



**Occupational Health Clinics
for Ontario Workers Inc.**



OSSTF/FEESO
ONTARIO SECONDARY SCHOOL
TEACHERS' FEDERATION



OSSTF Lunch and Learn, Brock University

MEASURING WORKPLACE STRESS

November 21, 2013

the new CSA Standard Z1003-13



CAN/CSA-Z1003-13/BNQ 9700-803/2013
National Standard of Canada

Psychological health and safety in the workplace — Prevention, promotion, and guidance to staged implementation

Disponible en français
*Santé et sécurité psychologiques
en milieu de travail —
Prévention, promotion et lignes
directrices pour une mise en
œuvre par étapes*



http://shop.csa.ca/en/canada/occupational-health-and-safety-management/canca-z1003-13bnq-9700-8032013/invt/z10032013/?utm_source=redirect&utm_medium=vanity&utm_content=folder&utm_campaign=z1003

Commissioned by the
Mental Health Commission of Canada



Vision

A workplace that promotes workers' psychological well-being and allows no harm to workers mental health...

Key Drivers

Risk Management

Cost Effectiveness

Recruitment & Retention

Excellence & sustainability

Strategic pillars

Prevention (1°)

Promotion (2°)

Resolution (3°)

Psychological
& social support

Organizational
culture

Clear leadership
& expectations

Civility and
respect

Psychological
demands

Growth and
development

Recognition
and reward

Involvement
and influence

Workload
management

Engagement

Balance

Psychological
protection

Protection of
physical safety

A workplace issue

Economic burden:

- “10 to 25% of Canadian workplaces effectively mentally injurious – not good for the mental health of their employees” ... “leading cause of short-term disability and long term disability – it’s the biggest single reason people are off work for periods of time”
- “estimated at \$51-billion” ... “ up substantially over the past decade”

http://www.youtube.com/watch?v=5qfTFxOc6Xo&feature=player_embedded

Tracking the Perfect Legal Storm (Shain, 2010)

- Labour relations law
- Employment standards
- Human rights legislation
- Law of torts (negligence)
- OH&S law (violence & harassment)
- Workers' compensation changes (BC)
- Awards up 700% over that last 5 years

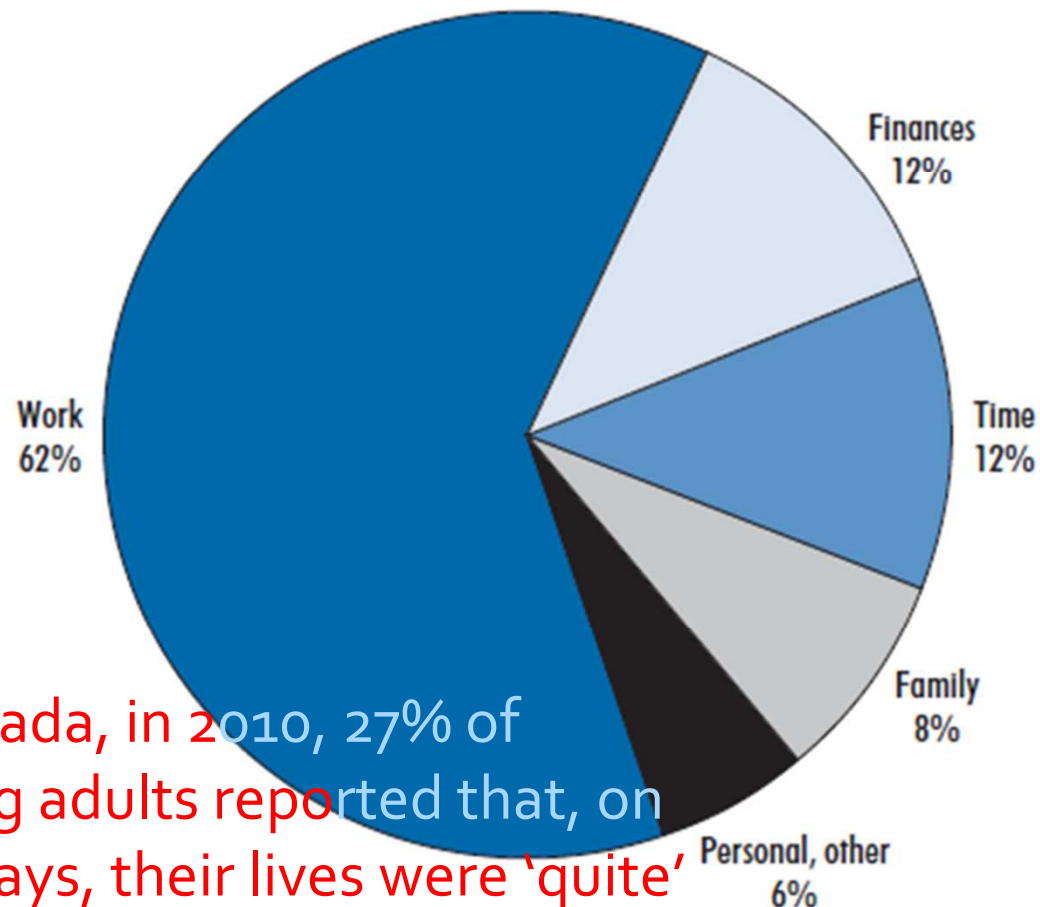
... recent opinion (22/10/2013) that CSA standard sets the legal criteria for a psychologically safe system of work

<http://www.mentalhealthcommission.ca/English/node/506?terminitial=30>

“What’s stressing the stressed? Main sources of stress among workers”
by Susan Crompton (Stats Can) 2011

