Elements and Priorities for Working Toward a Psychologically Safer Workplace

Funding from The Great-West Life Assurance Company in support of

Great-West Life Centre for Mental Health in the Workplace

This report is also available in French. Visit www.strategiesdesantementale.com (under Dossier d’analyse).
Background
On September 30, 2010 in Vancouver, British Columbia a group of executives, labour leaders, health and safety professionals, government agency representatives and experts in law and policy came together to look at the implications of Dr. Martin Shain's latest paper entitled “Tracking the Perfect Legal Storm: Converging systems create mounting pressure to create the psychologically safe workplace.” The group was tasked with considering what employers need to know and/or access to provide a psychologically safe workplace in today’s economic environment. This report is the result of their work.

Participants of the Roundtable
Mary Ann Baynton, Program Director, Great-West Life Centre for Mental Health in the Workplace
Dan Bilsker, Adjunct Professor COMH, Faculty of Health Sciences, Simon Fraser University
Patti Boucher, Vice President, Health and Safety Association for Government Services
Richard Boughen, Director, General Occupational Health and Safety Branch, RCMP
Arnie Cader, President, Delphi Corporation
Romie Christie, Manager, Opening Minds, Mental Health Commission of Canada
Ellen Coe, President, Canadian Occupational Health Nurses Association
Janet Crowe, Director, Wellness and Work Life Solutions, Telus
Richard Dixon, VP and Human Resources Officer, NAV Canada
Winnie Doyle, Vice President, St. Joseph’s Health Care
Roberta Ellis, Senior VP of Worker and Employer Services, WorkSafe BC
Peter Farvolden, Clinical Director, CBT Associates
Kathy GermAnn, Workplace/Workforce Policy Analyst, Mental Health Commission of Canada
Merv Gilbert, Principal, Gilbert Acton Consulting
Nina Hansen, Occupational Health & Safety Director, BC Federation of Labour
Michael Howlett, Manager - Governance, Health and Industrial Hygiene, Community, Safety and Environment, TransCanada
Steve Jackson, Vice President, Human Resources, Ontario Workplace Safety & Insurance Board
Susan Jakobson, Volunteer - Workforce Advisory Committee, Mental Health Commission of Canada
Patricia Janzen, Partner, Fasken Martineau DuMoulin LLP
Nancy Johnson, Provincial Specialist for Health and Safety, Ontario Nurse’s Association
Michael Koscec, President, Entec Corporation
Jim Laliberte, Public Transportation, CAW-Canada
Francois Legault, Director, Health Canada EAP Services
Estelle Lo, Chief Financial and Administrative Officer, S.U.C.C.E.S.S
Liliana Mastromonaco, HR Advisor, City of Calgary
Edward (Ted) Ormston, Chair, Mental Health and Law Committee, Mental Health Commission of Canada
Mike Pietrus, Director, Opening Minds, Mental Health Commission of Canada
Geoffrey Pradella, Vice President, Public and Government Affairs, Calgary Chamber of Commerce
Joti Samra, Adjunct Professor and Scientist COMH, Faculty of Health Sciences,
Simon Fraser University
David Satok, Medical Advisor, Rogers Communication Inc.
Mike Schwartz, Executive Director, Great-West Life Centre for Mental Health in the Workplace
Martin Shain, Principal, Neighbour @ Work Centre
Maureen Shaw, Consultant Act Three
Catherine Skinner, Legal Counsel, Great-West Life
Nancy Snowball, Workforce Program Manager, Opening Minds, Mental Health Commission of Canada
Karleena Suppiah, Communication Specialist, Mental Health Commission of Canada
Margaret Tebbutt, Senior Consultant, Workplace Initiatives CMHA - BC Division
Ian Thompson, National Rep, CUPE
Ingrid Wellmeier, Manager, Mental Health Promotion Unit, Healthy Communities Division, Public Health Agency of Canada
Norma Wood, Director, Workplace Health & Safety, Corporate Health and Wellness, Alberta Health Services

Process
An organizing committee solicited and contributed names of individuals who could contribute to the discussion from the areas of:

- Large organizations
- Labour unions
- Health and safety
- Small business
- Government agencies
- Policy and/or legal experts

The working groups were set up with a diverse representation from the above mentioned areas and they were asked to speak directly to a specific area of the employment life cycle such as:

- Hiring and recruiting
- Orientation and training
- Evaluation, performance management, promotion and discipline
- Intervention and crisis response
- Accommodation and return to work
- Redeployment and termination

The group first heard from individuals who shared the impact the workplace can have on psychological safety from their own personal stories. Dr. Shain shared information about psychological safety and the law and then the working groups focused on what was needed to provide a psychologically safe workplace in the specific area they were assigned. After presentations
by each group, there was an opportunity for all participants to contribute additional thoughts and ideas for any of the sections. Finally, overall priorities were determined by vote and next steps were determined, such as the distribution of this report.

