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Connecting two Canadian frameworks:

The LEADS in a Caring Environment Capabilities Framework and the National Standard for Psychological Health and Safety in the Workplace

Introduction

Working in healthcare comes with unique rewards and equally unique risks. Staff working in the healthcare sector are more likely to miss work due to illness or disability than people in all other sectors. They face higher rates of burnout, compassion fatigue and sleep deprivation that can impact their psychological health and safety as well as the safety of their patients. A psychologically safe workplace promotes a positive culture, can prevent stigma and discrimination and can contribute to a productive working environment.

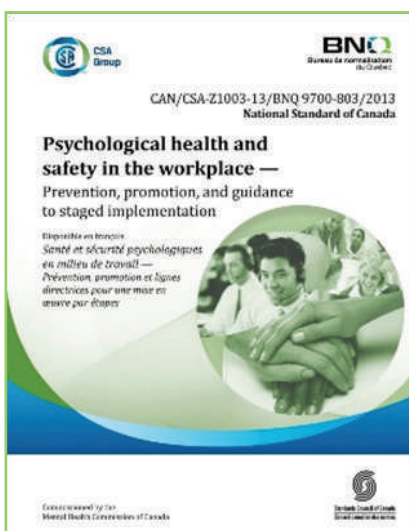
While protecting and promoting the mental health of people in the workplace is imperative in all sectors, it has a unique role in healthcare. With the unique challenges of the healthcare sector, the *National Standard of Canada for Psychological Health and Safety in the Workplace* (The *Standard*) has a distinct role to protect healthcare workers and patients alike.

A major factor—in either enhancing or mitigating the creation of psychologically healthy workplaces—is the quality of its leadership. Research shows there is a direct link between effective leadership and psychologically healthy workplaces. The *LEADS in a Caring Environment Framework* (LEADS) is a common leadership language and set of desirable leadership practices that is well understood within the Canadian health sector.

Importantly, implementing The *Standard* can create caring, healthy and safe environments that support LEADS leaders. Similarly, LEADS can provide a change leadership framework for leaders to implement The *Standard* within their organizations. This document is intended to assist healthcare leaders to understand synergies of The *Standard* and LEADS and to support them in implementing both frameworks within their organizations.

Background

The National Standard of Canada for Psychological Health and Safety in the Workplace



The *National Standard of Canada for Psychological Health and Safety in the Workplace* (The *Standard*) is a set of voluntary guidelines, tools and resources intended to guide organizations in promoting mental health and preventing psychological harm at work. The *Standard* is framed around recognizing and taking action to realize 13 psychosocial factors that can impact the mental health of employees in the workplace. The first of its kind in the world, The *Standard* was championed by the Mental Health Commission of Canada, and developed by the Canadian Standards Association and the Bureau de normalisation du Québec.

For additional information on The *Standard*, please visit: <https://www.mentalhealthcommission.ca/English/national-standard>

LEADS in a Caring Environment Framework



The *LEADS in a Caring Environment framework* (LEADS) outlines the capabilities required to lead in all sectors and in all levels of the health system. It delineates what good leadership looks like, across all professions and all levels of service provision in healthcare. The domains of the framework (Lead Self, Engage Others, Achieve Results, Develop Coalitions & Systems Transformation) represent the collective wisdom of the current literature on health leadership as validated by leaders in healthcare, and the capabilities required by leaders dedicated to making meaningful health system change.

For additional information on LEADS, please visit: <http://leadscanada.net/site/framework>

Comparing purposes and goals of LEADS and The *Standard*:

There are many synergies and shared values between the principles of The *Standard* and the LEADS framework. There are also a few differences.

Similarities:

- **Caring for others** – Caring is the identity of the health system. Both frameworks are dedicated to caring for others. The *Standard's* goal is to create more caring organizations through a psychological health and safety management system. LEADS is founded in the principle of caring – for patients, staff and for the health of all.
- **Aspirational** – Both frameworks are aspirational - they articulate a desired future in ideal terms. They rely on voluntary take-up for successful implementation. Because they share the goal to create a psychologically healthy workplace, they can be mutually supportive in their implementation.
- **Changing Culture** – Both frameworks seek to shift cultures and ideas within a workplace – to respect the psychological health and safety for all and to embrace a leadership culture where each person in the system recognizes their role as a leader in that goal– regardless of position or title.