Chart 2 Work is the main source of stress for 6 in 10 highly stressed workers

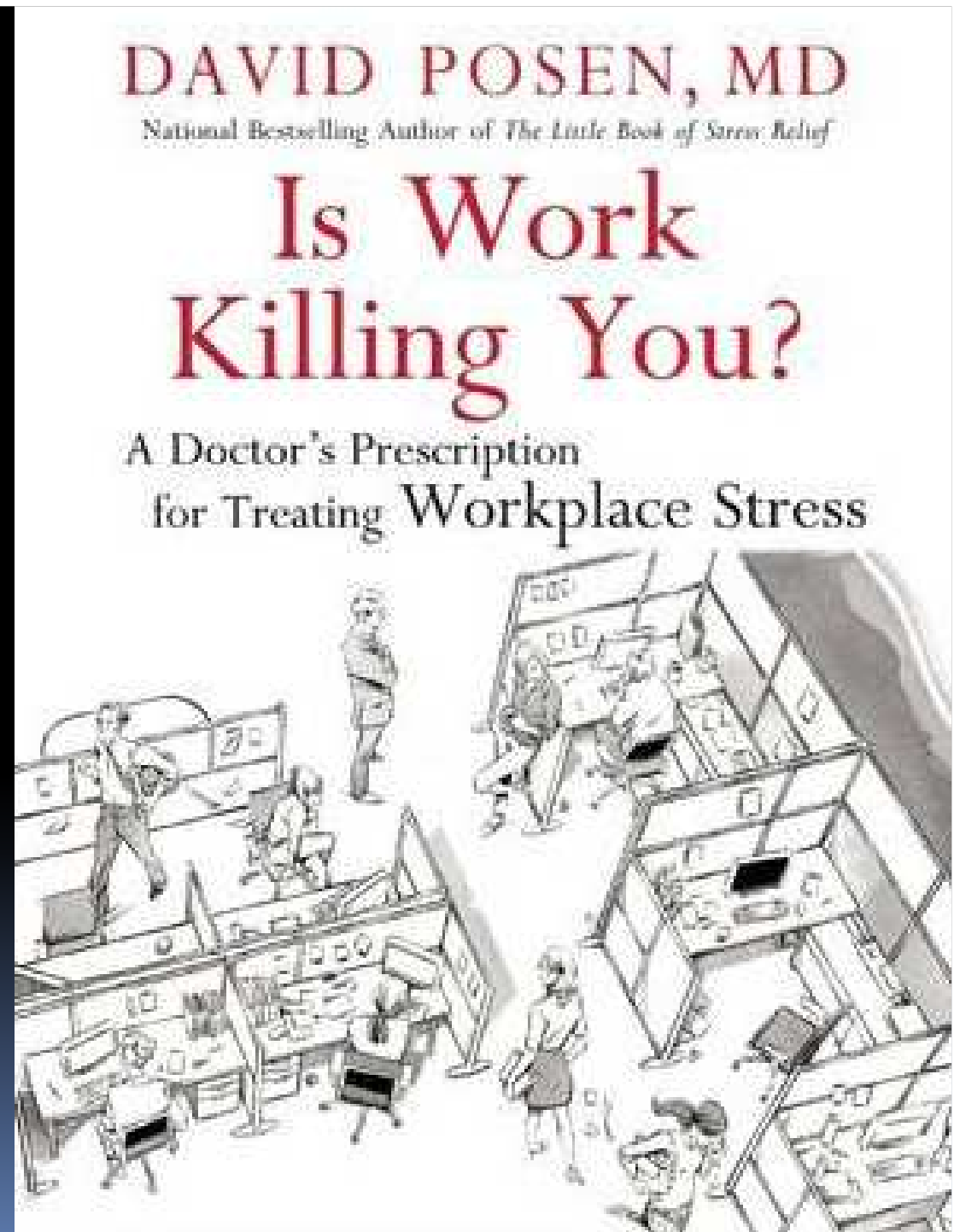
percentage of highly stressed employed population aged 20 to 64



“In Canada, in 2010, 27% of working adults reported that, on most days, their lives were ‘quite’ or ‘extremely stressful.’”

Source: Statistics Canada, General Social Survey, 2010.

Dr. David Posen, Is Work Killing You?: A Doctor's Prescription for Treating Workplace Stress, House of Anansi Press, Toronto (2013)



Is Work Killing You?

"There are two ways to reduce the stress. One is to get rid of what's there. Exercise, meditation, relaxation, a massage, medication such as tranquillizers, diversion and distraction, humour, laughter, and play can all be helpful. However, if you don't eliminate the source of stress (overwhelming workload, unrealistic deadlines, a difficult boss), you can jog and eat broccoli till the cows come home and you won't get ahead of the problem. The stress will keep accumulating as fast as you can dissipate it.

The best way to deal with stress is to get rid of what's there and eliminate the source." (page 291)

Dr. David Posen, Is Work Killing You?: A Doctor's Prescription for Treating Workplace Stress, House of Anansi Press, Toronto (2013)

Is Work Killing You?

"The first book ran the risk of being seen as blaming the victim, although, fortunately, no one took it that way. This book runs the risk of blaming the organization for all the stress. The truth is somewhere in the middle. It's a shared responsibility, but I have observed that an **increasing amount of the stress in recent years has been company-driven and organizations are doing precious little to own up to the damage they're causing on a daily basis.**" (page 321)

Dr. David Posen, Is Work Killing You?: A Doctor's Prescription for Treating Workplace Stress, House of Anansi Press, Toronto (2013)

EU H&S Climate:

- Due regulatory requirements (EU Directive 89/391/EEC), there has been a lot more tool development in Europe than in North America
- New discipline: **Work Organization Specialist** (in addition to H&S Professional, Occupational Hygienist & Ergonomist)
- The Committee of Senior Labour Inspectors (SLIC) has launched its European Campaign 2012 on psychosocial risks.
<http://www.av.se/SLIC2012/>

Mental Injuries Tool (MIT) Group:

- The Mental Injuries Tool group was established in 2009 out of a stakeholder sub-committee of worker representatives and the Occupational Health Clinics for Ontario Workers who were charged with "supporting worker representatives in taking action on prevention and workers' compensation".
- This sub-committee held a workshop in 2010 to select projects which could be developed jointly to address common concerns. The topic which received the most interest was mental injuries (workplace psychosocial risk factors; recognition & compensation for mental injuries).