**Why Now?**

Over the past 30 years most workplaces made efforts to lower the incidence of work-related physical illness and injury. During this same era, however, mental health and psychological safety has become a major concern for all workforces. It is increasingly clear that there is a direct parallel between increased rates of work-related accident and illness and periods of psychological stress in workplaces – as is seen, for example during times of economic uncertainty, transition, merger, and downsizing.

Dr. Shain states that current and evolving legislation and case law are increasingly holding employers responsible to provide a psychologically safe workplace. In his report to the Mental Health Commission of Canada (MHCC), he called for corporate “Assess and Address” policies through national standards. This recommendation was endorsed by the MHCC Workforce Advisory Committee with the additional proviso that such standards should be developed in a way that improves workers’ lives and assists business sustainability. An invitational meeting of key stakeholders from across the country hosted by the MHCC in December of 2009 concluded with the consensus statement: “It is our vision to see the development of a National Standard of Canada on psychological health and safety in the workplace by December 1, 2011, and uptake by employers resulting in a measurable improvement in psychological health and safety within three years of that date.” (December 2, 2009 Consensus-Based Statement on A National Standard of Canada for Psychological Health and Safety in the Workplace.)

Some Roundtable participants recommended that the duty to establish and maintain psychologically safe workplaces be clearly legislated. This report could be of considerable assistance to inform the broader work that is being planned by the MHCC, the Canadian Standards Association (CSA), and the Bureau de Normalisation du Québec (BNQ), to develop a standard for psychological health and safety in the workplace. The proposed standard will address organizational policy and commitment, planning options to assess specific needs in the organization, implementation and operation of programs to address identified needs, evaluation of outcomes, and organizational review practices that will ensure a sustainable approach to managing workplace psychological health and safety.

**Overview of this Report:**

To assist employers in readiness for this standard, this report is formatted to be consistent with the anticipated key steps of the standard. It will be broken down as follows:

- An overview of the **top 4 priorities** to address psychological safety in the workplace as identified by Roundtable Participants. Also included are relevant resources which are freely available in the public domain. These resources were not reviewed by Roundtable Participants, but were selected by the working group if they were freely available to all Canadians and related to psychological safety in the workplace.

- A description of the **5 elements of generally accepted standards** (used to manage workplace issues – e.g. environment, health and safety, quality) which are anticipated to be embedded in the proposed standard for psychological health and safety in the workplace. These will help you to work within a framework approach to making change in your own organization.

- A breakdown of the **proposed approaches** provided by Roundtable Participants by both the 5 elements and various components that impact employee psychological safety.
An Overview of the Top 4 Priorities Identified by the Roundtable Participants

Priorities were established through voting. While the single most voted for item was a return to work and accommodation approach that included focus on and solutions to work-related issues, when the votes were tallied and grouped, it became abundantly clear that the main priority was skill and capacity for interpersonal competence in the workplace, especially among management. What follows are the top four strategies identified overall and resources that are available in the public domain to assist employers in implementing these strategies. Select participant quotes are included to reflect the underlying rationale and intent for each priority. Many excellent resources can also be purchased through various service providers or suppliers, but we will not be making recommendations for these in this report.

1. Management training – ensure that any role that includes leadership, management, supervision or support of employees require a minimum standard of interpersonal competence and an understanding of the responsibility to ensure a psychologically safe workplace. Evaluation for effectiveness in these areas should become a regular part of performance management for these roles.

“We need to foster the art of conversation to develop trust and respect among workers. We must provide an environment where it is safe to have these conversations.”

The participants had diverse understandings of the definition of interpersonal competence and often referred to emotional intelligence. The conversation focused on how interpersonal skills could improve the ability to effectively recognize and respond to emotional distress. Responding effectively to those who may be struggling with mental illnesses such as depression or anxiety, those involved in conflict at work as well as those who were struggling with performance issues would be evidence of this emotional intelligence. While the definition and the factors involved in improving this particular skill are yet to be determined, for the purposes of discussion, we can borrow Daniel Goleman’s (http://danielgoleman.info/) 5 domains of emotional intelligence which include:

1. Knowing your emotions.
3. Motivating yourself.
4. Recognizing and understanding other people’s emotions.
5. Managing relationships (i.e., managing the emotions of others).