Differences:

- **Audience** – The *Standard* focuses on implementing change at the organizational level. LEADS focuses on changing individual leadership behaviours. The *Standard* describes the what that needs to happen to create psychologically safe and healthy workplaces; LEADS articulates how to make it happen through leadership practices.
- **Sector** – LEADS is a unique leadership framework for the healthcare sector. The *Standard* can be applied to any organization or sector - including healthcare.



Aligning the Frameworks:

There are many similarities between the 13 psychosocial factors which underpin The *Standard* and the domains and capabilities of LEADS. The following chart lists and defines the 13 factors and show their alignments with LEADS.

13 Psychosocial Factors ¹	LEADS domains and capabilities
<p>1. Psychological Support A work environment where coworkers and supervisors are supportive of employees' psychological and mental health concerns, and respond appropriately as needed.</p>	<p>Lead Self</p> <ul style="list-style-type: none"> • Are self-aware <p>Engage Others:</p> <ul style="list-style-type: none"> • Contribute to the creation of healthy organizations <p>Achieve Results:</p> <ul style="list-style-type: none"> • Set direction • Take action to implement decisions <p>Develop coalitions</p> <ul style="list-style-type: none"> • Mobilize knowledge
<p>2. Organizational Culture A work environment characterized by trust, honesty and fairness.</p>	<p>Lead Self</p> <ul style="list-style-type: none"> • Demonstrate character <p>Engage Others:</p> <ul style="list-style-type: none"> • Foster the development of others • Contribute to the creation of healthy organizations. • Communicate effectively • Build teams <p>Systems Transformation</p> <ul style="list-style-type: none"> • Demonstrates systems and critical thinking • Encourage innovation • Champion and orchestrate change

13 Psychosocial Factors	LEADS domains and capabilities
<p>3. Clear Leadership & Expectations A work environment where there is effective leadership and support that helps employees know what they need to do, how their work contributes to the organization, and whether there are impending changes.</p>	<p>Engage Others:</p> <ul style="list-style-type: none"> • Contribute to the creation of healthy organizations. • Build teams <p>Achieve Results:</p> <ul style="list-style-type: none"> • Set direction • Strategically align decisions with vision, values and evidence • Assess and evaluate
<p>4. Civility & Respect A work environment where employees are respectful and considerate in their interactions with one another, as well as with customers, clients and the public.</p>	<p>Engage Others:</p> <ul style="list-style-type: none"> • Contribute to the creation of healthy organizations.
<p>5. Psychological Job Fit A work environment where there is a good fit between employees' interpersonal and emotional competencies and the requirements of the position they hold.</p>	<p>Engage Others:</p> <ul style="list-style-type: none"> • Contribute to the creation of healthy organizations. • Build teams <p>Achieve Results</p> <ul style="list-style-type: none"> • Aligns decisions with vision, values and evidence
<p>6. Growth & Development A work environment where employees receive encouragement and support in the development of their interpersonal, emotional and job skills.</p>	<p>Lead Self</p> <ul style="list-style-type: none"> • Develop themselves <p>Engage Others:</p> <ul style="list-style-type: none"> • Foster the development of others • Communicate effectively

