CSSHSA Psychological Health and Safety Environmental Scan

Findings and Recommendations

Mayday Mayday
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PRESENTED BY

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CSSHSA
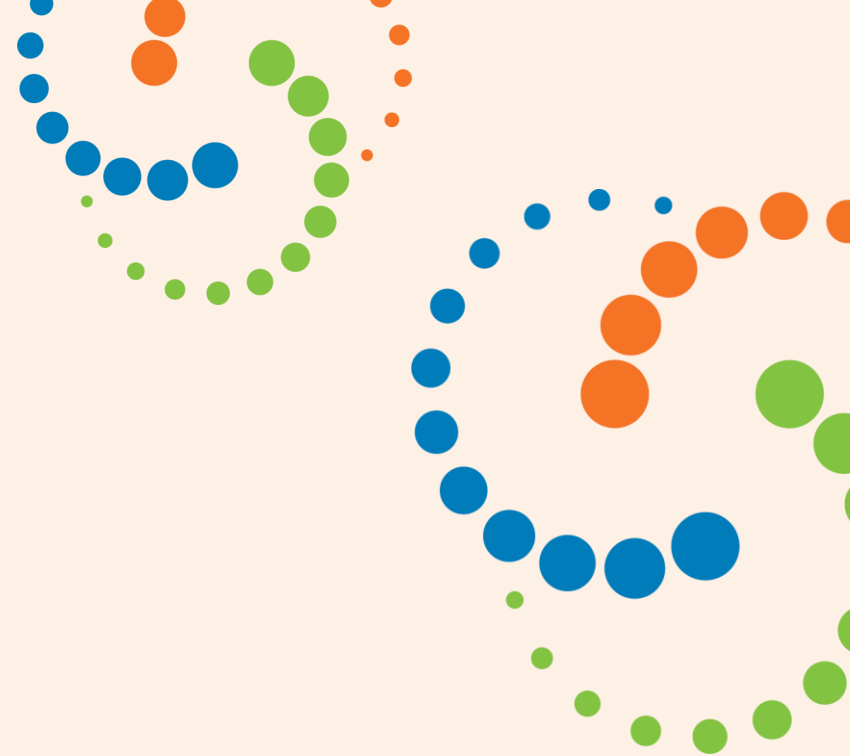COMMUNITY SOCIAL SERVICES
HEALTH & SAFETY ASSOCIATION

TERRITORIAL ACKNOWLEDGEMENT

CSSHSA humbly and respectfully acknowledges the unceded lands of more than 200 distinct First Nations in British Columbia.

We further acknowledge that colonization and associated attitudes, policies, and institutions have significantly changed Indigenous peoples' relationship with this land.
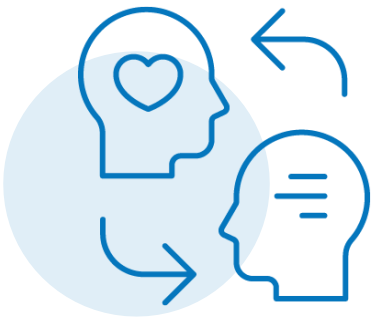
In our work and in our lives, we are committed to listening and learning, to truth and reconciliation, and to finding better ways of being on this land.

About Us

Who We Serve

CSSHSA represents Community Social Services organizations in the following three WorkSafeBC classification units**:

Counselling or Social Services

Life & Job Skills Training

Residential Social Service Facility

**Every firm registered with WorkSafeBC is assigned a classification unit based on their main business undertaking. Others in your industry will share the same classification unit and pay the same base premium rate for their insurance.

What started as a pilot project, and a joint undertaking of the Federation of Community Social Services of BC, CSSEA, and WorkSafeBC under the auspices of the innovation and sustainability roundtable, has now become an independent, non-profit with the support of the CSS sector.

Purpose and Background

The purpose of the study was to develop recommendations for the sector, by collaborating and partnering with organizations, in order to help member organizations improve Psychological Health and Safety and achieve better mental health outcomes.

