NRCoP & ANZSOG present: Are We Ok: Co-design and the regulation of psycho-social hazards

Q&A Session

Jacqueline Agius, WorkHealth Safety Commissioner ACT

What regulatory intervention methods have you used or seen to be most effective in the management of psychosocial hazards?

By their very nature, most psychosocial hazards lead to risks and incidents that can be insidious. As risks can present over prolonged periods, they may be difficult to identify and control unless focused efforts are made to identify the hazards and risk assess them. Many workplaces have poor psychosocial maturity and so, find this space complex, burdensome and challenging to manage.

To assist workplaces in better eliminating or managing psychosocial hazards and risks, significant efforts are made by WorkSafe ACT to educate workplaces of the common psychosocial hazards, provide targeted resources and feedback on ways to manage these, along with regulatory action.

WorkSafe ACT currently uses a digital Psychosocial Maturity Indication Tool (PMIT) to assess the maturity status of a workplace and its systems. It provides the person conducting a business or undertaking (PCBU) with targeted feedback on areas that may require their attention. These engagements between inspectors and PCBU's may also lead to further enquiry and regulatory action to ensure compliance is reached and maintained.

WorkSafe ACT are also boosting the resources available for PCBUs and workplaces to better understand exactly what psychosocial hazards may be present and how they expose workers to prolonged or significant stress that may lead to injury. As the majority of resources available are text heavy and can be complex or written in large volumes, additional efforts have been made to simplify and visualise resources. An example is our WorkSafe Act Common Psychosocial Hazards Poster.

WorkSafe ACT also advises workplaces to use the same WHS risk management processes for psychosocial hazards and risks as they do for physical ones. As many workplaces generally grasp the fundamentals of generic WHS risk management processes, relating these processes to the psychosocial issues helps remove barriers that either inhibit or reduce their ability to effectively manage psychosocial hazards and their risks. Many of these processes are ineffective without adequate and genuine consultation, which is an area of focus for inspectors during education and compliance visits.

WorkSafe ACT also provides advice about compliance through its regulatory action, including improvement notices. WorkSafe ACT strives to clearly articulate what has been observed, what the breach entails and provide directions to remedy the breaches. This approach has seen positive workplace changes across the ACT. The issuing of regulatory notices helps workplaces to take the management of psychosocial hazards and risk seriously and understand the significant impact that poor management has on workers and others. The effectiveness of this approach comes from notices being issued in conjunction with significant support and efforts form inspectors to assist the workplace to understand the importance of managing psychosocial risks for healthy workplaces, along with maintaining their WHS duties.

You can find more resources here: Workplace safety posters - WorkSafe ACT

The dangers of psycho-social safety for the legal and medical professions are well documented. Both suffer gender-based harassment and impossibly long hours of work and burnout. Listening to young professionals' complaints there is a 'fact of life' that the burden of proof is theirs to report. Until legislation catches up to whistleblower protections young professionals will continue to risk their livelihoods for which they have studied long and their career progression. Has there been any thought to aligning the whistleblower protections to those reporting their injuries?

Many professions such as the legal and medical professions, may mask poor work design that leads to significant or prolonged stress, with a cultural norm for the industry. In many instances, it is these cultural and industry norms that create barriers for worker reporting and for workplaces to change the way in which they design and approach work. The catalyst for positive change needs to come through stronger regulation of psychosocial hazards and risks as a level to challenge deep seated norms.

Psychological safety falls under WHS legislation and so affords workers the same WHS protections when reporting injuries or psychosocial hazards that are afforded for physical hazards like electric shock risks. The challenge in the psychosocial space is getting workplaces to recognise that psychosocial hazards, are WHS hazards. Workplaces need to be aware that when adverse actions arise towards workers who raise WHS matters (physical or psychosocial), this may also mean that the workplace is breaching the WHS Act, and regulatory action is likely to follow. While psychological safety is not a new concept for WHS, the stronger regulation of this WHS area means that it will take time for workplaces to adjust, understand and comply with their WHS duties.

Where workers feel as though adverse actions have been the consequence of raising WHS matters, workers are encouraged to contact their WHS regulator for assistance.

Sian Leathem, NDIS Quality and Safeguards Commission

Many regulators work outside office environments, and may be remotely managed in regional, rural or remote workplaces including third party premises. What are the key elements and actions for adequately supporting staff and effectively exercising a positive duty of care for these employees, and how can we influence third parties to ensure safe workplaces for regulators?

Like many other regulators, the Commission has a hybrid workforce, with many teams being distributed around Australia and needing to connect with each other virtually. The Commission has a large number of staff who spend some time working remotely from home or off site, undertaking site visits to providers.

Managers and team leaders play an important role by providing support to staff, promoting the regular engagement of their teams and modelling sound health and safety practices. Individual staff also have a responsibility to be mindful of how their health, safety, engagement and productivity will be maintained in an out-of-office environment.

There are a range of ways in which an organisation can support staff through fostering regular connection, delivering wellbeing and resilience training, offering confidential and accessible counselling and debriefing services, and promoting mindfulness techniques employees can use every day. Some examples are contained in the NDIS Commission's flyer for staff available on the resource tab of the website.

The Commission has developed an off-site safety policy to support and guide staff when they are required to undertake work off-site, including undertaking sites visits with providers or attending a participant's home. The policy includes a range of strategies, including undertaking an appropriate risk assessment, implementing situational awareness techniques and circumstances when visits should only be undertaken with a colleague.

Is there any education for boards on their responsibilities for oversighting psycho-cultural safety?

The NDIS Commission recently released its Workforce Capability Framework, which includes guidance for senior managers, leaders and board members of providers who have responsibility for creating organisational values, culture and business systems to support workers to deliver services and supports to participants.

This includes guidance on how to:

- Establish and embed NDIS values in organisational culture and practice
- Establish systems to support health and manage risk
- Establish a learning culture to support workforce capability

You can find more information here:

NDIS Workforce Capability Framework | NDIS Quality and Safeguards Commission (ndiscommission.gov.au)

<u>Home of the NDIS Workforce Capability Framework | NDIS Workforce Capability (ndiscommission.gov.au)</u>

Framework Levels | NDIS Workforce Capability (ndiscommission.gov.au)

Tracey Harkness, Principal Practitioner, Community Services Directorate ACT

What do you think the role of psychologists (organisational, clinical, health etc) in the area of psychosocial hazards are?

The role of psychologists in the areas of psychosocial hazards are wide and varied. All psychologists engage in psychoeducation in any organisation or client group that they work with. Psychologists have expertise in the area of identifying psychosocial hazards that are due to group norms, and organisational cultural issues such as accepting of harassment and those that are punitive in nature

In human services, its important that we recognise the potential for vicarious trauma as an industry specific psycho social hazard.

Psychologists also understand the importance of self care in any work environment and its important part of looking after people.

How do we close the gap between policy that sets out to reduce psychosocial hazards vs the reality that we currently have to rely on having a manager that is informed, compassionate, and

invested in committing to these policies and staff wellbeing to see the results intended by policy?

Its important that the culture of the organisation is regularly measured and reviewed. This can be achieved by adequate training and support to supervisors to model the appropriate support to staff. Regular surveys and results need to be paid attention to , the surveys need to ask specific questions for wellbeing and in the area of identifying psychosocial hazards.

Information needs to be provided to staff regarding their responsibilities in WHS legislation and policies /framework on respect in the workplace

Equally important, information for staff on their rights within the workplace and clear pathways to report concerns, make complaints and give feedback.

Encouraging leaders to ask for honest, feedback on their leadership style, culture of team, the importance of psychological safety.