13 Psychosocial Factors	LEADS domains and capabilities
<p>7. Recognition & Reward A work environment where there is appropriate acknowledgement and appreciation of employees' efforts in a fair and timely manner.</p>	<p>Engage Others:</p> <ul style="list-style-type: none"> • Foster the development of others • Contribute to the creation of healthy organizations. • Communicate effectively
<p>8. Involvement & Influence A work environment where employees are included in discussions about how their work is done and how important decisions are made.</p>	<p>Engage Others:</p> <ul style="list-style-type: none"> • Contribute to the creation of healthy organizations. • Build teams <p>Achieve Results:</p> <ul style="list-style-type: none"> • Set direction • Align decisions with vision, values and evidence
<p>9. Workload Management A work environment where tasks and responsibilities can be accomplished successfully within the time available.</p>	<p>Achieve Results:</p> <ul style="list-style-type: none"> • Set direction • Strategically align decisions with vision, values and evidence • Assess and evaluate
<p>10. Engagement A work environment where employees feel connected to their work and are motivated to do their job well.</p>	<p>Engage Others:</p> <ul style="list-style-type: none"> • Foster the development of others • Contribute to the creation of healthy organizations. • Communicate effectively <p>Achieve Results:</p> <ul style="list-style-type: none"> • Set direction <p>Systems Transformation</p> <ul style="list-style-type: none"> • Demonstrate systems and critical thinking

13 Psychosocial Factors	LEADS domains and capabilities
<p>11. Balance A work environment where there is recognition of the need for balance between the demands of work, family and personal life.</p>	<p>Engage Others:</p> <ul style="list-style-type: none"> • Contribute to the creation of healthy organizations. • Communicate effectively <p>Achieve Results:</p> <ul style="list-style-type: none"> • Strategically align decisions with vision, values and evidence • Take action to implement decisions • Assess and evaluate
<p>12. Psychological Protection A work environment where employees' psychological safety is ensured.</p>	<p>Engage Others:</p> <ul style="list-style-type: none"> • Foster the development of others • Contribute to the creation of healthy organizations. <p>Achieve Results:</p> <ul style="list-style-type: none"> • Set direction • Strategically align decisions with vision, values and evidence • Take action to implement decisions • Assess and evaluate <p>Develop coalitions</p> <ul style="list-style-type: none"> • Mobilize knowledge
<p>13. Supportive Physical Environment A work environment where management takes appropriate action to protect the physical safety of employees.</p>	<p>Engage Others:</p> <ul style="list-style-type: none"> • Contribute to the creation of healthy organizations. <p>Achieve Results:</p> <ul style="list-style-type: none"> • Take action to implement decisions • Assess and evaluate

1. Definitions of the 13 factors were adapted from GuardingMinds@Work;
<https://www.guardingmindsatwork.ca/>

Using LEADS to Implement The *Standard*

There are two ways the LEADS Framework can be used to implement The *Standard*;

The first is for individuals in formal leader-manager roles to actually *practice the behaviours* implicit in the LEADS domains and capabilities. In doing so, they can model behaviours that support the 13 workplace conditions of The *Standard*. To that end, leader-managers or informal leaders—i.e., employees or clinicians—need to truly concentrate on learning and demonstrating those capabilities.

The second is to use the LEADS Framework as a *disciplined approach to change*. Implementing The *Standard* requires organizations to take a step back, reflect on how things are being done and make appropriate changes. If an organization is already experiencing psychological risks, a change process layered on top of day-to-day tasks can put additional stress on already strained staff. Successful implementation of The *Standard* requires a sophisticated change leadership and management approach. In organizations, leader-managers have the responsibility to steward the change.

It should also be noted that in reality, not all leader-managers—who are charged with implementing The *Standard*, and who are encouraged to model LEADS behaviours to do so—are themselves mentally healthy. The same supports for employees to assist them with improving psychological workplace factors are then required for leader-managers. For if unhealthy, they cannot be expected to lead implementation of change. In this instance leadership needs to come from informal leaders.

Using LEADS as a disciplined approach to change

As previously noted, the LEADS Framework can be used as a disciplined approach to change to create psychologically healthy workplaces. The questions on the following page outline how this disciplined approach to change can be utilized. Each step outlines the key questions that the leader-manager needs to ask and answer—in collaboration with the staff and clinicians—to co-create a workplace that demonstrates the desirable conditions of The *Standard*.