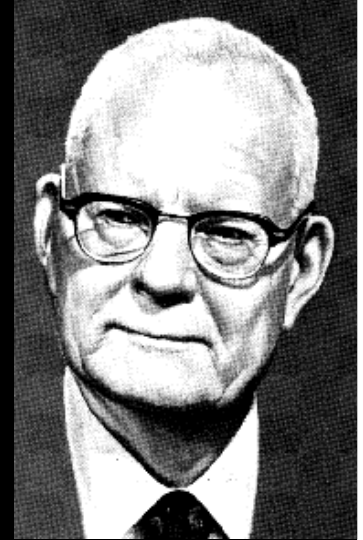
MIT group - who's involved:

- Laura Lozanski, CAUT
- Terri Aversa, OPSEU
- Sari Sairanen, Keith McMillan UNIFOR
- David Chezzi, Andréane Chénier, CUPE
- Nancy Johnson, Erna Bujna, ONA
- Valence Young, ETFO
- Gerry LeBlanc, Sylvia Boyce, USW
- Janice Klenot, UFCW 175/633
- Jane Ste. Marie, John Watson, OSSTF
- Kathy Yamich, Workers United Union
- Charlene Theodore, OECTA
- Tom Parkin, Workers Health and Safety Centre (WHSC)
- Sophia Berolo, University of Waterloo
- Ashley McCulloch, Carleton University
- Andy King, LOARC (Labour, OHCOW, Academic Research Collaboration)
- Maryth Yachnin, IAVGO
- Alec Farquhar, Kristen Lindsay, OWA
- Syed Naqvi, Ivan Bauer, Curtis VanderGriendt, Ted Haines, Mark Parent, Andre Gauvin, John Oudyk (OHCOW)

Sooooo....
How would you
go about
measuring
stress?

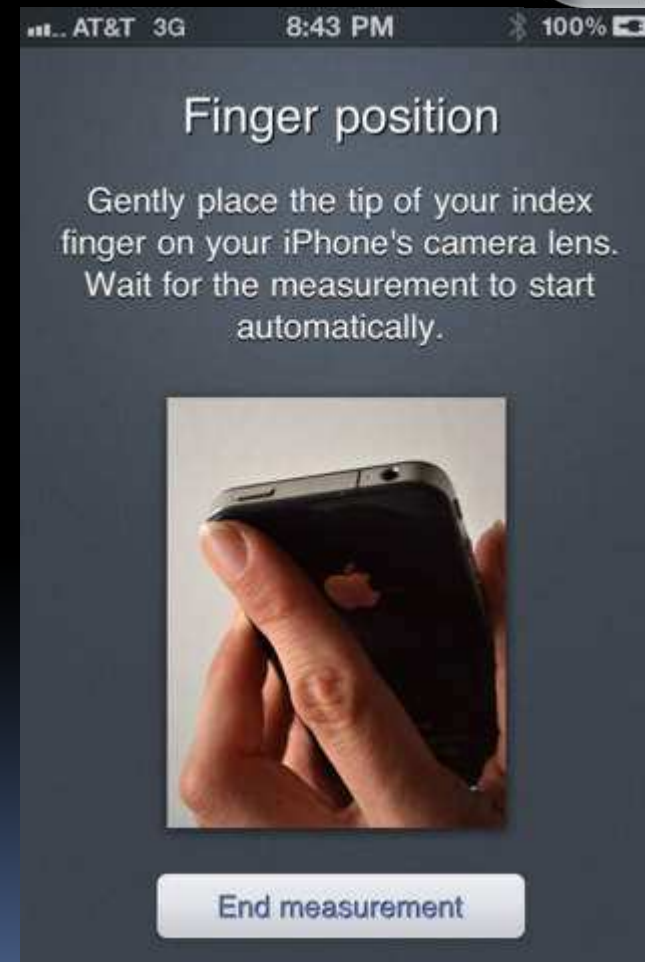
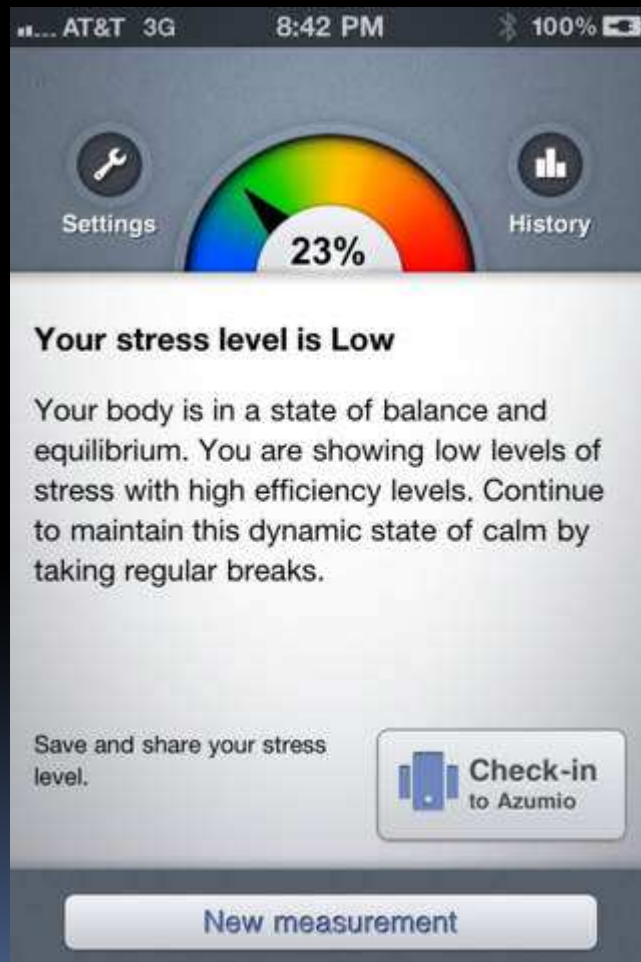


If you can't measure it ...



