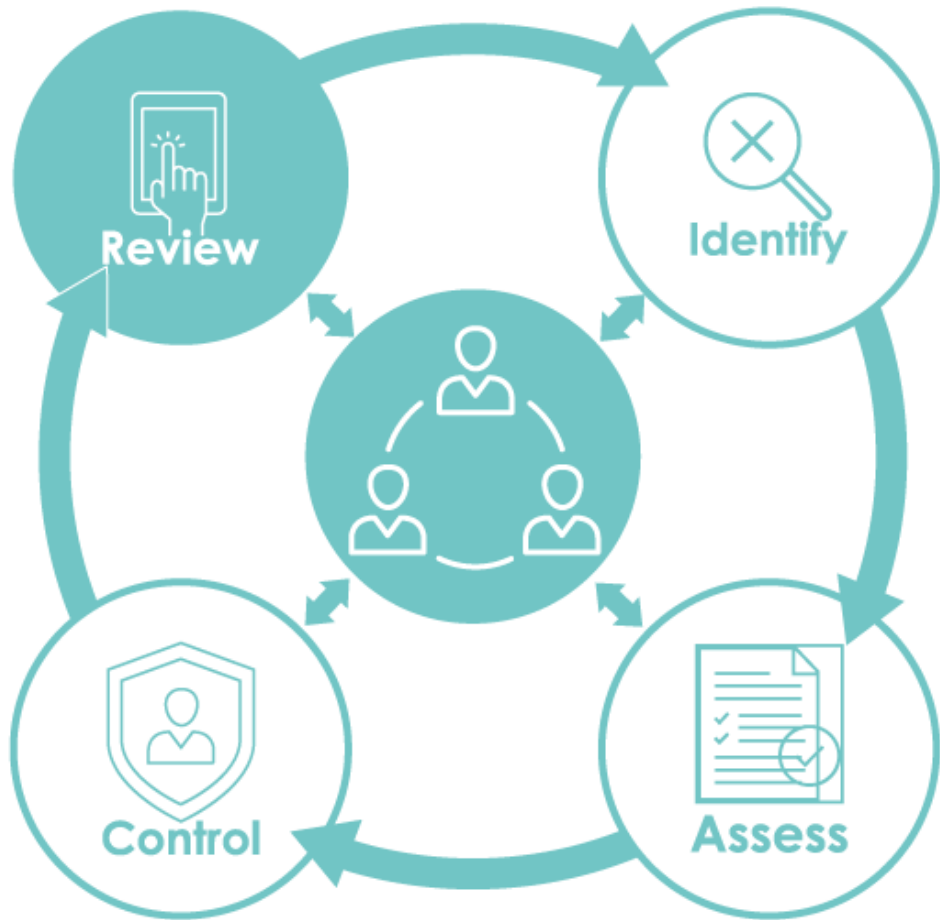
What could you do to reduce the likelihood of the hazard or reduce the likelihood the harm will occur?

What could you do to support a worker who is exposed to the risk – what could reduce the impact?

What would help recovery, reduce the stress of the situation or manage the emotional impact?

Hazards	Potential harm/ consequence	Likelihood	Who affected	Controls	Monitoring
Supporting patients' emotional needs, grief, anger, frustration and other feelings about health and health system.	<p>Mental distress/stress, Irritability, Reduced ability to concentrate, Fatigue, Poor sleep</p> <p>If not managed potential to escalate to aggressive client behaviour</p>	Very likely to happen, without controls. Harm very likely one of minor impact but adds up over time.	All Staff, Client facing staff at highest risk	<ul style="list-style-type: none"> • Allow regular breaks or time out from emotionally demanding work. • De-escalation training for staff. • Provide information to patients about their responsibilities including behaving in an appropriate manner. • Provide reasonable waiting times and facilities. • Provide a safe area for workers to retreat in the event of an emergency. • Peer support programme amongst workers. 	

4. Review



How do you know controls are working?

- Talking and listening to staff
- Feedback during meetings
- Reports of psychosocial hazards, and related investigation
- Surveys (on engagement, satisfaction, culture or psychosocial hazards)
- H&S committee discussions, and issues raised
- Hazard and incident reports
- Sick leave and turnover data
- Analysis of work tasks, schedules and locations, including patterns of overtime
- Observing work activities
- Performance review and mentoring activities
- Exit interview information

Hazards	Potential harm/ consequence	Likelihood	Who affected	Controls	Monitoring
<p>Supporting patients' emotional needs, grief, anger, frustration and other feelings about health and health system.</p>	<p>Mental distress/stress Irritability Reduced ability to concentrate Fatigue Poor sleep</p> <p>If not managed potential to escalate to aggressive client behaviour</p>	<p>Very likely to happen, without controls. Harm very likely one of minor impact but adds up over time.</p>	<p>All Staff, Client facing staff at highest risk</p>	<ul style="list-style-type: none"> • Allow regular breaks or time out from emotionally demanding work. • Training in complaint and grievance handling. • Provide information to patients about their responsibilities including behaving in an appropriate manner. • De-escalation training for staff. • Provide reasonable waiting times and facilities. • Provide a safe area for workers to retreat in the event of an emergency. • Peer support programme amongst workers. 	<ul style="list-style-type: none"> • EAP summary reports • Incident reports • Survey staff • Analysis of wait times • Team meetings have H&S on agenda.

Today's goals



Increase understanding of psychosocial hazards



Increase confidence to have conversations about psychosocial hazards and risks



Explain psychosocial risk management approach



Worksafe links

- [Healthcare | WorkSafe](https://www.worksafe.govt.nz/topic-and-industry/healthcare/) (https://www.worksafe.govt.nz/topic-and-industry/healthcare/)
- [Work-related health | WorkSafe](https://www.worksafe.govt.nz/topic-and-industry/work-related-health/) (https://www.worksafe.govt.nz/topic-and-industry/work-related-health/)
- [Mental health | WorkSafe](https://www.worksafe.govt.nz/mental-health) (https://www.worksafe.govt.nz/mental-health)
- [Research | WorkSafe](https://www.worksafe.govt.nz/research/) (https://www.worksafe.govt.nz/research/)
 - [A psychosocial survey of healthcare workers | WorkSafe](https://www.worksafe.govt.nz/research/a-psychosocial-survey-of-healthcare-workers/) (https://www.worksafe.govt.nz/research/a-psychosocial-survey-of-healthcare-workers/)
- [Work health and safety: **An overview of harm and risk in Aotearoa New Zealand 2024** | WorkSafe](https://www.worksafe.govt.nz/research/work-health-and-safety-an-overview-of-harm-and-risk-in-aotearoa-new-zealand-2024) (https://www.worksafe.govt.nz/research/work-health-and-safety-an-overview-of-harm-and-risk-in-aotearoa-new-zealand-2024)
- [Psychosocial Safety Climate Information: Mentally healthy work in retail: Case studies | WorkSafe](#)

Questions?

Ngā mihi nui

Subscribe to WorkSafe updates
for more information:

[worksafe.govt.nz/subscribe](https://www.worksafe.govt.nz/subscribe)

WORKSAFE

Mahi Haumarū Aotearoa