“Do those who want positions that include managing people actually like people?”

This would include union reps, occupational health, human resources, senior leaders, and frontline management. While there is variability across sectors and jobs with respect to the balance between emotional intelligence and technical skills, it was noted that all employees do require the same base level of emotional intelligence to work effectively with coworkers, clients and customers. The participants noted that it is primarily those responsible for supervision or support that should be evaluated for this competency. It ranges from recruiting and promoting practices that include assessment of this skill to performance management that includes measurement and recognition of the application of this skill in terms of contributing to or detracting from psychological safety. The participants stressed that this requirement must begin at the level of governance and senior leadership and cascade down to be effective.

• Resources that may help
  • Managing Mental Health Matters – an online, scenario-based communication training program www.workplacestrategiesformentalhealth.com
2. Mental Health and Mental Illness Awareness – providing education and information to all staff on a regular basis has the potential to reduce stigma, and increase the ability to respond in a supportive manner to co-workers who may be struggling and contribute to the ability for the entire workplace to share a common and safe language about mental health-related issues. Important elements of building mental health awareness include improving staff awareness of their own mental health, encouraging effective self-care strategies and facilitating timely access to external resources (e.g., EFAP, family physicians, mental health professionals) when such help is needed. Further the group said a holistic and effective approach to accommodation of mental health disabilities and a return to work process that effectively addresses the workplace issues including conflict, performance communication, and relationships and sensitivity of all involved (including worker’s compensation and insurance companies) to the particular vulnerability to psychological harm, of disabled workers reintegrating into the workforce.

“Many managers feel uncomfortable dealing with difficult situations and so avoid or deny situations.”

- Resources that may help
  - Working Through It™ – videos, handouts and information from individuals who have experienced mental health issues at work as well as commentary from professionals who assist them [www.workplacestrategiesformentalhealth.com](http://www.workplacestrategiesformentalhealth.com)
  - Canadian Mental Health Association – some branches offer public education sessions at no cost or a low cost [www.cmha.ca](http://www.cmha.ca)
  - Managing Mental Health Matters – online training for supervisors and above [www.workplacestrategiesformentalhealth.com](http://www.workplacestrategiesformentalhealth.com)

3. Policies, Programs, and Procedures – reviewing and revising existing policies, programs and procedures with consideration of the potential for impact on psychological safety. Further, to implicitly integrate psychological safety into the development of future policies, programs or procedures. The participants also had a discussion about requiring audits of programs provided by outside sources such as Employment Assistant Plans, benefit and insurance policies, worker’s compensation, and training or consulting approaches to ensure they are resulting in the outcomes promised and that the processes used include consideration of psychological safety.

“Orientation must be more than a policy review. Stress comes from uncertainty about what to do or how you fit into the culture of the workplace.”

- Resources that may help
  - Evaluating Workplace Health Programs – [www.workplacestrategiesformentalhealth.com](http://www.workplacestrategiesformentalhealth.com)
  - Co-creating a Psychologically Safe Workplace – [www.safe-workplaces.ca](http://www.safe-workplaces.ca)

4. Embed in Occupational Health & Safety – explicitly including mental health and psychological safety in existing health and safety approaches for hazard identification, risk assessment and risk control.

- Resources that may help
  - Guarding Minds at Work™ – assessment tool that includes effective risk control strategies – [www.guardingmindsatwork.ca](http://www.guardingmindsatwork.ca)
The 5 Elements of a Standard Management Approach as Applied to an Overall Plan

Dr. Ian M. F. Arnold, Chair of the Workforce Advisory Committee assisted the working team to transfer the recommendations identified by the Roundtable Participants into a standard management approach framework that is consistent with International Organization for Standardization (ISO) and other standard-making organizations. Below is an explanation of the framework and following that is a table which places the recommendations within the framework. A sustainable approach is needed that includes the following 5, briefly described, elements

1. Set policy, demonstrate commitment

Sample wording adapted from The Leadership Framework for Advancing Workplace Mental Health (www.mhccleadership.ca):

“The ABC Company considers mental health to be an important component of the overall health and safety of employees. ABC is committed to the prevention and resolution of mental health issues in its workplaces, in consultation with its joint health and safety committee, (where applicable) through the fair and equitable use of appropriate programs, to assist employees towards the overall improvement of all aspects related to mental health in the workplace.”

