

Policy Guideline

Psychological Health (WHS)

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Summary Ensuring all SA Health staff are emotionally supported and well, ensures SA Health retains productive and engaged workers. SA Health recognises the risks of psychological hazards and actively works to prevent harm to worker's psychological health by managing psychological risks and promoting psychological wellbeing.

This policy guideline describes what psychological health is, common workplace hazards that create a risk to psychological health and the importance of systematically identifying, assessing and eliminating or managing these hazards. The policy guideline promotes the development of a psychologically healthy organisation to protect workers psychological health and the importance of managers understanding the prevalence of mental illness.

Keywords Psychological Health , Mental Health , Psychological Hazards, Psychological Risks, Stress, Employee Assistance Program, Healthy Organisation, Supportive Management, Communication, OHS, OHSW, WHSIM, Occupational, Health, Safety, Welfare, Injury, Management, Work, Worker, Work Health Safety, WHS, Officers, WHS defined Officers

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Does this policy amend or update an existing policy? **N**
Does this policy replace an existing policy? **N**
If so, which policies?

Applies to *All SA Health Portfolio*

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EPAS Compatible *NA*

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Contents Page

1.	Objective	4
2.	Scope	4
3.	Principles.....	4
4.	Detail	5
5.	Roles and Responsibilities	9
6.	Reporting.....	13
7.	EPAS.....	13
8.	National Safety and Quality Health Service Standards	13
9.	Other	14
10.	Risk Management	14
11.	Evaluation	14
12.	Definitions	14
13.	Associated Policy Directives / Policy Guidelines	15
14.	References, Resources and Related Documents.....	15

Psychological Health (WHS) Policy Guideline

1. Objective

Ensuring all SA Health staff are emotionally supported and well, ensures SA Health retains productive and engaged workers. SA Health recognises the risks of psychological hazards and actively works to prevent harm to worker's psychological health by managing psychological risks and promoting psychological wellbeing.

This policy guideline is designed to ensure SA Health meets the legislative requirements of the *Work Health and Safety Act 2012* (SA) and its regulations that place a duty of care on all persons, as far as is reasonably practicable, to identify and address all foreseeable hazards including psychological health hazards.

This policy guideline describes what psychological health is, common workplace hazards that create a risk to psychological health and the importance of systematically identifying, assessing and eliminating or managing these hazards. The policy guideline promotes the development of a psychologically healthy organisation to protect workers psychological health and the importance of managers understanding the prevalence of mental illness.

This policy guideline is to be read and administered in conjunction with the [SA Health Policy Directive – Hazard Identification and Risk Management \(WHS\)](#) and SA Health WHSIM Procedure – Psychological Health Hazard Identification and Management.

2. Scope

This policy guideline applies to all SA Health workers.

This policy guideline does not provide detailed direction or information on managing psychological injury or non-work related disability. Reference may be made to [SA Health Policy Directive – Management of Work Injured Employees \(WHS\)](#).

3. Principles

In accordance with the [SA Health Policy Directive – Work Health, Safety and Injury Management \(WHS\)](#), SA Health will take reasonably practicable steps to develop and implement a systematic and consistent approach to the identification of psychological hazards and management of risks to ensure that workers and other persons are not exposed to health and safety risks arising from psychological hazards.

It is recognised that exposure to psychological hazards can lead to workers experiencing stress. Prolonged stress at work will, in some cases, result in mental health disorders or may exacerbate existing disorders. Even when workplace stress does not lead to a mental health disorder it is recognised that stress can have an impact on physical health and other aspects of people's lives outside of work.

SA Health recognises that developing a psychologically healthy organisation (through primary interventions) is the most effective method of eliminating and reducing the impact of psychological hazards on the organisation and the individual. SA Health will reinforce

the use of primary interventions with the use of individually focused strategies such as training (secondary interventions) and the support and treatment of individuals after exposure to psychological stressors (tertiary interventions).

4. Detail

4.1 What is Psychological Health and a Psychologically Healthy Organisation?

Psychological Health is a state of wellbeing in which the individual can cope with the stresses of life, develop strong and positive relationships and work productively as a member of society.

The best way to have psychologically healthy workers and a psychologically healthy organisation is to provide good work. This will ensure SA Health retains productive and engaged workers and protects workers from injury. Good work is characterised by work that is meaningful, varied, provides an appropriate balance between effort and reward and allows the worker a sense of control. Workers participating in good work feel appreciated and supported by their managers. By focusing on the organisational systems that create psychologically healthy workplaces and good work, SA Health aims to enhance workers' overall mental health and wellbeing and support workers to be productive members of our workplace and community.