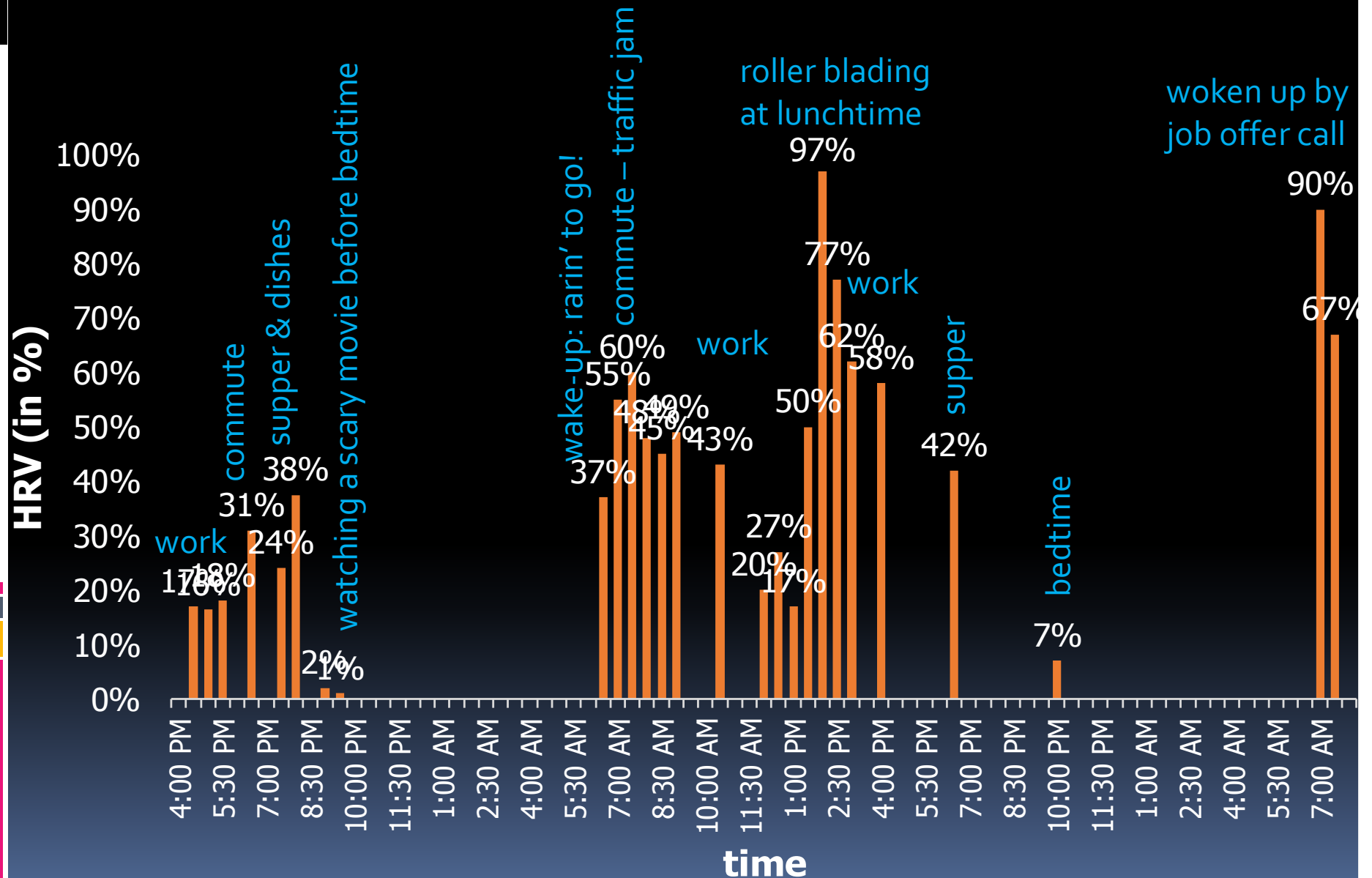
- Misquote from Deming
- Some of the most important things at work (in life) can't be measured (e.g. Valentine's)
- Objective and Subjective measures: objective bias (more scientific)

Stress Check App (Azumio) (measures heart rate variability)



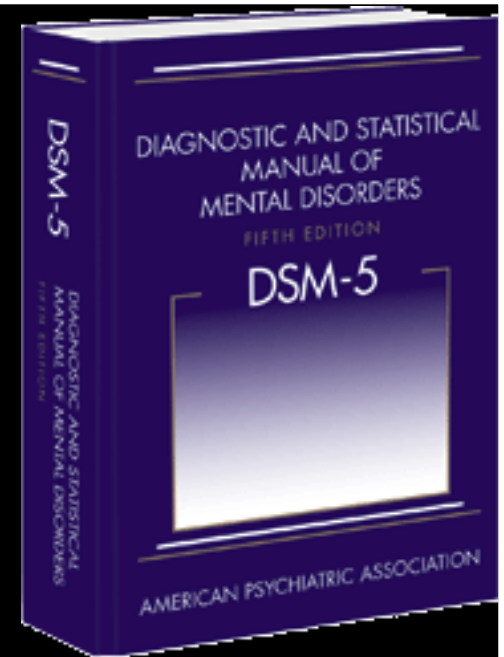
<https://play.google.com/store/apps/details?id=com.azumio.android.stresscheck&hl=en>
<https://itunes.apple.com/us/app/stress-check-pro-by-azumio/id439500612?mt=8>