This environmental scan is a starting point to initiate the conversation around mental health and psychological health and safety in the sector. Our goal is to continue to collaborate and learn from each other on what is working well, and explore areas of improvement.

Injury Rates in Community Social Services

Injury rates in the community social service sector continue to be some of the highest in the province. To learn more, review our [2024 injury trends report.](#)
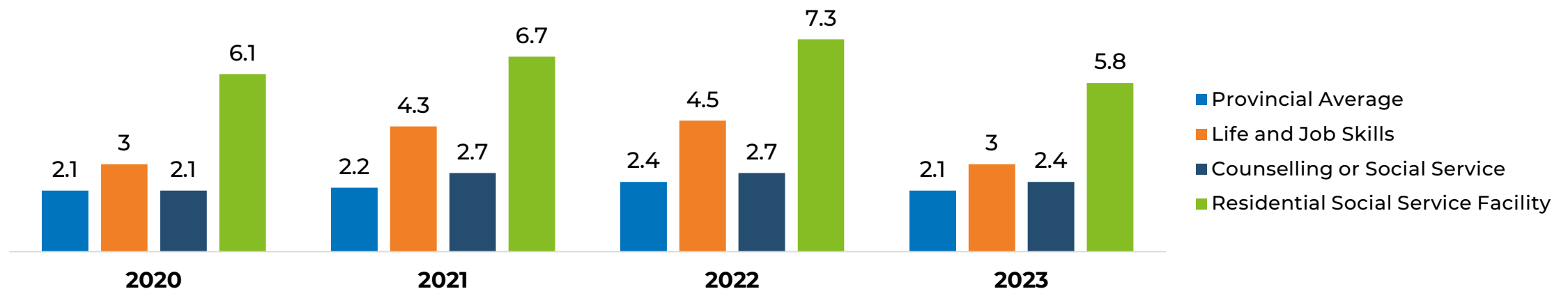
Residential Social Service Facility covers organizations that provide supported residential living arrangements for individuals in need of shelters and/or some supervision. Examples of facilities covered include group homes, shelters, transition houses, halfway houses to name a few. The injury rates in this group are **176% higher as compared to provincial average**.

DISCUSSION

What comes to mind when you hear the term psychological health and safety?

Caring for Communities

Why is Psychological Health and Safety important?

Psychological health and safety is crucial in Community Social Services, impacting both staff well-being and client care.

Here are ten key reasons why it's essential to prioritize mental health in the workplace.

1	Employee Well-being		**6**	Trauma Mitigation
2	Workplace Productivity		**7**	Legal & Ethical Responsibility
3	Participant Care Quality		**8**	Workplace Morale
4	Burnout Reduction		**9**	Psychosocial Risk Prevention
5	Staff Retention		**10**	Resilient Workforce

Project Method

The following methodology was used to collect data for the environmental scan:

- Conducted literary research to identify best practices, industry trends and risks

- CSSHSA identified key leaders for interviews and semi-structured interviews explored perceptions of PHS, how risks were addressed, and what improvements were needed.

- Facilitated three semi-structured volunteer focus groups of direct service providers identified by CSSHSA from across the sector.

- Information was reviewed, thematically organized, and recommendations formed.

CSSHSA Psychological Health and Safety Environmental Scan

Definitions

Psychological safety: the absence of harm and/or threat of harm to mental well-being that a worker might experience.

