



## **MANAGING PSYCHOSOCIAL HAZARDS AT WORK POLICY**

Version: 1; Adopted: 26 MAY 2023

### **1. INTENT**

The purpose of this Policy is to improve worker health, safety, and wellbeing at Brewarrina Shire Council by assisting people leaders to control psychosocial risks in the workplace.

The objectives of this policy are to:

- Provide a fair and accessible process for employees to raise and address grievances, fostering a safe and inclusive work environment.
- Ensure timely and effective resolution of grievances, addressing individual concerns while identifying and addressing systemic issues.
- Promote a culture of open communication, respect, and accountability, where employees feel supported and confident in reporting grievances without fear of reprisal.
- Protect the well-being and mental health of employees by addressing psychosocial risks, such as workplace bullying, harassment, and discrimination.
- Enhance employee satisfaction, engagement, and productivity by addressing and resolving workplace conflicts and concerns in a proactive and constructive manner.
- Ensure compliance with relevant legislation, regulations, and policies pertaining to grievance handling, workplace health and safety, and equal employment opportunities

### **2. SCOPE**

This Policy applies to all Council workers at workplaces under the management or control of Brewarrina Shire Council.

This procedure does not cover grievance matters or the management of bullying or work-related aggression and violence, and does not extensively detail the necessary ongoing management of a psychological injury that results in a workers compensation claim.

### **3. FRAMEWORK**

Psychosocial hazards in the workplace can impact people in a variety of ways, and may result in:

- Psychological conditions such as depression, anxiety, adjustment disorders, and post-traumatic stress disorder
- Physical conditions such as cardiac and musculoskeletal disorders
- Unhealthy lifestyle choices such as poor diet, smoking and alcohol and other drug misuse
- Safety incidents and errors at work
- Reduced productivity

The NSW Work Health and Safety Act (2011) and Work Health and Safety Regulation (2017) require organisations to provide a work environment without risk to health and safety. The Act defines "health" as physical and psychological health, and the Regulation highlights psychosocial risks as a focus area.

