

Managing Psychological Injury in the Workplace

Melbourne Diocese
August 2016

Dr Peter Cotton FAPS

Workplace Mental Health Advisor, SuperFriend

Clinical Advisor, WorkSafe Victoria

Member, beyondblue, Expert Advisory Group on Mental Health and Wellbeing at Work

Session overview...

- **Premier education sector prevention programs**
- **Research on what makes a difference in school improvement programs**
- **Impact on reducing psychological injury risk**
- **The importance of early help-seeking**
- **Barriers to early help-seeking**
- **Addressing barriers**
- **Issues in managing workplace mental health issues**
- **Workers compensation, treatment and return to work**

Workplace mental health promotion ...

“Mental health is everyone’s business:
It’s OK to talk about mental health in the workplace.”

Working as One: Promoting Mental Health and Wellbeing at Work

APSC and Comcare (2014)

Endorsed by National Mental Health Commission



Key education sector prevention programs

- *Building Cultural Capacity program (Catholic Education)*
- *Coaching for Leadership Teams program (Bastow)*

This program aims to enhance the capabilities of school leadership teams and to provide them with the knowledge and skills necessary to build a strong team-based professional learning environment that is based on trust, openness, collaboration and co-construction.

To engage staff in effective professional development that focuses on improving student outcomes, and enhancing staff and student wellbeing.

Key education sector prevention programs

- Establish School Improvement Team
- Coaching of SIT & School Leadership Team
- Identification of key elements of school climate that influence student outcomes (and staff wellbeing);
- Build capacity of leadership team and SIT to use appropriate tools via action learning initiatives to address school improvement priorities;
- Whole staff professional learning workshop;
- Form Action Teams to address specific identified improvement priorities;
- SIT leads a school review process to evaluate and refine agreed actions

- Approximately 12 days of workshops and coaching support sessions spread over one to two school terms.

Research in Catholic Schools...

The study compared:

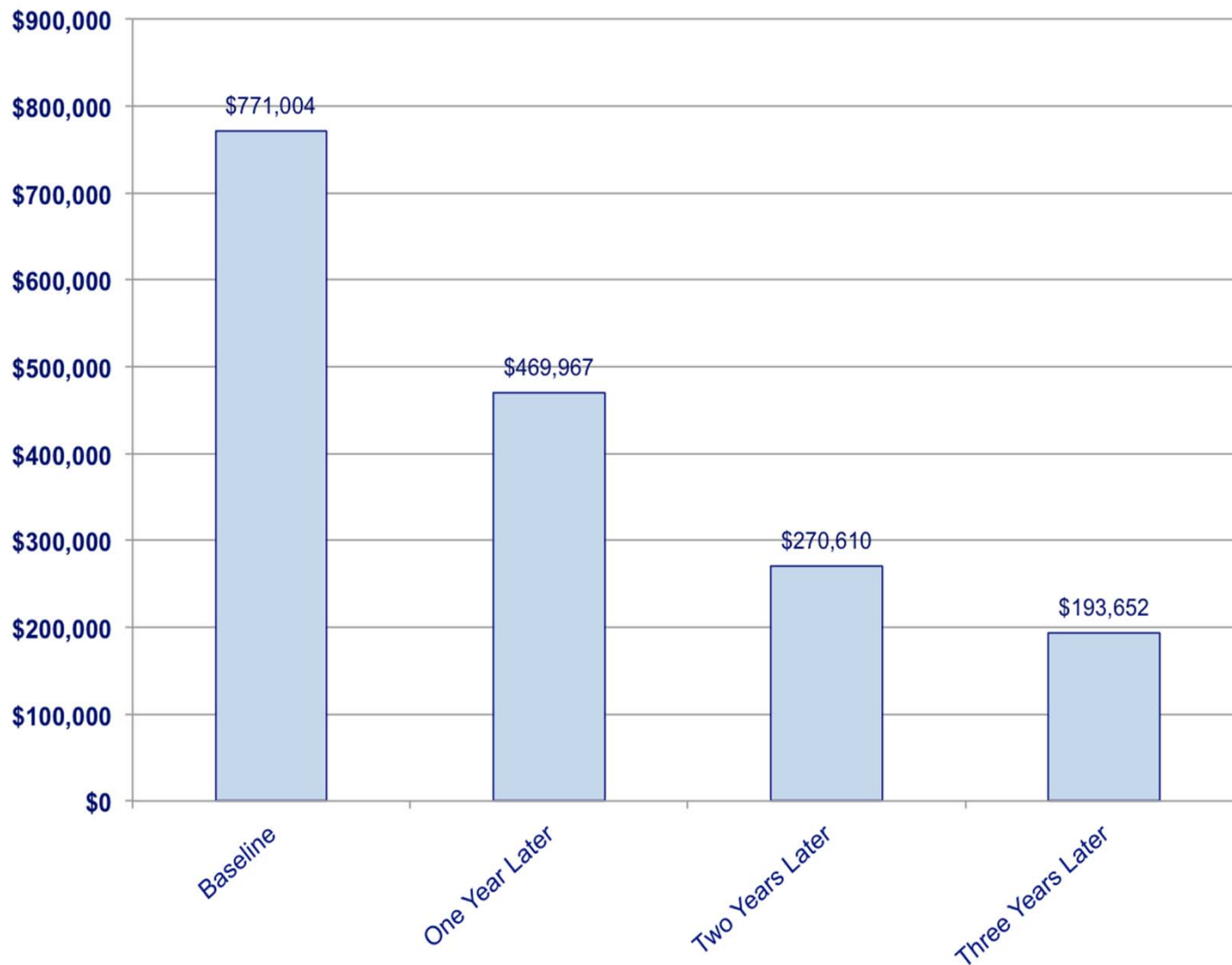
- 89 schools that improved (i.e., significant improvements in school organisational climate, teaching climate and wellbeing indicators);
- 103 schools that did not improve (i.e., no improvement or small declines in school organisational & teaching climates and wellbeing indicators).