Measurements over a 40 hr period



Psychological "Subjective" Measures:

- Remember, perceptions/symptoms are the "gold standard" (DSM-V)
- Diagnoses made on the basis of answers to a series of questions (some of which are observable by others; some not)
- Some questions don't work directly (... are you depressed?) and thus need to be questioned indirectly



<http://www.dsm5.org/Pages/Default.aspx>

DSM-5: Depression screening

1.	Little interest or pleasure in doing things
2.	Feeling down, depressed, or hopeless
3.	Trouble falling or staying asleep, or sleeping too much
4.	Feeling tired or having little energy
5.	Poor appetite or overeating
6.	Feeling bad about yourself—or that you are a failure or have let yourself or your family down
7.	Trouble concentrating on things, such as reading the newspaper or watching television
8.	Moving or speaking so slowly that other people could have noticed? Or the opposite—being so fidgety or restless that you have been moving around a lot more than usual
9.	Thoughts that you would be better off dead or of hurting yourself in some way

<http://www.psychiatry.org/File%20Library/Practice/DSM/DSM-5/Level2DepressionAdult.pdf>

MIT Group Reviewed Available Tools

- Looked at theories of jobs stress:
 - Job Demand – Control model (Karasek)
 - Effort – Reward Imbalance model (Siegrist)
 - Transaction Process model (Lazarus & Folkman)
 - Organisational Justice (Kivimäki et al)
- Looked at survey instruments and tried them out - compared experiences
 - UK-HSE, JCQ, GM@W, SOBANE and others ...

COPSOQ



Copenhagen **P**sycho**s**ocial
Questionnaire
(COPSOQ II - short version)

<http://www.arbejdsmiljoforskning.dk/Sp%C3%B8rgeskemaer/Psykisk%20arbejdsmilj%C3%B8.aspx?lang=en>

COPSOQ factors:

Demands

- Quantitative demands
- Work pace
- Emotional demands

Work Organization

- Influence
- Possibilities for development
- Meaning of work
- Commitment to the workplace

Work Values

- Trust regarding management
- Justice and respect

Work Relationship

- Predictability
- Recognition
- Role clarity
- Quality of leadership
- Social support from supervisor

Work-Life Balance

- Job satisfaction
- Work-family conflict

Offensive Behaviours

- Undesired sexual attention
- Threats of violence
- Physical violence
- Bullying

COPSOQ health measures:

- Self-rated overall health status
- Burnout
- Stress
- Sleeping troubles
- Somatic stress symptoms
- Cognitive stress symptoms

Physical safety factors:

- safety hazards
- workstation ergonomics
- physical factors (noise, lighting)
- thermal comfort
- air quality
- dangerous chemicals
- biological hazards
- radiation (ionizing and non-ionizing)
- driving hazards
- working alone

Other additions:

- two more offensive behaviours:
 - “discrimination” (undefined – ask respondent for definition)
 - “vicarious offensive behaviours” (ask respondent to identify all)
- a global question rating the psychological health & safety climate
- questions about behaviour based safety attitudes

What we are not trying to do:

- We intentionally left out questions about depressive symptoms and psychological morbidity - **avoid dangers of "diagnosing"/labeling** individuals
- not trying to create a report-card - rather an **opportunity for dialogue** (by "objectifying" issues - depersonalize)
- not including **non-occupational causes of stress** (if there are symptoms that aren't associated with occupational risk factors, then by default they're non-occupational) - not trying to diagnose or address non-occupational issues
- the survey is not focussed on assessing individual coping skills ("resilience", wellness), nor, mental illness supports (WSIB recognition, EAP, RTW, etc.) - these may be part of the solution (a response to survey results); rather, the survey is primarily focussed on identifying **root causes**

LEVELS OF PREVENTION



Primary



Secondary



Tertiary

Prevention levels:

Primary prevention (at the source)

- job design, organizational adaptations, flexibility – collective agreement, H&S Committee, management policy/program

Secondary prevention (early detection)

- educate people about symptoms and on coping skills – wellness programs, screening

Tertiary prevention (help the victims)

- get good treatment, compensation recognition, return to work support – EAP, therapy

Prevention

prevention level	individual	organization
	primary - coping and appraisal skills	primary -
	secondary - wellness, relaxation techniques (mindfulness)	secondary - awareness, screening (surveys)
	tertiary - therapy, counselling, medication, support	tertiary - Employee Assistance Programs (EAP), Return to Work



Primary
Prevention

Wellness
programs,
awareness
training

Employee
Assistance
Program

Accommodate
the worker
(RTW)

How do we do it?

1. Recruit a coordinator/champion in each unit
2. Get buy-in (union, employer, establish steering committee)
3. Administer survey (define units, collect e-mail lists, Dilman's 5 contact survey administration, spreadsheet report production, identify top 3 issues)
4. Begin dialogue to improve top 3 issues

Survey Co-ordinator Information Package:



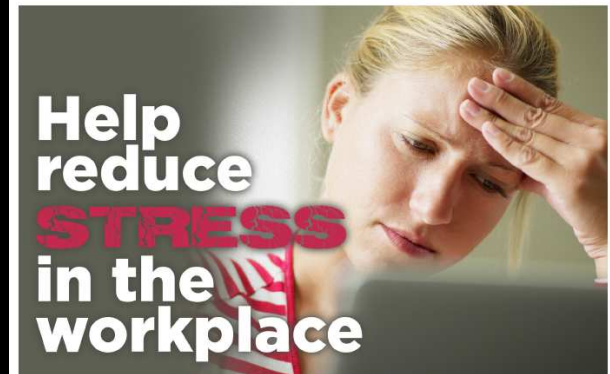
Occupational Health Clinics
for Ontario Workers Inc.