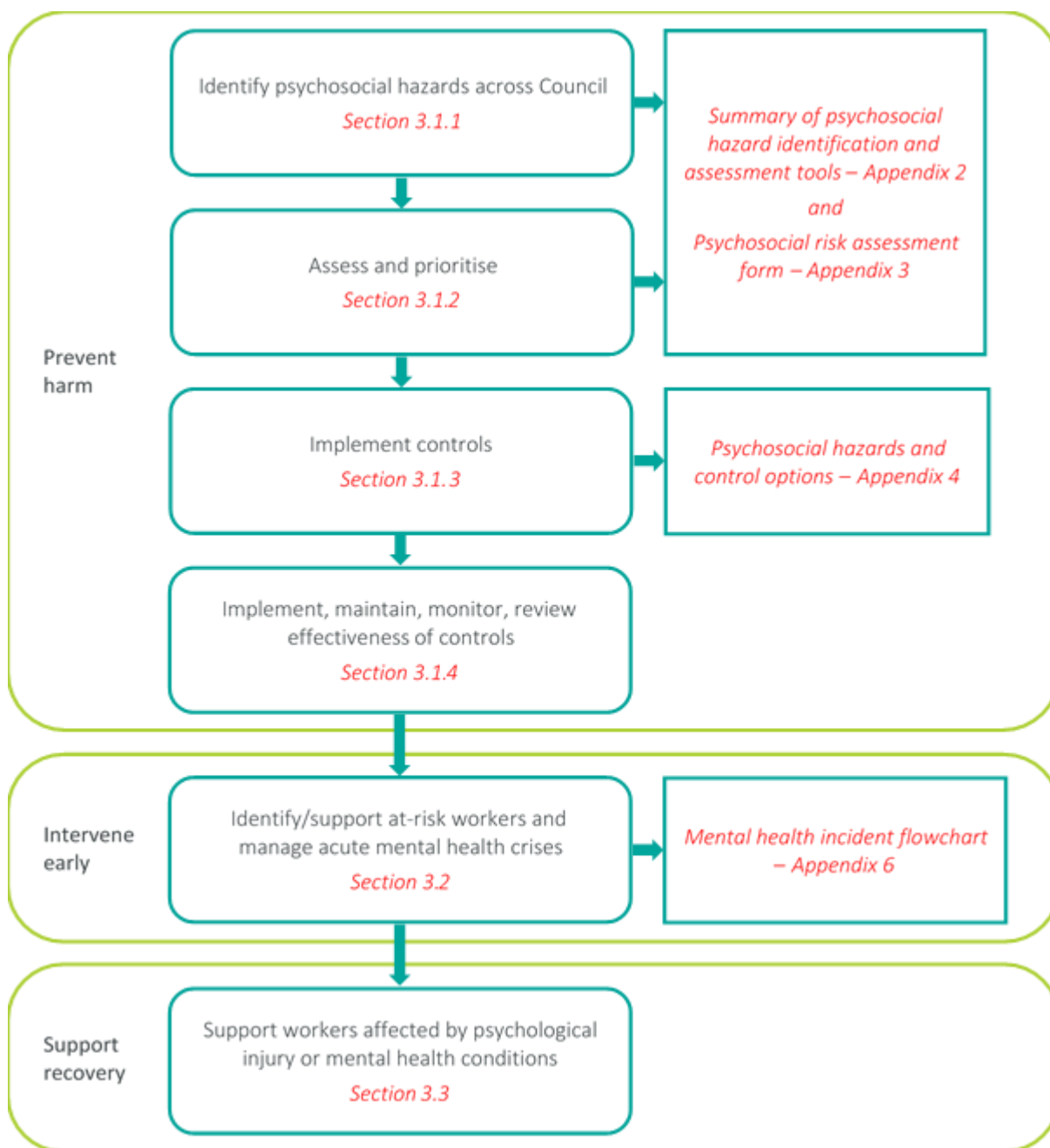
Both the Act and Regulation require Council to take a risk management approach to all hazards. That is, Council must eliminate hazards where possible, and control any that remain according to the hierarchy of controls. Higher order controls that treat the organisational and

environmental causes of psychological harm must be considered where possible, rather than relying solely on administrative controls such as training, awareness, EAP, and mental health first aid.

This Policy uses an approach in line with Safe Work Australia's Work-related psychological health and safety national guidance material:

1. Prevent harm using a risk management approach.
2. Intervene early to identify and support workers who may be exposed to psychosocial hazards and/or are at-risk of psychological injury or illness.
3. Support recovery of workers with psychological injuries and mental health conditions.

The following flowchart summarises the processes and documents required to manage psychosocial hazards in accordance with this Policy, and to support individuals affected by psychosocial hazards.



### 3.1. Prevent Harm

It is essential that people leaders demonstrate leadership and commitment in harm prevention and psychosocial risk management in the workplace.

People leaders must:

- Understand work-related psychological health and safety matters
- Actively seek to identify potential psychosocial hazards within their areas of control
- Implement and monitor measures to protect their workers from identified hazards

#### 3.1.1. Identify psychosocial hazards

In consultation with relevant workers and the WHS Committee, WHS / Risk Coordinator and people leaders, Council will choose the most appropriate workplace assessment tool to identify and assess psychosocial hazards across various Council areas. The tools selected ([Appendix 2](#) or [Appendix 3](#)) will, depend on the culture and maturity of Council, and resources available at the time.

Regardless of the assessment tools used, Council People leaders must ensure that the following is identified:

Psychosocial hazards that arise from or relate to;


- The design or management of work
- The work environment
- Plant at the workplace
- Work interactions or behaviours

At-risk groups of workers;

- Younger people
- Older people
- Those new to Council or a task
- Those from culturally or linguistically diverse backgrounds
- Those with literacy issues
- Those who have previously had a work injury or exposure to a traumatic event at work

The WHS / Risk Coordinator and people leaders should use the following resources and indicators to help identify hazards:

- Appendix 4 Psychosocial hazards and control options for examples of hazards and controls.
- Results of staff culture/ satisfaction surveys
- Information from exit interviews
- Absenteeism and turnover rates
- Information about workforce demographics
- Psychological workers compensation claims reports
- Incident and hazard reports- trends in frequency and timing
- Grievances and complaints
- Employee assistance program (EAP) usage reports
- The risk register and relevant pre-existing risk assessments
- Consultation with affected workers and their HSRs
- Job descriptions and role responsibilities lists
- Existing Council policies, procedures and safe systems of work



Council will ensure policy framework promotes a workplace free from discrimination, harassment, bullying, psychosocial hazards and victimization by;

- Ensuring that processes are implemented and resources available for the effective identification, assessment and elimination or minimisation of psychosocial hazards.
- Model appropriate workplace behaviour and monitor the workplace to ensure the behaviour of others is in accordance with this policy.
- Ensure managers and supervisors support, manage and apply this policy within their area.
- Ensure all employees are aware of the procedures outlined in this policy.
- Handle serious and complex grievances referred by line managers/supervisors or brought directly by employees.

### **3.1.2. Assess and prioritise psychosocial hazards and risks**

Depending on the results of the initial assessment, further analysis may be required to understand the psychosocial hazards and identify causes and appropriate risk controls. This may involve further analysis across all Council, or just on the higher risk work groups.

Methods of further analysis may include:

- Carrying out further worker consultation via formal or informal interviews or focus groups
- Carrying out a survey of workers ([see Appendix 2](#)) for some or all work groups
- Carrying out separate risk assessments for individual hazards, risk factors, or indicators seen over multiple departments or workgroups
- Further analysis of resources and indicators as listed in section 3.1.1.

The results should be analysed and a de-identified summaries provided to the General Manager, other senior managers and the WHS Committee. Consider confidentiality and impartiality for all methods.

Records of psychosocial risks identified through these processes, are required be recorded on Council's WHS Risk Register, with corrective actions from workers and WHS Committee recorded via the Corrective Actions Register so they can be tracked through to completion.

### **3.1.3. Implement controls for psychosocial hazards**

People leaders must implement effective control measures to eliminate or reduce risk factors for work-related psychological injury for workers in their areas of control.

[See Appendix 4](#) for a comprehensive list of controls and choose the most appropriate option. Controls must be selected and implemented in consultation with the Work Health and Safety Committee.

The hierarchy of controls should be followed when selecting controls:

- The priority should be on implementing higher order controls that eliminate hazards where possible, or else minimise them by redesigning the physical or organisational workplace, e.g. the use of physical barriers to control risks of occupational violence, or improving planning to minimise overload at peak times.
- Where risks remain after the work has been redesigned, using administrative controls to minimise the risk, e.g. procedures, training, communications, monitoring, and supervision. Administrative controls that are implemented at a strategic, organisational level should be prioritised over administrative controls implemented at an individual level. E.g. training for people leaders should be prioritise over training for workers, and developing Council-wide initiatives and policy change with General Manager endorsement should be prioritised over team-based initiatives.
- Programs designed to treat and reduce the impact of psychosocial hazards should be implemented if required, e.g. mental health first aid and EAP, but these should not be



relied upon as controls as they do not reduce exposure to workplace psychosocial hazards

- Planned controls should be documented on the Corrective Action Register.

#### **3.1.4. Monitoring and reviewing controls for psychosocial risks controls for psychosocial hazards**

People leaders will monitor the effectiveness of preventative measures for psychosocial risk factors and periodically review their effectiveness through review of related incidents, consultation with workers and the Work Health and Safety Committee. (Planning of this can be planned and documented using the psychosocial risk assessment form [\(Appendix 3\)](#) and the Risk Register.

A review of controls should also be conducted:

- Before a significant workplace change occurs.
- Where a new hazard or changed risk is identified.
- If a serious incident or injury occurs, including a physical injury where psychosocial risk is a significant contributing factor.
- If a control is ineffective.
- If an audit or survey indicates a review is required.
- If requested by an HSR.
- If consultation indicates a review is required.
- If workers indicate that preventative measures have not been effective, notify the WHS / Risk Officer or HR Manager, who will update the General Manager, Senior Managers and WHS Committee. Any ineffective measures must be reviewed and additional or changed controls implemented in consultation with workers.