Biggest differences between these two groups was in leader behaviors:

- Two key climate differentiating indicators: Engagement/Empowerment and Supportive Leadership:
- Leaders who approach school improvement in a manner reflective of a genuine distributed leadership culture (top down + bottom up) cv
- Leader-driven approach (top down only)

Hart et al (2017)

Case study: Outcomes from a Secondary School CLT program



Hart P.M., Cotton P. and Scollay C.E., (2015). 'Flourishing at work: Improving wellbeing and engagement. In R.J. Burke, K.M. Page and C.L. Cooper (Eds.) *Flourishing in Life, Work and Careers*. Cheltenham UK: Edgar Elgar.

A key approach to early intervention

A key goal of any workplace mental health and wellbeing strategy:

“Validate and encourage early help seeking behaviour”

- *Workplace mental health: developing an integrated approach. De LaMontagne et al (2014)*
- *Victorian Government Mental Health Charter (2016)*
- *White paper (2017) Tasmanian Centre for Work, Health and Wellbeing Network in collaboration with national and international researchers, practitioners and policy makers).*

Barriers to early help seeking

1. Mental health stigma
2. Self stigma
3. Lack of recognition of early warning signs
4. Past 'once bitten twice shy' treatment experience
5. Denial coping

Current status of workplace mental health related issues

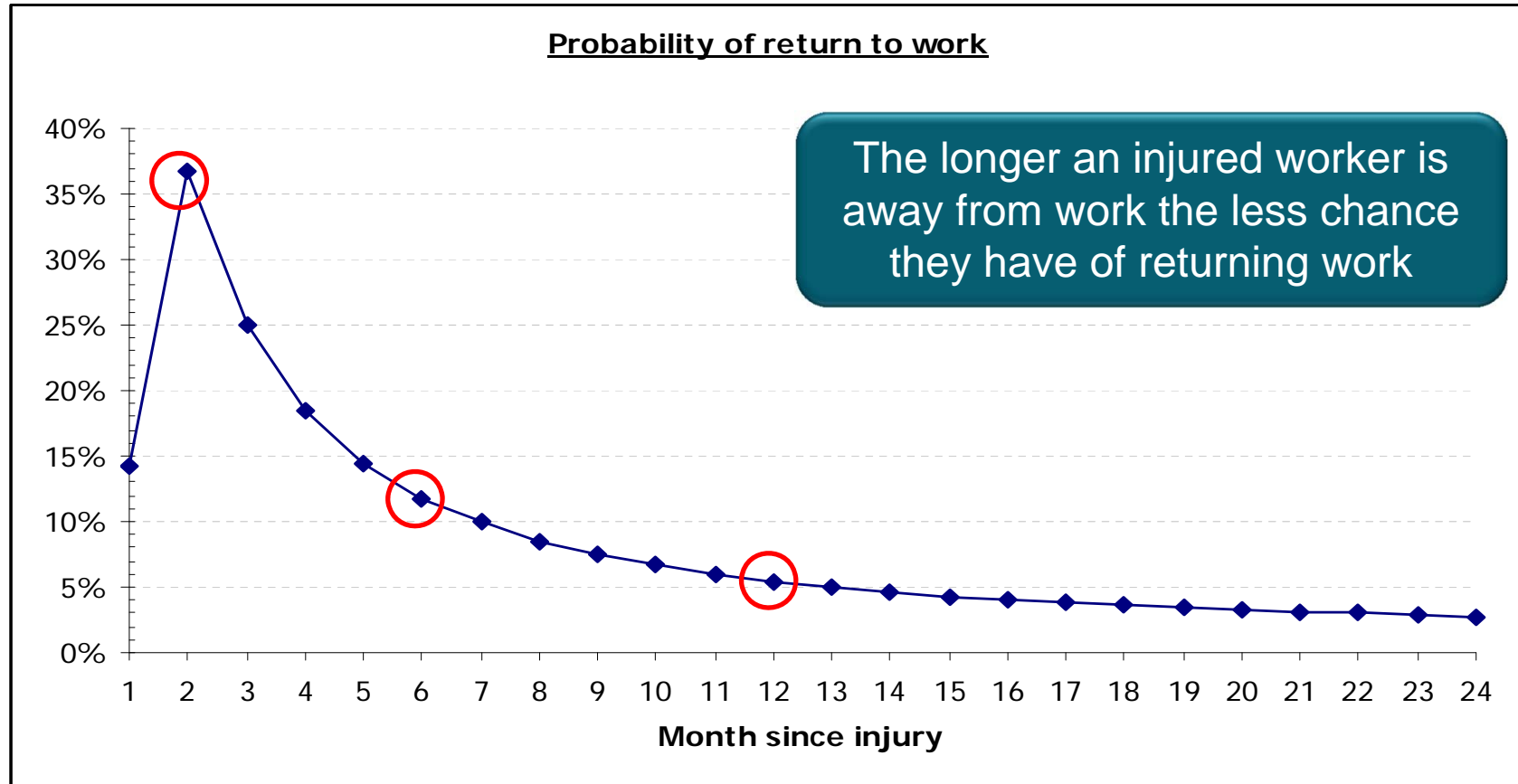
Mental health is still treated differently, relative to physical injuries, at all levels:

- Mental health? – allowed more latitude in workplaces / hands off approach
- Avoidance by managers in engaging with at-risk individuals;
- Fear of aggravating mental health problems?
- Commonly, managers feel ill equipped to proactively engage with at risk staff
- “We have an EAP so we don’t need to do anything else?”
- GP certification is more liberal compared with physical injuries.
- Conflation of mental health diagnoses with work total incapacity in GP certification

Addressing mental health issues

- Mental health literacy training?
- Respond to early warning signs ...
- Proactively initiate supportive conversations;