The psychological health of workers must be embedded in the structure and functioning of the organisation. Psychologically healthy organisations are characterised by:

- A purposeful organisation with a culture of respectful behaviour;
- Organisational justice and fair and equitable systems of work;
- Supportive leadership;
- Positive team relationships;
- Reasonable demands (and manageable workloads);
- Control and a say over how to do the work;
- Clear reporting lines;
- Meaningful work and role clarity;
- Physically safe work environments;
- Regular feedback and performance discussions;
- Opportunities to use existing skills and develop new skills;
- Job control and input from workers in decision making;
- A process for identifying and managing psychological risks.

4.2 Psychological stress and psychological hazards

Psychological stress is experienced when the individual's capacity to cope is exceeded by the demands placed on them. It is recognised that exposure to psychological hazards may lead to workers experiencing stress. Prolonged stress at work may result in mental health disorders or may exacerbate existing disorders. Even when workplace stress does not lead to a mental health disorder it is recognised that stress can have an impact on physical health and other aspects of peoples' lives outside of work. There is also a recognised link between psychological injury and the development of physical symptoms and injuries, such as musculoskeletal disorders.

Psychological hazards can be divided into psychosocial hazards (organisational or person focused) and physical hazards (environmental) that can both potentially cause stress and

psychological injury. Prolonged or extreme job stress can lead to a decline in overall psychological health and potentially the development of mental health disorders.

Table 1: Example common psychological hazards classified by type

Potential Hazards	Organisational	Leadership & Management	Job	Relationships
Job Resources (lack of resources may increase stress)	Purpose of organisation Organisational justice Mental health support	Leader & manager support Feedback & recognition	Role clarity & purpose Job control Resources (time, people, equipment) Job-person fit	Co-worker support
Job Demands (excess demands may create stress)			Workload Cognitive demands Emotional demands Conflicting demands	Conflict (bullying and harassment)
Additional factors (may increase stress)	Unsafe work environment (dirty, noisy, isolated or potentially violent) Existing physical and mental health of worker Work-life balance Job security			

Evidence of workers experiencing job stress through exposure to psychological hazards may be seen through:

- Excessive or unusual patterns of sick leave;
- High staff turnover and burnout;
- Withdrawal behaviours (e.g. not participating in work meetings and discussions);
- Negative behaviours (e.g. disrespectful behaviour or misconduct) ;
- Presenteeism (e.g. workers attending work while they are unwell and being unproductive);
- Performance issues;
- Patient safety incidents;
- Safety errors and physical injuries;
- Mental illness (with anxiety and depression the most common disorders).

4.3 Mental Health

Many workers will experience mental illness during their lives and SA Health aims to reduce the stigma of mental illness in the workplace and support workers to remain at work. SA Health recognises the importance of work in restoring mental health and aim to provide a supportive environment for this to occur. To achieve this aim, SA Health encourages the participation of managers and workers in educational mental health programs to reduce stigma and help all workers talk openly about mental illness and seek support from available services.

4.4 Managing the Risks

In accordance with [SA Health Policy Directive - Hazard Identification and Risk Management](#), the management of SA Health LHN / HS/ BU / WPs will systematically and proactively eliminate or minimise psychological hazards at work. All line managers must identify psychological hazards in their area and complete a risk assessment on these hazards.

SA Health work environments are commonly characterised by features that strongly correlate to psychological hazards, such as highly emotional work, high demands and low control over workflow. Therefore it can be difficult to completely eliminate all hazards that have the potential to impact on psychological health, however there is still a responsibility to minimise risks from psychological hazards using appropriate controls.

There are three main categories of control measures to eliminate or minimise psychological hazards. The following three categories of controls work together to create a psychologically healthy organisation and protect the worker from harm:

1. **Primary interventions** support positive organisational culture and systems of work. Primary interventions are systematic processes to design work that is clearly defined, meaningful and achievable within an environment of supportive leadership and positive behaviour. Primary interventions are the most effective way to eliminate psychological hazards and prevent injury.
2. **Secondary interventions** focus on increasing the individual worker's capacity to cope with psychological hazards they may potentially be exposed to. These interventions may involve training in skills such as conflict resolution, resilience, mindfulness or stress management. These interventions are a helpful addition and support primary interventions.
3. **Tertiary interventions** are implemented once exposure to a psychological hazard has occurred. The SA Health Employee Assistance Program (EAP) and Return to Work services are examples of tertiary interventions. Tertiary interventions are designed to reduce the impact of the hazard on the individual and/or to assist in recovery from psychological injury.