NOTE: these questions will need to be altered to reflect specific situations and circumstances reflective of the leader-manager's role, level of responsibility in the organization, and specific context in which they work.

Step 1: Create a Shared Vision and Results – *Achieve results: Set Direction*

What does a psychologically healthy environment look like for your organization? Work with staff at all levels to determine the desired vision for the organization as a psychologically healthy and safe environment.

Reflective Questions:

- Who should be involved in articulating a vision statement, and desired results, for our workplace? Why would they be important?
- How will we engage the appropriate people in creating the shared vision and results? What processes will we use?
- What statement of vision and purpose will articulate the desired future state of our workplace, as envisaged by this group?
- What results—measurable results—are supported by the people developing the shared vision, and that reflect achievement of the vision?
- How will we engage the remainder of the organization in shaping the vision and desired results and getting sign off? What processes will we employ?
- What form—Compact, Policy Statement, Memorandum of Agreement, etc. should a statement of the vision and desired results regarding psychological safety and wellness in our organization take?
- Is there a willingness to commit to specific roles/responsibilities/accountabilities relative to realizing the vision and desired results statement by the different groups that defined them? If so, what are they?
- How will we get sign-off for the desired direction and purpose re psychological health in our workplace?



Step 2: Determine the Current State of Psychological Health and Safety - *Achieve Results: Assess and Evaluate*

You've determined where your organization wants to go, but where are you now? Establishing benchmarks will help to measure progress throughout your journey to implement The Standard.

Reflective Questions:

- Are the measurable results identified in Step 1 currently measurable?
- If so, what is our current performance regarding those desired results?
- Are there existing tools that we can employ to gather that data? How will we employ them?
- If not, what should be done to collect the data, analyse the data, and ensure it is presented in a manner such that it can be used to assess current state, and subsequently, monitor movement towards the vision?
- What other steps—i.e., focus groups, interviews, surveys, etc.—should be taken to truly understand current state? (NOTE: this includes employee/clinician readiness/workload/capacity for change).
- Once we can describe current state—both qualitatively and quantitatively—how big is the gap between where we are (current state) and where we wish to be (future state)?
- Given the size of the gap, what is the scope and breadth of change that is desirable in our workplace, as it relates to improving psychological health and wellness?
- Given the readiness/capacity for change of leader-managers and staff, how will it affect the phasing in and timing of our plans for change?

Step 3: Prepare Leader/Managers to Lead Self Through Change - *Lead Self*

Leader-managers need the opportunity to 'ground' themselves in the attitudes, beliefs, values and skills needed to be 'authentic' change agents. Taking this time will allow leaders to assess their capabilities to lead change towards creating and leading a workplace that respects the psychological health of its workers.

Reflective Questions:

- What is my own psychological health? Do I need to seek assistance before trying to lead this initiative?
- How motivated am I to champion this initiative? Am I willing to lead it?
- What is my personal vision for psychological safety and wellness where I work?
- What are my own attitudes and beliefs of how to deal with psychological health—or lack of—in the workplace?
- What strengths do I bring to acting as a champion of this work?
- What are my areas of vulnerability and how I prepare to deal with them?
- What do I need to learn to be an effective champion?
- What aspects of my character may well be tested as I promote the vision and purpose?



Step 4: Building Healthy Relationships: Engaging Others in Change – *Engage Others*

Much of what happens in an organization is a function of the informal micro-interactions between people, not just the formal interactions required by their job. Healthy, psychologically safe, and productive interpersonal relationships between workplace colleagues are critical to implementing The Standard.