Action on Workplace Stress—
2012/2013

Highest Ranking and Co-ordinator
Information Package

Poster:



**Help reduce
STRESS
in the workplace**

Take Action on Workplace Stress by Participating in a Quick Survey

We are launching an important survey on stress in the workplace which is becoming a major concern affecting more and more workers.

As a result, we strongly encourage each of you to participate in this electronic survey about stress that will be distributed to all members in the upcoming weeks.

It takes **less than 15 minutes** and is completely **confidential**!

Participation is entirely voluntary, but the more of us who complete the survey the stronger the results will be.

Our participation will put us on the leading edge of workplace health and safety in Canada, where psychosocial hazards are considered as important as traditional health and safety ones. The information we gather will also provide a baseline for our sector to use in order to improve workplace health conditions and will contribute to a larger mental health strategy so that we may reduce the risks for all.

The Copenhagen Psychosocial Questionnaire (COPSQ)

The survey is being conducted with the help of the Occupational Health Clinics for Ontario Workers (OHCOW). Your answers will be kept in strict confidence and only group results will be reported.

The survey will identify which specific workplace stress factors affect workers' health outcomes. Following the results, we will work with the employer to improve workplace health issues.

If you have any questions please contact:

Unit Coordinator Name: _____

Tel./Email: _____

and/or _____

http://www.opseu.org/bps/social/workplace_stress/index.htm

Thank you for your anticipated support to improve our working conditions!

Videos:



Stress at workplace

https://www.youtube.com/watch?v=F49TF_aSClk

<http://www.youtube.com/watch?v=LREe5M5Q8co>

<http://www.youtube.com/watch?v=hzkgt3T32wk>

<http://www.youtube.com/watch?v=k26T28scAyg&feature=youtu.be>

<http://www.youtube.com/watch?v=obWnO3hemCQ>

Guidebook:



<http://www.ohcow.on.ca/mit>

Action on Workplace Stress: Mental injury prevention tools for Ontario workers

Introduction: Worker Call to Action

PART 1—Why should we care?

PART 2—"Workplace Stress": Assumptions, terminology, and approaches

PART 3—What are other jurisdictions doing?

PART 4—What are my legal rights and protections? (focus on Ontario)

PART 5—What does a workplace action plan look like?

PART 6—Resources

Progress to Date:

- The MIT group has administered the survey in two types of venues, first we piloted the survey and later administered the final product at various **union conferences/workshops** (in all at **15 such events** collecting **over 1600 surveys**).
 - first conference was in October 2010
 - we did 3 conferences in 2011 (the main pilots),
 - 6 workshops and two conferences in 2012 (including the launch of the final survey in Oct), and
 - two conferences and two workshops in 2013.

Progress to Date:

- Secondly, various unions have organized surveys of specific workplace locals/units with **OPSEU** doing a campaign of **55 bargaining units** for a total of over **2200** completed surveys (pilot in Spring 2012, full launch in Spring 2013), and **6 other bargaining units** (from Apr 2012 to Sept 2013) for a total of just over **200** completed surveys.
 - A couple of these were “spontaneous units” where someone got a hold of the survey, copied it and distributed among their members and came to us to help with the analysis.
- There are about another **6 bargaining units** in the **organizational stage** right now.
- We have had a number of enquiries from **employers** (some even non-union) but none have materialized as yet.

Mary Deacon, Chair, Bell Mental Health Initiative (Oct 24/13*)

- A lot of organizations have the attitude that they can't go down this road because it leaves the organization vulnerable to criticism.
- They have to accept that this is a journey - need to admit the organization is not perfect - we will make progress but also will make mistakes & learn.

* Rotman School of Business - 7th Annual Mental Health in the Workplace Forum (Oct 24/2013)

Once you identified issues, what next? ...

- List the top 3 risk factors associated with symptoms
- Refer to resources (plenty online) and don't be afraid to ask for help
- Best not to work alone but with a representative steering committee
- "let the conversation begin ..."

International Labour Organization (ILO) Stress Prevention Guidebook:

- checkpoint format
- lists specific hazards
- identifies prevention strategies



http://www.ilo.org/global/publications/books/forthcoming-publications/WCMS_168053/lang--en/index.htm

ILO Checkpoint example

CHECKPOINT 6

- Adjust the total **workload (quantitative demands)** taking into account the number and capacity of workers.

HOW

1. Assess individual and team workloads through observation and discussion with workers to determine whether change is necessary and feasible.
2. Reduce unnecessary tasks such as control operations, writing reports, filling in forms or registration work.
3. ...

[Arbetsmiljöarbete](#)[För dig som är...](#)[Aktuellt](#)[Interaktiva utbildningar](#)[Lag och rätt](#)[Inspektion](#)[Om oss](#)[Publikationer](#)[Statistik](#)[Pressrum](#)[Temasidor](#)[Frågor och svar](#)[Arbetsmiljöcertifierade](#)[Blanketter](#)[Checklistor](#)[Diarieförda ärenden](#)[Arkiv](#)[Länkar](#)[Other Languages](#)[Startsida](#)PSYCHOSOCIAL RISK
ASSESSMENTS

Campaign on psychosocial risks at work in 2012

A joint inspection campaign on psychosocial risks will take place in the EU-Member States during 2012. The campaign documents are presented on this website in all EU languages.

Background

The Committee of Senior Labour Inspectors (SLIC) agreed in May 2010 to develop a campaign on psychosocial risks for delivery in 2012. Sweden was to lead the project of planning the campaign with assistance of a Working Group. The aim of the project is "Development of an inspection toolkit for targeted interventions on occupational health and safety".

Self-evaluation tool for employers

PSYCHOSOCIAL RISK
ASSESSMENTS

The idea of this interactive Self-evaluation tool is to help the employers to investigate and assess the psychosocial risks at work.