It is important to note that managing risks to psychological health does not preclude reasonable management actions such as managing poor performance.

4.5 Hazard Identification

SA Health line managers will identify any psychological hazards in the work area. Hazards are things or situations which have the potential to cause harm including psychological injury.

Psychological hazards can be identified through:

- Organisational climate surveys and other surveys of worker satisfaction;
- Regular Worksite Safety Inspections that involve discussions with workers;
- Observations of worker behaviour and workplace interactions;
- Sick leave patterns and turnover;
- Discussions with workers (e.g. team meetings and individual discussions);
- Complaints and grievances from workers;
- Incident and injury data / reports.

When a psychological health hazard is reported or identified, a preliminary assessment should be conducted by the manager, in consultation with the worker or workgroup

involved. Managers need to ensure natural justice and ensure the privacy of all individuals if the actions (or alleged actions) of another person are involved.

Refer to SA Health WHSIM Procedure – Psychological Health Hazard Identification and [SA Health WHSIM Procedure – Worksite Safety Inspections](#) including the associated checklists for further guidance and a step-by-step process on identification and management of psychological hazards.

4.6 Risk Assessment

When it is not possible to eliminate an identified psychological hazard immediately a risk assessment must be conducted. The risk assessment should be completed by the manager in consultation with affected workers and Health and Safety Representatives (HSR), where relevant, to ensure suitable risk control measures are identified and implemented.

For each hazard the risk assessment should:

- Identify whether the hazard is likely to result in psychological injury;
- Identify which workers are most at risk of exposure to the hazard;
- The consequence if exposure occurs;
- The likely outcomes for workers from exposure to the hazards;
- Determine the risk control measure(s) to implement;
- Review the effectiveness of existing control measures.

4.7 Risk Control Measures

When managing psychological hazards appropriate risk control measures must be implemented to eliminate or reduce the risks through primary interventions that improve organisational systems and reduce worker distress. Where the risk is unable to be eliminated, consideration should be given to how primary and secondary interventions may be implemented to reduce the risk. Refer to the SA Health WHSIM - Psychological Hazard Identification Form for examples of controls.

4.8 Monitor and Review

Any implemented control measure must be reviewed in consultation with relevant workers to ensure that it remains adequate.

Steps in the review may include:

- information from workers via surveys and consultation;
- a review of accident and incident data (stress-related);
- a review of psychological health claims data;
- observations and anecdotal reports.

4.9 Training and Education

In order to reduce the risk to a worker's health and safety arising from psychological hazards in the workplace, appropriate information, training, instruction and supervision must be provided to any worker on the following:

- Clear information on the work to be performed and results to be achieved;
- The standards by which the work will be assessed;
- The purpose of Performance Review and Development (PR&D);
- Information about respectful behaviour in the workplace;

- Information about the likely psychological hazards they may encounter in their work;
- Information about how to report a psychological hazard;
- Information about existing strategies to reduce the risk of psychological injury;
- Information about the Employee Assistance Program (EAP) and how to access it.

Induction and the Performance Review and Development (PR&D) meetings are appropriate times to discuss these issues in depth, with regular follow up discussions through team meetings and on the job interactions with managers. For more information refer to [SA Health Policy Directive – Induction and Orientation](#) and [SA Health Policy Directive – Performance Review and Development](#).

4.10 Consultation and Communication

All affected workers, in conjunction with their Health and Safety Representatives, should be consulted when identifying psychological hazards and developing solutions to these hazards.

4.11 Incident and Injury Management

In accordance with [SA Health Policy Directive – Work Health Safety Reporting and Investigation](#) efficient and timely hazard and incident reporting, investigation and resolution is an integral component of a successful and compliant safe work system.

All WHS hazard, incidents with injury and/or no harm must be reported on the SA Health Safety Learning System (SLS) or Incident Report and Quick Assessment (IRQA) in SA Ambulance Service (SAAS). Refer to [SA Health Procedure - Reporting and Investigating WHS Hazards and Incidents](#) and [SA Health Flowchart – Work Health Safety Incident Reporting and Investigation](#) for the step by step process.