### **3.2. Intervene early**

#### **3.2.1. Report and investigate psychosocial incidents and reviewing controls for psychosocial risks controls for psychosocial hazards**

People leaders will ensure that psychosocial hazards and reports of psychosocial hazards are reported using the Incident/Hazard Report Form. These report forms may be de-identified if necessary.

The Human Resources Manager will ensure that all psychosocial incidents are investigated, using the Incident Investigation Form. Members of the HR, WHS and other relevant departments may need to be involved in the investigation.

#### **3.2.2. Manage at-risk workers**

People leaders and other key workers will receive mental health first aid training to learn to identify early warning signs that someone may be affected by psychosocial risk factors.

If people leaders identify workers at higher risk, they must speak to the Human Resources Manager and then the worker, and provide any reasonable adjustments and support where needed. These adjustments and support will depend on the situation, but may include a combination of:

- Addressing the work-related causes or risk-factors
- Suggesting the worker uses Council's EAP
- Temporarily modifying the worker's duties/hours, or providing them with additional resources
- Suggesting the worker visits their GP or a psychologist

#### **3.2.3. Manage people during acute mental crises**

Sometimes a worker's mental health may deteriorate suddenly to a point where immediate support is required.



If a worker declares thoughts of self-harm or harm to others, or displays other concerning symptoms, the manager and or supervisor is required to follow the process in [Appendix 5](#).

The worker's immediate health and safety is critical, and all steps are to be taken to ensure they are contacted and supported with the appropriate care. This care may be provided by their GP, Council's EAP, a psychologist, or in a suitable health facility.

The worker's fitness for work following such an incident will be supported and guided by the appointed healthcare professional and managed in line with Council's Return to Work Program.

### 3.3. Support recovery

#### 3.3.1. Manage work-related psychological injury or illness

If a worker notifies Council of work-related psychological injury or illness, their manager must contact the RTW Coordinator immediately and refer to the Return to Work Program. The RTW Coordinator will assist and support the worker through the recovery at work process.

The RTW Coordinator must notify StateCover within 48 hours of Council becoming aware that a work-related injury has occurred.

The privacy and confidentiality of workers affected by workplace hazards and mental health issues must always be respected.

#### 3.3.2. Support workers with non-work-related mental health conditions

If a people leader suspects a worker is suffering from a non-work-related mental health condition, they should have a prompt, supportive conversation, and consider whether they need medical evidence and assistance to ensure the worker is safe and support their recovery.

## 4. TRAINING AND IMPLEMENTATION

The HR Manager will ensure that people leaders receive training in relation to the implementation of this procedure.

Workers will receive basic awareness training in identifying and reporting work-related psychosocial hazards.

People leaders and other key workers will receive mental health first aid training to learn to identify the early warning signs of psychological conditions in their colleagues and assist them to get appropriate help.

Implementation of this procedure can be checked using [Appendix 1](#) Self-assessment checklist: Managing psychosocial hazards at work.

## 5. RECORD KEEPING

Brewarrina Shire Council will maintain the records relating to the management of psychosocial hazards. These records will be maintained by the HR / WHS Department.

- Psychosocial risk assessment form
- Other psycho

RECORD NAME	STORAGE LOCATION	RESPONSIBILITY OF STORAGE
Psychosocial risk assessment form	HR /WHS drive	HR & WHS Department
Psychosocial risk assessment form	HR / WHS drive	HR & WHS Department







Incident and hazard report forms and incident investigation reports	HR / WHS drive	HR & WHS Department
Completed recover at work plans	HR Drive	HR Department

Always consider and respect the privacy and confidentiality of all parties, especially regarding the availability of records and the inclusion of personal details.