Demonstrated commitment by senior organizational leaders – both management and labour are needed to make the policy a functioning success.

2. Planning – Assess where you are now and where you want to go – define needs

Determining the workplace status of mental health:

• Regulatory and social policies
• Existing industry benchmarks
• Impact of mental health on employees and on the financial viability of the organization
• Specialized individual and organizational mental health screening measures – e.g., Generalized Anxiety Disorder Questionnaire (GAD-7), Patient Health Questionnaire 9 (PHQ) and Stress Satisfaction Offset Score (SSOS)
• Assessment of organizational structural factors known to impact workplace psychological safety such as Guarding Minds at Work www.guardingmindsatwork.ca
• Aggregated data (to protect individual privacy) results from sources such as:
  • Employee Assistance Program (EAP)
  • Insurance records: drugs, benefits
  • Company medical reports and voluntary health risk assessments
  • Human resources absenteeism data
  • Trade union – grievances, reports, records of concerns, employee relations committee
  • Joint Health & Safety Committee proceedings, investigations or inspections
  • Employee surveys

In summary, assess the employee health impact, the financial impact, the structural attributes that promote good mental health, and the legal requirements.
3. Implementation and operation – Implement programs that address your organization’s defined needs

Data generated by an assessment of the mental health status of an organization can be used to develop and implement cost-effective programs that:

- Prevent worker (dis)stress and poor mental health;
- Address and reduce existing risk factors to mental health;
- Identify and provide assistance to those employees experiencing early concerns about mental health issues.

Workplace primary prevention programs might include:

- Confidential health-risk assessments, including the provision of referral advise;
- Safe return-to-work programs that acknowledge vulnerability of returning workers to psychological injury;
- (Dis)stress reduction programs;
- Management and workforce training programs.

Programs that address workforce needs may include:

- Facilitated access to professional advice;
- Training of designated peer supporters;
- Flexible work scheduling practices;
- Appointment of safe workplace advocate (e.g., Hotel Dieu Windsor);
- Union representation and consultation in addressing needs;
- Job-share programs.

Programs that address existing mental health issues:

- Training of management to identify and approach employees who may be struggling;
- Effective accommodation and return-to-work practice that acknowledge the vulnerability of returning workers to psychological injury;
- Peer support programs (e.g., Alcoholics Anonymous, Post-traumatic Stress Disorder peer support).

4. Checking and corrective action – Evaluate program operation and effectiveness through planned auditing

- Drives continual improvement;
- Measures the effectiveness of policies, planning, and programs;
- Promotes regular review to identify potential gaps;
- Develops opportunities for improvement;
- Becomes an integral part of the organization’s overall approach to workplace health and safety.
5. Review – Reassess and improve

- Support by management is essential;
- Measure to be sure intended outcomes are achieved;
- Have a continual feedback process;
- Collaboration with organized labour can significantly help to ensure success and involvement of joint health and safety committees.

Once the commitment to psychological safety by senior leadership is made and a general policy statement (see sample policy statement in 1. above) is developed and communicated, an organizational assessment of psychological risk could be done using a free resource such as Guarding Minds at Work (www.guardingmindsatwork.com). This will then help with each of the following, more specific recommendations:

<p>| The 5 elements with Roundtable Participant recommendations within each category |
|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
|                             | Policy and commitment       | Planning                    | Implementation              | Checking and               | Review                      |
| Recruiting and hiring       | Define “psychologically safe workplace” for new recruits | Consider Emotional Intelligence in selection and promotion of those whose role involves supervision or support of employees | Discuss accommodation and organizational supports as well as the process to obtain assistance in the workplace | 3-6 month review of job-fit to assess the effectiveness of recruiting and hiring practices | Annual Review of recruiting and hiring practices overall and analysis of the outcomes |
|                             | Articulate the values of organization and how they will be upheld or measured | Ensure the hiring process includes consideration of psychological safety for interviewees | Define cultural and social expectations or norms within your workplace | Measure satisfaction and engagement as well as performance | If necessary provide relevant training and support |
|                             | State that no negligent, reckless or intentional injury to employee mental health is tolerated or condoned | Increase psychological comfort by considering recruiting options such as: | Consider a short survey asking about the recruiting and hiring process to seek input for improvement | If changes are needed review again in another 3-6 months as necessary | |
|                             | - Sharing the interview process in advance | - Sharing the interview process in advance | If necessary provide relevant training and support |
|                             | - Providing written questions at the time of interview | - Providing written questions at the time of interview | If changes are needed review again in another 3-6 months as necessary |
|                             | - Offering a choice of sequential versus panel interviews | - Offering a choice of sequential versus panel interviews | |
|                             | Annual Review of recruiting and hiring practices overall and analysis of the outcomes | Measurement and corrective actions | |
|                             | Review                      | 3-6 month review of job-fit to assess the effectiveness of recruiting and hiring practices | |
|                             |                             | Measure satisfaction and engagement as well as performance | |
|                             |                             | Consider a short survey asking about the recruiting and hiring process to seek input for improvement | |
|                             |                             | If changes are needed review again in another 3-6 months as necessary | |</p>
<table>
<thead>
<tr>
<th>Orientation and training</th>
<th>Planning</th>
<th>Implementation and operations</th>
<th>Checking and corrective actions</th>
<th>Review</th>
</tr>
</thead>
<tbody>
<tr>
<td>Require that the organization values be embedded in both orientation and all training approaches</td>
<td>Consider how all (or the absence of) orientation and training processes may impact psychological safety</td>
<td>Define an orientation program that takes into account mental health aspects of the job, the culture, rates of change within the organization, application of organizational values, how to access support or accommodation</td>
<td>Require all training and orientation to be assessed for impact on behavior of the trainee and others, as well as outcomes</td>
<td>Do scheduled reviews of organization-wide, department and job-specific orientation and training approaches and compare to other measures of psychological safety and engagement</td>
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<td>Require senior leaders and those responsible for governance to &quot;walk the talk&quot; of organizational values</td>
<td>Develop a system that supports psychological safety in the approach to management, evaluation, discipline and promotion</td>
<td>Ensure those responsible for management of people have a minimum standard of emotional intelligence or support to develop this skill</td>
<td>Take regular account of productivity by measuring outcomes rather than outputs (i.e., measure results rather than effort such as showing up every day or working longer hours)</td>
<td>Consider the impact of the various systems of management and evaluation and whether they result in desired outcomes</td>
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<td>Define an orientation program that takes into account mental health aspects of the job, the culture, rates of change within the organization, application of organizational values, how to access support or accommodation</td>
<td>Set up a management development process that includes awareness of mental health and mental illness, development of interpersonal competence, access to just-in-time resources, and coaching/mentoring</td>
<td>Set up a shorter orientation process for job changes within the organization</td>
<td>Ask what challenges there were in new job placement to learn how to improve orientation and training approaches</td>
<td>Consider pilot projects to test out alternative approaches</td>
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<td>Do scheduled reviews of organization-wide, department and job-specific orientation and training approaches and compare to other measures of psychological safety and engagement</td>
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<td>Ask about training requirements and training refreshers to understand the needs</td>
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Consider pilot projects to test out alternative approaches |
<table>
<thead>
<tr>
<th>Intervention and crisis response</th>
<th>Policy and commitment</th>
<th>Planning</th>
<th>Implementation and operations</th>
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<th>Review</th>
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<td>Require clear standards of response in the event of crisis</td>
<td>Ensure that crisis response programs include aspects related to those with mental health concerns as well as considering the psychological impact of a crisis on all employees</td>
<td>Develop programs for proactive crisis prevention</td>
<td>Assess efficacy of programs and relevance to need</td>
<td>Review all programs, look for synergies, and consider gaps</td>
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<td>Ensure understanding of and compliance with Human Rights and Disability Law</td>
<td>Define accommodation opportunities that address issues related to communication, feedback, directions, relationships, triggers and stressors in the workplace as well as task-oriented approaches</td>
<td>Create a return to work process that includes consideration of psychological impacts, even for physical injuries or illness</td>
<td>Have regular follow up for at least the first 6 months of a return to work</td>
<td>Review annually against Human Rights or Disability Law changes and for effectiveness from the perspective of employee and supervisor</td>
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<td>Define the impact on others during accommodation and return to work planning</td>
<td>Proactively remove or reduce barriers to work-related psychological safety and support</td>
<td>Consider refresher or new training for anyone who has been away for 2 months or more, or during a time of change in processes or procedures</td>
<td>Have at least annual follow up for accommodation to ensure it is still the most effective solution</td>
<td>Make changes as needed</td>
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<td>Develop an accommodation approach that engages the employee fully in finding solutions that allows him/her to be successful at his/her job</td>
<td>Support supervisors in understanding and sustaining all aspects of a successful return to work including changes in communication and feedback</td>
<td>Making sure that needs are being met</td>
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<td>Redeployment and termination</td>
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<td>Planning</td>
<td>Implementation and operations</td>
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<td>Ensure leaders are physically present and communicate effectively during times of layoff or redeployment</td>
<td>Explore community resources, organizational or benefit provider resources and external providers for approaches and supports available to those who are losing their jobs</td>
<td>Provide targeted training programs for those managing organizational change and those who execute terminations</td>
<td>Solicit feedback from both those who are let go (exit interviews) and those left behind about the perception of the company response to layoff or redeployment</td>
<td>Prepare for possible future situations by having plans in place or consider next steps if the event has already occurred</td>
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<td>Consider the psychological impact on “survivors” of downsizing, layoffs or redeployments</td>
<td>Collect data that will help guide the development or evolution of the organizational structure including focus on psychological impact</td>
<td>Ensure psychological safety for all positions including those that utilize non-standard approaches such as telecommuting, working alone and other flexible work arrangements</td>
<td>Audit of all programs to ensure that psychological factors are measured and addressed at regular intervals</td>
<td>Review results using continuous improvement framework</td>
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| Organizational structure | Consider the potential psychological impact from governance, new development approaches and existing organizational structures | Collect data that will help guide the development or evolution of the organizational structure including focus on psychological impact | Ensure psychological safety for all positions including those that utilize non-standard approaches such as telecommuting, working alone and other flexible work arrangements | Audit of all programs to ensure that psychological factors are measured and addressed at regular intervals | Review results using continuous improvement framework |