Where a psychological injury has been sustained by a worker, the injury must also be reported to WHS Injury Management on 1800 702 264. All SAAS workers must report the injury to the SAAS State Duty Manager on 1300 886 268. All injuries must be reported before the end of the shift or within 24 hours, regardless of whether a claim for workers compensation will be made.

4.12 Records Management

SA Health is accountable to maintain and protect the integrity and accessibility of all official documents and records by ensuring SA Health LHN/HS/BU and workplaces have a robust document control and records management system.

All official WHSIM records must be retained either centrally or locally in accordance with *Work Health Safety Regulations 2012* (SA) and disposed of in accordance with GDS30 – General Disposal Schedule (State Records) and [SA Health Policy Guideline - System Documentation Management \(WSIM\)](#).

5. Roles and Responsibilities

In accordance with [SA Health Policy Directive – Roles, Responsibilities and Governance \(WHS\)](#), the following outlines the respective roles of relevant parties in the context of this Policy Guideline:

5.1 Chief Executive / Deputy Chief Executive

Will take reasonably practicable steps to:

- Provide leadership in reducing psychological risks and injury;
- Exercise due diligence to ensure compliance with the intent of this Policy Guideline;
- Establish awareness and accountability for the implementation of this Policy Guideline.

5.2 Chief Executive Officers / Chief Operating Officers (LHN / HS / BU)

Will take reasonably practicable steps to:

- Provide leadership in reducing psychological risks and injury;
- Exercise due diligence to ensure compliance with the intent of this Policy Guideline;
- Provide financial and physical resources needed for the implementation and support of this Policy Guideline.

5.3 Executive Directors / Directors (LHN / HS / BU)

Will take reasonably practicable steps to:

- Provide leadership in reducing psychological risks and injury;
- Exercise due diligence to ensure compliance with the intent of this Policy Guideline;
- Demonstrate an understanding of and a commitment to the systematic hazard identification and risk management process for psychological hazards;
- Provide direction and support to all persons, within appropriate delegations of authority, to fulfil their responsibilities for the management of psychological hazards;
- Ensures workers are consulted while undergoing organisational change;
- Provide facilities and resources to support psychologically safe working environments for workers;
- Ensure that managers and supervisors understand their roles and responsibilities in relation to developing and implementing psychologically safe systems of work which maximise worker well-being and minimise unnecessary distress and risk of psychological injury;
- Ensure that all workers are provided with such information, instruction, training and supervision as are reasonably necessary to ensure they are safe from risks to psychological health and psychological injury in the workplace;
- Monitor indicators of morale and distress and resource appropriate action where intervention is needed.

5.4 Site Managers / Line Managers / Supervisors / Team Leaders

Will take reasonably practicable steps to:

- Provide leadership in reducing psychological risks and injury;
- Exercise due diligence (where relevant) to ensure compliance with the intent of this policy guideline;
- Consult with workers and workplace Health and Safety Representatives during hazard identification and risk management for psychological hazards;
- Undertake risk assessment of identified psychological hazards
- Implement control measures to minimise or eliminate risks;
- Provide workers and other persons with information and access to information about departmental and worksite policies and procedures which may protect their psychological health;

- Ensure psychological health accidents/incidents are reported and investigated;
- Evaluate the effectiveness of existing risk controls and treatments;
- Use management practices that are supportive of psychological health within the worksite, including performance review and development, acting respectfully and managing disrespectful behaviour;
- Manage psychological health issues appropriately, including the demonstration of respect for different cultural perspectives;
- Consult with, where appropriate, elected health and safety representatives and workers prior to changes to work place practices and/or the work environment that may affect their psychological health and safety;
- Participate in mental health awareness training when available.

5.5 Workers

Will take reasonable care to:

- Act in a manner that is respectful and does not adversely affect the psychological health of other persons;
- Cooperate and comply with reasonable policies, procedures and training which impact on psychological health and well-being;
- Report all hazards, incidents, injuries, unsafe work practices or other events involving psychological health and safety;
- Assist line manager with hazard identification and risk assessment processes in the workplace as directed;
- Inform their manager and/or the HSR of any factor which affect their own/ or others' psychological health and safety.

5.6 People and Culture

5.6.1 Executive Director, People and Culture

Will take reasonably practicable steps to:

- Exercise due diligence to ensure compliance with the intent of this Policy Guideline;
- Establish awareness of and accountability for the implementation of this Policy Guideline;
- Establish and maintain effective business partnerships with delegated LHN/HS/BU for ensuring that hazard identification programs and processes are in place so that workers and others are not exposed to health and safety risks arising from the workplace.