## 6. REFERENCES

### 6.1.1. Appendices

1. Self-assessment checklist: Managing psychosocial hazards at work (CL017)
2. Psychosocial hazard identification and assessment tools
3. Psychosocial risk assessment form (CL042)
4. Psychosocial hazards and control options (GD024)
5. Mental health incident flowchart (GD047)

### 6.1.2. Internal references

- Respect at Work Policy
- Grievance Policy
- Grievance Procedure
- WHS Corrective Action Register
- Council Staff Training Plan
- Incident Reporting and Investigation Procedure
- Incident and Hazard Report Form
- Incident Investigation Report Form
- Council Return to Work Program

### 6.1.3. External references

- [Work Health and Safety Act 2011 \(NSW\)](#)
- [Work Health and Safety Regulation 2017 \(NSW\)](#)
- [NSW Code of Practice: Managing Psychosocial Hazards at Work, Safe Work NSW 2021](#)
- ISO45001:2018 Occupational Health and Safety Management Systems
- ISO45003:2021 Occupational health and safety management — Psychological health and safety at work — Guidelines for managing psychosocial risks
- [National guidance material: Work-related psychological health and safety – a systematic approach to meeting your duties, Safe Work Australia 2019](#)
- [Principles of Good Workplace Design: A work health and safety handbook, Safe Work Australia](#)

## 7. DEFINITIONS

### 7.1.1. Appendices

Term	Definition
Anxiety	A normal emotional response to a threat or danger which may become a disorder if excessive, persistent, or uncontrollable. People with generalised anxiety disorders become excessively worried when confronted by events that are part of everyday life, and may experience symptoms such as irritability, dizzy spells, palpitations, chest pain, loss of memory and difficulty in concentrating.





	<i>SOURCE: STRESSWISE – PREVENTING WORK-RELATED STRESS; WORKSAFE VICTORIA (2007)</i>
Depression	<p>A normal reaction to some of life's events which, when profound, may become a disorder. People with clinical depression may be persistently sad, have no interest in anything, and take no pleasure in performing usual activities.</p> <p>The individual may also have reduced energy levels, sleep and eating disorders, difficulties concentrating, feelings of guilt and discouragement, and in some cases suicidal thoughts.</p> <p><i>SOURCE: STRESSWISE – PREVENTING WORK-RELATED STRESS; WORKSAFE VICTORIA (2007)</i></p>
Post-traumatic stress disorder (PTSD)	<p>PTSD may affect anyone who has been victim of or witness to a traumatic event, e.g. a violent assault or serious workplace accident. Because everyone reacts differently to such events, some people will have no after-effects while others may experience a variety of symptoms such as flashbacks, difficulty concentrating, and insomnia.</p> <p><i>SOURCE: STRESSWISE – PREVENTING WORK-RELATED STRESS; WORKSAFE VICTORIA (2007)</i></p>
Psychosocial hazard	<p>A psychosocial hazard is one that arises from, or relates to:</p> <ul style="list-style-type: none"> <li>• The design or management of work</li> <li>• A work environment</li> <li>• Plant at a workplace</li> <li>• Workplace interactions or behaviours</li> </ul> <p>It may cause psychological harm, whether it may also cause physical harm.</p> <p><i>SOURCE: WORK HEALTH AND SAFETY REGULATION 2017 (NSW)</i></p>
Psychosocial incident	A specific incident that causes exposure to a psychosocial hazard.
Work-related stress	<p>The adverse reaction people have to excessive pressures or other types of demands that are not matched to their knowledge and abilities, and which challenge their ability to cope.</p> <p><i>SOURCE: WORLD HEALTH ORGANIZATION (WHO)</i></p>

## 8. ACCOUNTABILITIES

Council has a legal responsibility to prevent psychosocial risks and ensure all employees are aware of the procedures outlined in this policy. The responsibilities for managing psychosocial risks are summarized below.