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| Ensure integration of psychological safety in existing and future programs | Collect data that will help guide the development or evolution of the organizational structure including focus on psychological impact | Ensure psychological safety for all positions including those that utilize non-standard approaches such as telecommuting, working alone and other flexible work arrangements | Audit of all programs to ensure that psychological factors are measured and addressed at regular intervals | Review results using continuous improvement framework |
Job design

Organizational policy to include a process to assess healthy and safe job design (e.g., job risk assessment and cognitive demands analysis)

Plan/review jobs to ensure that psychological demands are assessed and psychological safety is addressed

Job design for those in supervisory or management positions includes adequate time to provide a psychologically safe work environment

Seek feedback from those in the jobs to assess if the design is psychologically safe and clearly defined

Make adjustments as necessary

Review job design when new jobs are developed or there are significant changes to jobs

Following are some ideas that could maximize your EAP’s responsiveness to mental health related issues:

- The method of counselling offered should suit the individual’s preference and include a choice of face-to-face, e-counselling, telephone counselling and group sessions

- Stay at work services – include the ability to intervene before someone is off work – solve performance and/or conflict issues

- Education and information sessions related to workplace mental health – for management and employees – some organizations request up to 100 hours per year included, but to be effective there must be incentive for employees to attend

- Psychiatric triage – include assessment or referral for assessment when mental illness is suspected and link to relevant and credible resources

- Continuity of therapeutic care – allowing employees to continue to contract with a specific EAP provider after the allotted sessions by paying through other benefit amounts or out of pocket. It is important to have safeguards to ensure this is done for the benefit of the employee and not the provider.

- Request that your EAP counsellors become knowledgeable about community resources and can refer people where appropriate

- Request that EAP provide a list of relevant community resources for employees

- Ensure EAP providers have a minimum standard of qualification and use evidence-based approaches (e.g., MSW or psychologist)

- Request that a percentage norm be established for overall EAP usage and that no charges be incurred for over-usage within the contract duration. This is intended to help with budgeting and so that the organization will encourage more users to get the help needed.

- Ensure there is a service that directs employees to the most appropriate provider (e.g., addiction, couples’ counselling and eating disorders require different expertise)
Resources that may be useful can be found at:

Canadian Centre for Occupational Health & Safety – http://www.ccohs.ca/resources/

Canadian Mental Health Association – www.cmha.ca

Centre for Mental Health and Addiction – www.safe-workplaces.ca

Employee Assistance Association of North America –
http://www.easna.org/publications-research-notes/

Guarding Minds at Work – www.guardingmindsatwork.ca


Workplace Strategies for Mental Health – www.workplacestrategiesformentalhealth.com
(This includes Managing Mental Health Matters, Working Through It, Evaluating Workplace Programs and more.)