5.6.2 Directors of Workforce / People and Culture (or equivalent)

Will take reasonably practicable steps to:

- Exercise due diligence to ensure compliance with the intent of this Policy Guideline;
- Establish awareness of and accountability for the implementation of this Policy Guideline.

5.6.3 LHN/HS/BU WHSIM Manager (or equivalent)

Will take reasonable care to:

- Provide advice and assistance to the respective LHN/HS/BU to ensure compliance with this policy guideline;
- Contribute to the establishment of education and training programs on the implementation of this policy guideline;

- Provide high level advice to the respective LHN/HS Executive Director of People and Culture regarding compliance with the policy guideline;
- Provide information regarding hazards and incidents related to work health safety to executives, managers, workers, WHS Consultative Committee, WHSIM Governance Committees (or equivalent) and other key stakeholders;
- Provide support and guidance to Workforce Health Professionals to ensure compliance with this policy guideline;
- Ensure designated LHN/HS/BU WHSIM Due Diligence reports are inclusive of workplace inspection compliance, hazard and incident data, analysis and corrective actions, and continuous improvement strategies.

5.6.4 WHSIM Professionals

Will take reasonable care to:

- Facilitate the implementation of this policy guideline throughout their delegated LHN / HS / BU / WP;
- Monitor compliance with this policy guideline and report on implementation outcomes;
- Assist in the delivery of information, direction and support to workers in fulfilling their responsibilities relating to management of psychological hazards across LHN / HS / BU / WP;
- Provide advice and support to managers and workers with regard to hazard identification, risk management, and any incidents throughout their delegated LHN/HS/BU/WP;
- Provide specialist advice, guidance and recommendations with respect to legislative requirements including interpretation of the *WHS Act 2012 (SA)*, its regulations and relevant Codes of Practice;
- Coordinate the provision of training in the area of psychological health and psychological health injury management;
- Provide, monitor and review the preventions, claims management, rehabilitation of psychological health injuries;
- Follow all requirements of the RTW Act;
- Provide early intervention services for all psychological workers compensation claims.

5.6.5 Human Resources

Will take reasonable care to:

- Ensure that workers are consulted on issues affecting their psychological health and well-being.

5.7 Health and Safety Representatives (HSRS)

Will take reasonable care to:

- Assist line manager with psychological hazard identification and risk assessment processes in the workplace, as required;
- Raise psychological hazards on behalf of work group members with their managers;
- Assist line manager with developing solutions to psychological hazards identified and implementation of risk control measures, as required.

6. Reporting

6.1 Quarterly Building Safety Excellence Targets to Portfolio Executive

Building Safety Excellence Targets (Target 5: Significant Psychological Injuries) - number of psychological injuries greater than or equal to 5 days lost time divided by full time employees.

Target: Reduce the frequency of significant psychological injuries by 30% by 2022 from 2012 base year.

Psychological Injuries are a Safe Work Australia priority disorder. Safe Work Australia's national target is a 30% reduction in serious injuries and focus on national priority disorders.

6.2. Incidents reporting and the Safety Learning System

In accordance with [SA Health Policy Directive – Work Health Safety Reporting and Investigation](#) efficient and timely hazard and incident reporting, investigation and resolution is an integral component of a successful and compliant safe work system.

All WHS hazard, incidents with injury and/or no harm must be reported on the SA Health Safety Learning System (SLS). Refer to [SA Health Procedure - Reporting & Investigating WHS Hazards and Incidents](#) and [SA Health Flowchart – Work Health Safety Incident Reporting and Investigation](#) for the step by step process. All SAAS workers must report WHS hazards and incidents on the Incident Report and Quick Assessment (IRQA).











All incidents that affect a client/patient (or other persons) must be reported as a patient incident in the SA Health Safety Learning System (SLS) to ensure the correct investigation is conducted.

Where an injury has been sustained by a worker, the injury must also be reported to WHS Injury Management on 1800 702 264. All SAAS workers must report the injury to the SAAS State Duty Manager on 1300 886 268.