To the self-evaluation in:

- [English](#)
- [Swedish](#)



Country Reports

PSYCHOSOCIAL RISK
ASSESSMENTS

- [Country report I](#) (Eng)
- [Country report II](#) (Eng)
- [Instructions](#) (Eng)

e.g. Hospital Guidance tool

- High **emotional demands** prevention activities:
 - Feedback, coaching and acknowledgement from colleagues and managers
 - Specific objectives for work (when is the work result good enough/success criteria?)
 - Consensus and practice with regard to care and treatment
 - Overlap/transfer for shift changes
 - Possibility of withdrawing (a place for privacy)

extracted from: http://www.av.se/dokument/inenglish/European_Work/Slic%202012/English_7.pdf

MHCC

PH&S - An Action Guide for Employers



PSYCHOLOGICAL HEALTH & SAFETY

AN ACTION GUIDE FOR EMPLOYERS

January 2012

<http://www.mentalhealthcommission.ca/English/node/505>

Guarding Minds @ Work

[Cliquez ici pour Français](#)

[GM@W Documents & Resources](#) | [GM@W Dashboard Login >](#)



Home

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[What is Psychological Health & Safety?](#)

[Why is Psychological Health & Safety Important?](#)

[The 13 Psychosocial Factors in GM@W](#)

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[How to Prepare to Implement GM@W](#)

[GM@W Documents & Resources](#)

[GM@W Project Team](#)

[Contact Us](#)

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SIGN UP FOR THE GM@W DASHBOARD TO ACCESS THE GM@W ONLINE SURVEY >

Guarding Minds @ Work

Canadian Centre for
Occupational Health and Safety
135 Hunter Street East
Hamilton ON Canada L8N 1M5
Phone: 1-800-668-4284,
905-570-8094
Fax: 905-572-4500

Guarding Minds @ Work:

A Workplace Guide
to Psychological
Health & Safety



Welcome to Guarding Minds @ Work 2.0

GM@W has been updated in order to provide clearer language, improved functionality and greater consistency with current and emerging regulatory and legal standards and practices pertaining to workplace psychological health and safety. The GM@W Survey has five new questions and results are compared with a 2012 sample of 4307 working Canadians across a nationally representative sample of industries and geographical regions.

Existing active GM@W Online Surveys can continue to be administered (they will not have the new questions) and GM@W Reports can still be generated (they will have the 2012 national sample comparison data for the new questions, but not the corresponding data for your organization).

<http://www.guardingmindsatwork.ca/info/index>

What is Guarding Minds @ Work?

Guarding Minds @ Work (GM@W) is a unique and free, comprehensive set of resources designed to protect and promote psychological health and safety in the workplace. GM@W resources allow employers to effectively assess and address the 13 psychosocial factors known to have a powerful impact on



**The 13 Psychosocial
Factors in GM@W**

[READ MORE >](#)

Works Well - CMHA

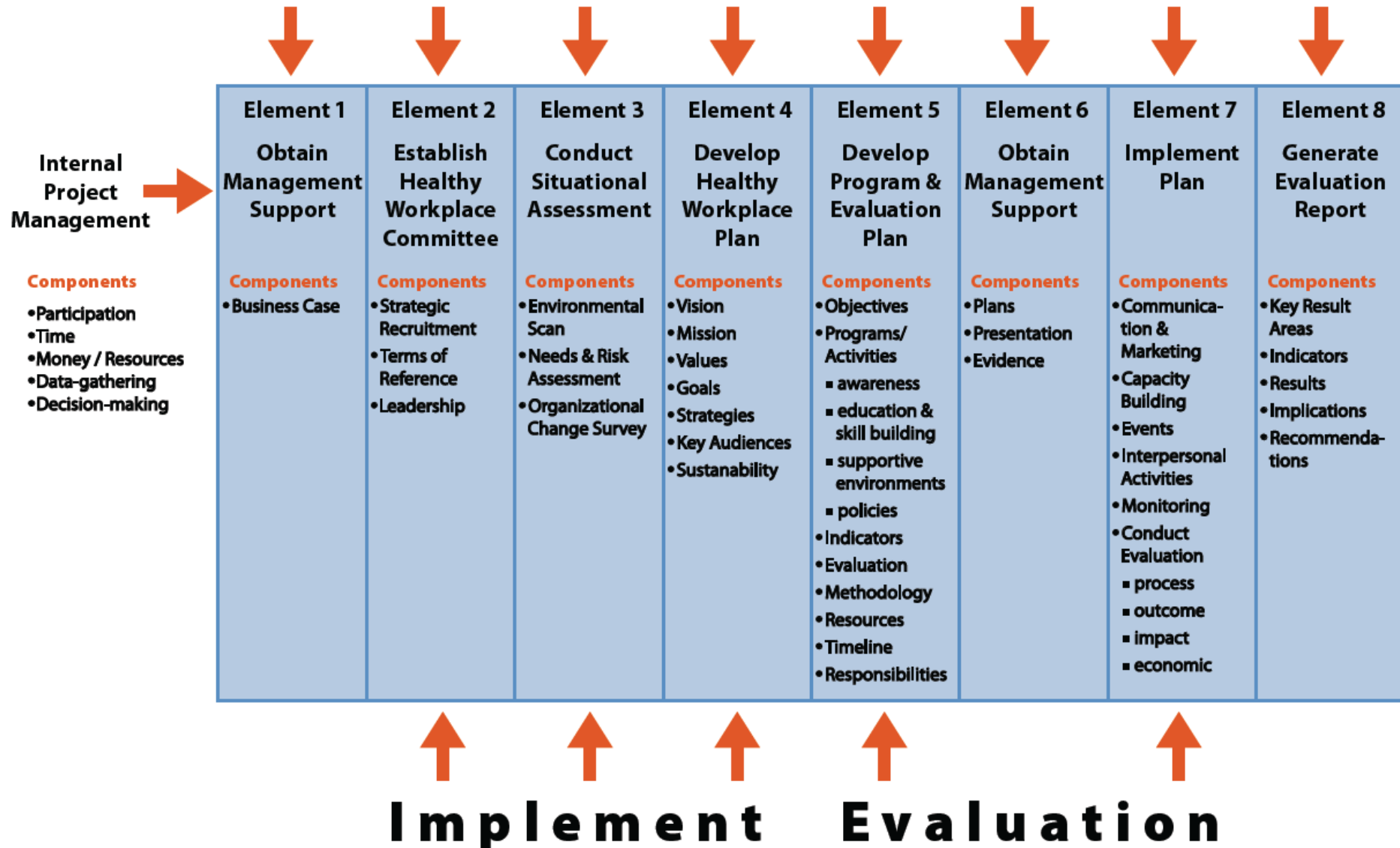
- New booklet/interactive website:
Workplace Mental Health Promotion: A
How-To Guide (2010)