Role	Responsibilities
General Manager	<ul style="list-style-type: none"> <li>• Ensure that processes are implemented and resources available for the effective identification, assessment and elimination or minimisation of psychosocial hazards.</li> <li>• Ensure processes are in place for the monitoring and periodic review of prevention and control measures for psychosocial hazards.</li> </ul>







	<ul style="list-style-type: none"> <li>• Ensure that processes are in place to review this procedure every two years</li> </ul>
People Leaders	<ul style="list-style-type: none"> <li>• Ensure the identification, assessment, control, and review of psychosocial hazards with workers in their areas of control, including identifying and appropriately supporting individuals and groups of workers with special needs.</li> <li>• Promptly and directly addressing unacceptable behaviour in the workplace in line with Council's HR and WHS policies and procedures.</li> <li>• In consultation with workers, the Human Resources Manager, WHS/Risk Coordinator, relevant supervisors, and the Work Health and Safety Committee, identify potential sources of psychosocial hazards in their areas and determine how these sources can be proactively managed, with particular attention to individual workers or groups of workers with special needs.</li> <li>• Be alert for early warning signs of psychosocial hazards in their areas of control and in individual workers.</li> <li>• Contact the RTW Coordinator immediately after becoming aware of psychosocial hazards that have caused or are likely to result in a worker requiring medical treatment or time off work.</li> <li>• Ensure psychosocial hazard incidents are reported in line with the Incident Reporting and Investigation Procedure.</li> <li>• In liaison with the WHS/HR Officer and HSRs/HSC, ensure that a Psychosocial Risk Assessment is completed in their areas of control.</li> <li>• In liaison with the WHS/HR Officer and WHS Committee, review the Psychosocial Hazards and Control Options and make appropriate workplace changes as necessary.</li> <li>• Monitor and periodically review the implementation and effectiveness of control measures to manage psychosocial hazards in their areas, and any necessary revision of controls.</li> <li>• Provide workers with access to necessary support services and reasonable adjustments.</li> <li>• Follow the <a href="#">MENTAL HEALTH INCIDENT FLOWCHART</a> where a worker's mental health deteriorates to a point where they express or are suspected of having thoughts of self-harm or are displaying other concerning symptoms, such as hearing voices.</li> <li>• Ensure privacy and confidentiality of individual issues is maintained.</li> <li>• Consult with workers and other duty holders as needed to identify and the effectively manage psychosocial hazards.</li> </ul>
WHS / HR Officers + Manger	<ul style="list-style-type: none"> <li>• Oversee the processes for the identification, assessment, control, and monitoring of psychosocial hazards.</li> <li>• Give assistance and feedback to people leaders in the identification, assessment, control, and monitoring of preventive measures for psychosocial hazards, and help to identify reasonable adjustments where indicated.</li> <li>• If required, facilitate the implementation of the Psychosocial Risk Survey, compile the results, and provide a summary</li> </ul>



	report to the GM, senior managers and the Work Health and Safety Committee.
RTW Coordinator (HR Department)	<ul style="list-style-type: none"> <li>• Support injured workers and managers through the recovery at work process.</li> <li>• Notify StateCover within 48 hours of Council becoming aware that a work-related injury has occurred.</li> </ul>
Work Health and Safety Committee	<ul style="list-style-type: none"> <li>• Participate in the identification of psychosocial hazards and identify control measures where needed.</li> <li>• Help review the effectiveness of controls implemented for the prevention of psychosocial hazards.</li> <li>• Promptly notify people leaders and the WHS/HR Officer where preventive measures for psychosocial hazards have not been effective or properly maintained.</li> </ul>
Workers	<ul style="list-style-type: none"> <li>• Follow the requirements of this procedure.</li> <li>• Participate in the identification of psychosocial hazards and controls.</li> <li>• Promptly report psychosocial hazards or issues at work to the relevant supervisor and/or HSR, or WSH Committee.</li> <li>• Perform tasks in line with information, instruction and training provided.</li> </ul>

## 9. REVIEW

Council will review this Policy, when there are legislative changes, a change in workplace arrangements, or at least every 2 years to ensure it continues to remain effective and relevant. Review and revision must be done in consultation with relevant workers. This Policy has been made in collaboration StateCover's procedure for managing psychosocial Hazards at Work.

### 9.1. Policy Amendments

VERSION	DATE APPROVED	RESOLUTION NO	DESCRIPTION OF CHANGES
1	26 MAY 2023	68/23	NEW POLICY