7. EPAS

N/A

8. National Safety and Quality Health Service Standards

									
National Standard 1 Governance for Safety and Quality in Health Care	National Standard 2 Partnering with Consumers	National Standard 3 Preventing & Controlling Healthcare associated infections	National Standard 4 Medication Safety	National Standard 5 Patient Identification & Procedure Matching	National Standard 6 Clinical Handover	National Standard 7 Blood and Blood Products	National Standard 8 Preventing & Managing Pressure Injuries	National Standard 9 Recognising & Responding to Clinical Deterioration	National Standard 10 Preventing Falls & Harm from Falls

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9. Other

N/A

10. Risk Management

Work Health and Safety risk management guidance and considerations defined in this policy guideline align in principle with the [SA Health Risk Management Framework 2014](#) and ISO 31000 Risk Management- Principles and guidelines.

11. Evaluation

In accordance with [SA Health Policy Directive – Performance Review and Continuous Improvement](#), implementation of this Policy Guideline will be monitored via the SA Health WHS Internal Audit Program against the following criteria:

- Processes are in place to identify and assess psychological hazards in the workplace.
- Appropriate structures and processes are in place to promote psychologically healthy work environments.
- Workers are consulted in relation to the management of psychological hazards e.g. work procedures, organisational change.
- Induction and training programs include information regarding psychological health e.g. access to EAP.
- Managers and supervisors are provided with information in prevention and management of work related psychological injury.
- Control measures to manage psychological hazards are monitored and reviewed.

12. Definitions

Refer to [SA Health Work Health Safety Injury Management System – Glossary and Terms](#) for further definitions and clarification on general terms used throughout this document.

In the context of this document:

- **Distress** means: the negative feelings that people experience (e.g. frustration, worry and anxiety)
- **Mental Health Disorder** means: a diagnosed mental illness that affects mood, thinking and behaviour.
- **Presenteeism** means: the practice of being present at one's place of work whilst unwell and is associated with lower productivity.
- **Psychological hazard** means: psychosocial hazards (organisational or person focused) and physical hazards (environmental) that can both potentially cause stress and psychological injury.

- **Psychological Health** means: a state of wellbeing in which the individual can cope with the stresses of life, develop strong and positive relationships and work productively and fruitfully as a member of society.
- **Psychological injury** means: when the experience of stress or exposure to a psychological hazard leads to impaired functioning or symptoms.
- **Stress** means: is experienced when the individual's capacity to cope is exceeded by the demands placed on them. Prolonged or extreme stress can lead to psychological injury.

13. Associated Policy Directives / Policy Guidelines

[SA Health Flowchart – Work Health Safety Incident Reporting and Investigation](#)
[SA Health Policy Directive – Domestic Violence](#)
[SA Health Policy Directive – Hazard Identification and Risk Management \(WHS\)](#)
[SA Health Policy Directive – Induction and Orientation](#)
[SA Health Policy Directive – Management of Work Related Injury-Illness \(WHSIM\)](#)
[SA Health Policy Directive – Performance Review and Continuous Improvement](#)
[SA Health Policy Directive – Performance Review and Development](#)
[SA Healthy Policy Directive – Respectful Behaviour](#)
[SA Health Policy Directive – Roles, Responsibilities and Governance \(WHS\)](#)
[SA Health Policy Directive – Work Health, Safety and Injury Management \(WHSIM\)](#)
[SA Health Policy Directive – Work Health Safety Reporting and Investigation](#)
[SA Health Policy Guideline – Management of Disrespectful Behaviour](#)
[SA Health Policy Guideline – Management of Non-Work Related Disability of Medical Incapacity](#)
[SA Health Policy Guideline - System Documentation \(OHSWIM\)](#)
[SA Health WHSIM Procedure – Psychological Health Hazard Identification](#)
[SA Health Procedure – Reporting and Investigating WHS Hazards and Incidents](#)
[SA Health Procedure – Worksite Safety Inspections](#)
[SA Health Risk Management Framework 2014](#)
[SA Health Work Health Safety Injury Management System – Glossary and Terms](#)

14. References, Resources and Related Documents

- Australasian Faculty of Occupational and Environmental Medicine, 2011 “Realising the Health Benefits of Work: A Position Statement”.
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- Office for the Public Sector, Safety and Wellbeing in the Public Sector 2010-2015
- Office for the Public Sector, SA Public Sector Wellbeing Framework

- [SA Health WHSIM Form – Psychological Hazard Identification and Management Form](#)
- SafeWork Australia model Code of Practice: How to Manage Work Health and Safety Risks, December 2011
- SafeWork Australia model Code of Practice: WHS Consultation, Cooperation, Coordination, December 2011.
- *Work Health and Safety Act 2012 (SA)*
- *Work Health and Safety Regulations 2012 (SA)*

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