Psychologically healthy and safe workplace: a workplace that promotes workers 'psychological well-being and actively works to prevent harm to worker psychological health including in negligent, reckless, or intentional ways.
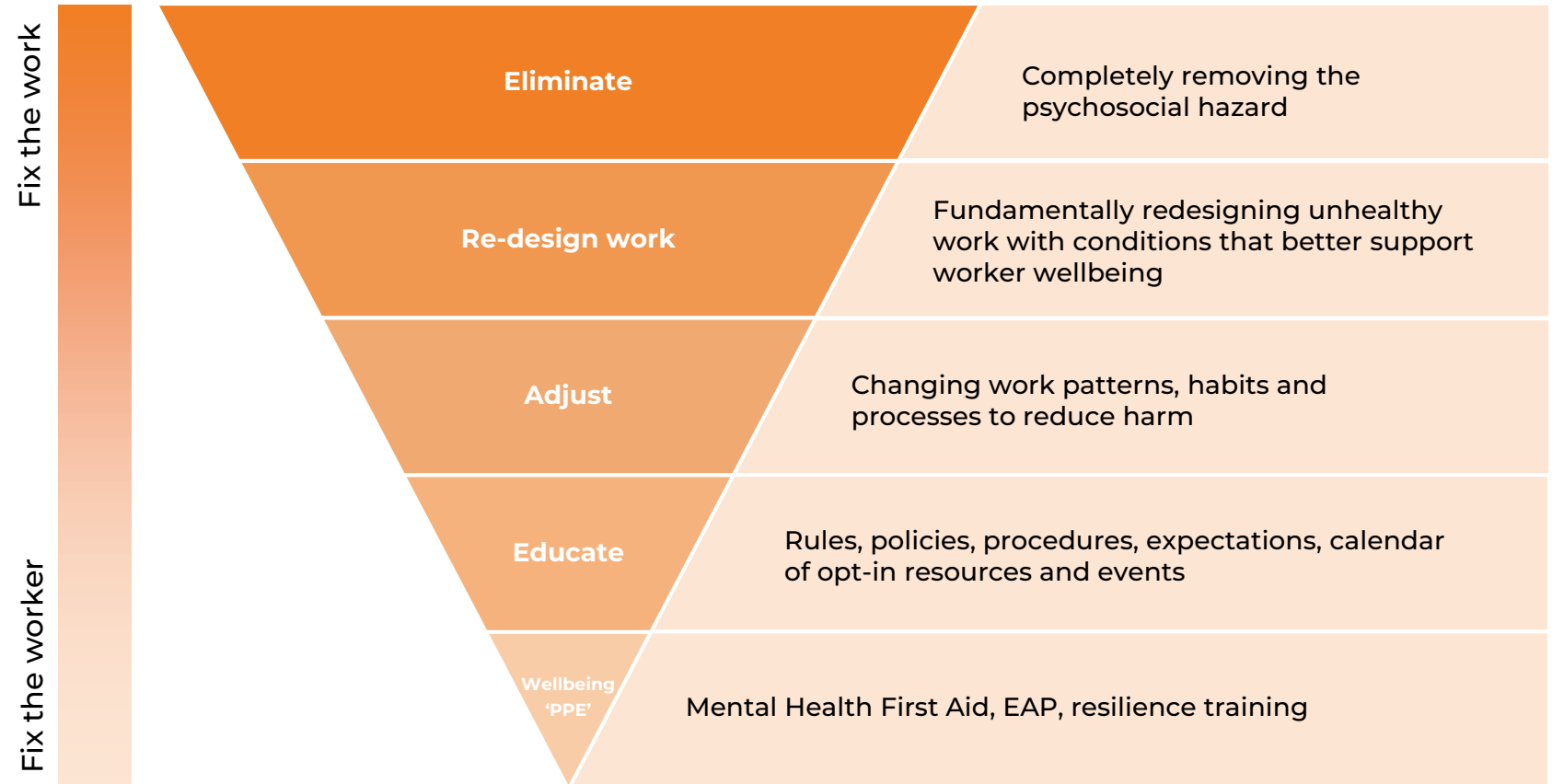
Hierarchy of controls: Is a way of determining which actions will best control exposures. The hierarchy of controls has five actions – to reduce or eliminate hazardous workplace exposure. The preferred order of action based on general electiveness is 1) elimination 2) substitution 3) engineering controls 4) administrative controls 5) personal protective equipment.