<http://wmhp.cmhaontario.ca/>

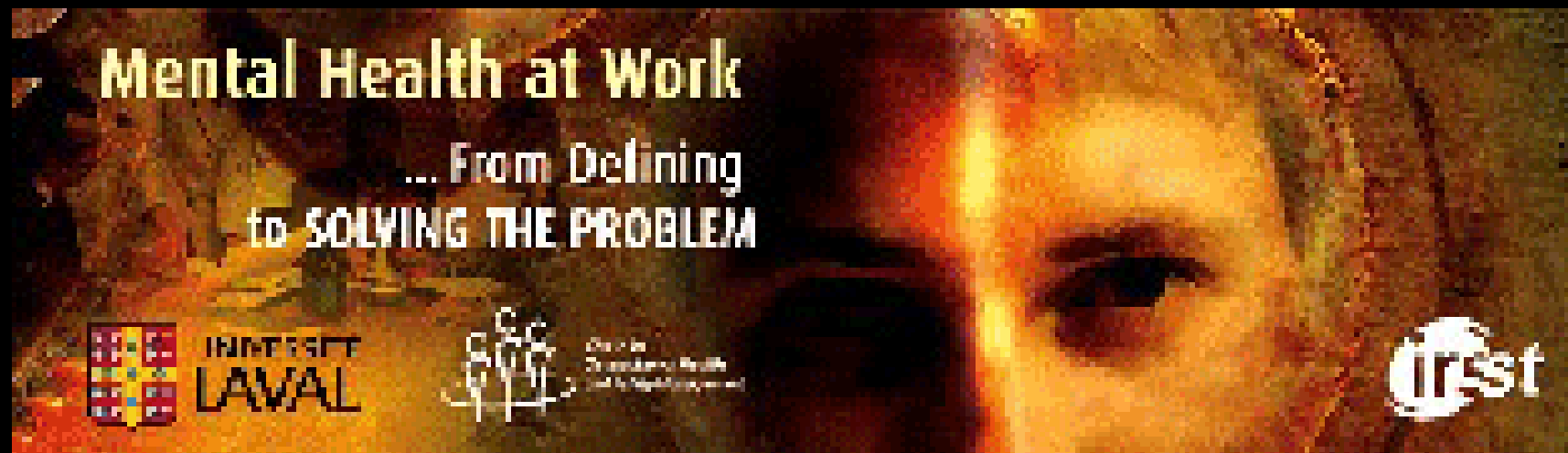
- two sections:
 - core concepts & issues
 - comprehensive workplace health promotion

CMHA plan:

Workplace Program Management



Laval Business group (business case)




Mental Health at Work
... From Defining
to SOLVING THE PROBLEM

INTESSAT
L'AVAL

CGST
Centre de
Généralisation
des
Techniques
de
Santé
Psychologique
au
Travail

irst



BOOKLET 1
Scope of the Problem
How Workplace Stress IS SHOWN

BOOKLET 2
What Causes the Problem?
The Sources of WORKPLACE STRESS

BOOKLET 3
Solving the Problem
Preventing Stress IN THE WORKPLACE

<http://www.cgsst.com/eng/publications-sante-psychologique-travail/trousse-la-sante-psychologique-au-travail.asp>



MIT

MENTAL INJURY
TOOLKIT

PRESENTATIONS
FROM LAUNCH EVENT

MIT VIDEO SERIES



Mental
INJURY

TOOLS FOR ONTARIO WORKERS

Action on Workplace Stress

**A Worker's Guide to Addressing
Workplace Causes of Mental Distress**

<http://www.ohcow.on.ca/mit>

Action on Workplace Stress

This guide and resource kit will provide workers a basic understanding and a place to start to learn about workplace stress and what to do about it. The guide gives definitions, common causes of mental distress, legal frameworks (focusing on Ontario), possible actions to take, and resources available. It is an introduction and action guide created by workers for workers.

Latest Updates: Click on **MIT Video Series** to get links to all available Videos.

Note: Click headings for content.

Introduction: Worker Call to Action

Part 1 — Why Should We Care?

Workers and employers are busy enough, so why should anyone take action to deal with either the causes of or effects of workplace stress? Well, workers care because workplace factors can cause, contribute to, or worsen our mental distress, which may affect our physical or mental health. Employers care because they want their workers to be well, because when workers are not well the business is affected.

What the MOL can do to help:

1. Recognize that workplace psychosocial hazards are covered by 25(2)(a)&(h) and 4.1(2) that related orders may be issued for specific violations
2. Publish a guide for workplaces to identify their responsibility, refer them to available standards and tools
3. Blitz office work environments, healthcare, retail for psychosocial hazards (use Danish & Dutch tools)

Prevention

prevention level	individual	organization
	primary - coping and appraisal skills	primary - MIT tools
	secondary - wellness, relaxation techniques (mindfulness)	secondary - awareness, screening (surveys)
	tertiary - therapy, counselling, medication, support	tertiary - Employee Assistance Programs (EAP), Return to Work

Thank you!