- Conversation should be framed by expression of genuine care and concern;
- Encourage help-seeking;
- Develop a structured support plan;
- Case conference (compensable and non-compensable cases)?
- Promote multiple pathways to care: E-mental health, Apps etc.

Why early support and re-engagement with employment is important



The role of the workplace ...

- The role of the workplace support in facilitating, hindering or derailing return to work outcomes (Safe Work Australia, 2016) .
- Organisational experiences explain more of the variation in levels employee wellbeing compared with the impact of operational incident exposures (Hart & Cotton, 2003; Cotton and Hart, 2003).
- 'Perceived Organisational Support' (POS) mediates a range of performance and wellbeing outcomes including stress reporting, absenteeism and discretionary effort (Eisenberger & Stinglhamber, 2011)

Psychosocial / industrial overlay issues

Key psychosocial overlay issues:

- Perceived poor workplace support;
 - Perceived unfair treatment/injustice;
 - Low morale/job dissatisfaction.
-
- Medical professional often conflate these issues with clinical presentation;
 - These psychosocial issues are generally more significant drivers of outcomes over and above clinical symptoms.

Types of psychological injury...

Low Morale Type:

Driven more by a decline in morale rather than a substantive increase in psychological distress/clinical symptoms. Typically involves interpersonal conflict and/or work dissatisfaction issues [*'Disgruntlement with work' is not a medical diagnosis!*].

Tendency to medicalise these claims – 'Adjustment Disorder' – and this makes them worse.

These individuals do not need treatment – they need vocational assistance, conflict resolution and HR interventions

Treatment and management of compensable psychological injuries

- Health Benefits of Safe Work agenda
- WorkSafe Clinical Panels and Clinical Framework
- WorkSafe GP Certification Early Contact program
- Emergence of work focused treatments: Return to work should be a central treatment objective!
- Early triage programs
- Specialist PTSD network