Psychosocial Hierarchy of Controls

Health and safety management involves developing mitigation strategies through a hierarchy lens.

The hierarchy of controls is a way of determining which actions will best control exposures. The hierarchy of controls has five actions/levels.

Fix the work

Eliminate
Completely removing the psychosocial hazard

Re-design work
Fundamentally redesigning unhealthy work with conditions that better support worker wellbeing

Adjust
Changing work patterns, habits and processes to reduce harm

Educate
Rules, policies, procedures, expectations, calendar of opt-in resources and events

Wellbeing 'PPE'
Mental Health First Aid, EAP, resilience training

Fix the worker

© Revolutionaries of Wellbeing

Strengths Identified by Participants

The following represents information provide by project participants through interviews and focus groups. The comments represent the perspective of participants from their experience of their organization; therefore, the observations will not apply to all member organizations:

- Staff and leaders are compassionate and care about the work they do

- Many expressed strong values aligned with helping and supporting others

- Some organizations appear to have effective strategies to mitigate risk to personal psychological health amidst environments with hazards ie. Shift debriefing, mentorship for new staff, colleague check-ins, safe spaces to retreat to.

- Examples of thorough onboarding that prepare workers for their role

- Some individuals seem to have developed skills to maintain personal psychological health and wellness despite repeated exposure to psychological hazards.

- Shared interest and a desire to stay healthy and thriving in a challenging work role

- Some reports of supportive supervisors/managers that had significant impact for individual coping.

Risk/Hazards Identified by Participants

The following are some risks and hazards identified by participants:

- Under resourcing in the sector

- Uncertainty about what constitutes an effective self-care plan

- Difficulty working with vulnerable populations while managing their own mental health and substance use concerns

- Limited knowledge on burnout prevention

- Lack of safe space to escape risky situations, calm down, recover, and prepare to return to client-facing environments.

- Isolation at work

- Acceptance of aggressive behaviour as being "part of the job"

- Being unaware/uninformed of risks before starting job

- Being unaware/uninformed about risky participants

- Understaffing

- Exposure to death and suffering of participants and of colleagues

- Lack of access to mental health services

- Leaders feel isolated in their roles and have difficulty balancing budgets with worker safety

Participants Suggested Improvements

Participants were invited to provide suggestions to remedy the PHS risks in their work. Some excellent ideas were generated:

Improve screening at hiring by ensuring people know what they are getting into

Make sure everyone has access to mental health care: create universal access for the industry

Create small refuge areas in high hazard work areas where workers can retreat, regroup and recharge

Build in clinical supervision - not all direct service employees have professional associations that provide access to clinical supervision.

Recommendations: Partnerships

We will develop a strategy to link partners from within the sector and those who have interest in the sector. CSSHSA will maximize the impact of its actions and use its role as a facilitator and resource provider:

- Develop collaborate partnership with WorkSafeBC, Ministry partners, Federation of Social Services and other industry shapers

- Collaborate with the OHS committees from member organizations

- Promote and improve existing Peer Support Programs

- Create a leadership and mentorship group

- Develop employee resource groups

Recommendations: Tools and Resources

We will develop a tools, education and resource strategy in alignment with Psychological Health and Safety Standard and best practices.

- Explore options for access to quality mental health care for all workers who are exposed to psychological risks

- Develop a toolbox of resources for member organizations relating to psychological health and safety and support integration into existing health and safety management systems (HSMS)

- Research evidence-based best practices

- Develop healthcare provider directory of occupationally aware clinicians

- Develop training for supervisors on PHSHS

- Provide a learning forum on key PHS topics

Recommendations: Communication

- **Develop communication strategy to keep the sector informed about the psychological health and safety project; include multiple communication pathways:**
    - Website
    - Webinars
    - Newsletters
    - Community of Practice
    - Resources

- **Generate a report with trends to share with member organizations.**

CSSHSA wishes to thank all our partners for the continued support as we engage with the sector to develop this important work.

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