Reflective Questions

- Who should be part of the change team to help me steward this project?
- Within our area of responsibility do we know the psychological health of each employee? How can we find out?
- Do we know reasons why individuals will support this change or not? How will we engage those that do?
- What potential fears might this initiative bring out in our colleagues? How will we address them?
- What are the cultural values and beliefs in our workplace? How supportive—or not—are they of the intents of creating a psychologically safe and healthy work environment?
- What factors—relative to the thirteen workplace factors outlined in *The Standard*—are of highest importance to our staff?
- Do we recognize situations in my workplace that detract from psychological health and wellness? Can we deal with them effectively?
- How can I effectively use dynamics of teamwork to steward the changes necessary?
- What is important for me and our team to communicate—regularly and often—and how best might we do it?
- Do I make a concentrated effort to listen deeply, and to seek out the opinions of others? How might I do it better?
- How might we adjust our meetings to reflect greater engagement of staff, and also to focus on the goals of a healthier workplace?
- What formal methods of engagement might be employed to give staff and clinicians opportunities to participate in the change?
- Is my leadership style conducive to achieving psychological health and wellness? What impact does it have?
- Do we—I—resolve conflicts effectively? What approaches work best in our environment?

Step 5: Using a Focus on Results to Ensure Success - *Achieve Results: Strategically Align Decisions with Vision, Values and Evidence; and Take Action to Implement Decisions*

Implementing The Standard will take place within a limited budget, people resources, and technical expertise. Aligning the efforts of each of these three elements in support of efforts to create psychologically healthy workplaces can enhance efficiency and improve productivity.

Reflective Questions:

- Am I, my colleagues, professional clinicians, and employees in my area of responsibility aware of the vision and desired results? For the initiative organization-wide, and for us?
- How does the desired vision and results translate into strategic goals and objectives to guide implementation?
- What evidence exists to support our goals, and how best can we ensure it helps shape decision making?
- What organizational values underpin our vision and purpose? What do they look like in action?
- What is currently happening now that is consistent with our purpose? How do we enhance those activities?
- What new tactics, programs, or initiatives should be employed to achieve the vision?
- Where can we find the resources—money and people—to support the chosen tactics, programs, or initiatives?
- What tools, techniques, planning systems (i.e., PHSMS) should we employ to align our resources behind achievement of the vision? How do I, in my department, align my work to fit within the expectations of that system?
- What information systems—data and information flow processes—should be created?
- What is our strategic communications plan to ensure all leader/managers, employees, and clinicians know about the initiative, and that will support its implementation?
- How are we going to assess and evaluate progress—in measurable terms?
- Are we going to hold people accountable, and for what? How will we do that in fair and constructive manner (accountability commensurate with responsibility)?

Step 6: Engaging External Stakeholders to Support Implementation - *Develop Coalitions*

In healthcare, psychological safety and wellness goes beyond individual organization borders - because patients do! A patient's treatment may require the services of a variety of clinicians and experts from different organizations. Differences in psychologically healthy workplaces may result in a patient receiving different levels of treatment between facilities - which then puts the burden on another organization to compensate for it.

Reflective Questions

- What organizations have a stake in us being successful in achieving a psychologically healthy workplace? What benefits will accrue to them?
- From the list of possible external stakeholders, which ones might support us in our efforts to implement The *Standard*?
- Which of those stakeholder organizations are a good fit with our values and purpose? How committed to the goal of a healthy workplace are they?
- Are there important ways in which patients, family members, and citizens might contribute to our goal of creating a healthy workplace? If so, how might we engage them?
- What external programs, or initiatives should be utilized to help us achieve our healthy workplace vision?
- Once we have identified some appropriate stakeholders to work with, what are the processes that need to be established to share resources (knowledge, money, expertise, tools, techniques) in creating psychologically safe and healthy workplaces?
- How do we maintain strong, ongoing relationships with our chosen coalition partners?
- What political challenges will I experience in working with external organizations? What skills do I need to do that?

Step 7: Using a Systems Perspective to Support Change - *Systems Transformation*

Any organizational change takes place in a broader context. Healthcare is complex in terms of the political attention that health attracts, the number of professions involved, the number of organizations involved, and the size and variety of mandates of the organizations delivering service. A systems approach is required to appreciate the organization's role within this complex environment.

Reflective Questions

- How does Canada's commitment to a universal health system impact on the goal of creating psychologically healthy workplaces?
- What social values and beliefs in our community, and society at large—regarding mental health and psychological health in a workplace setting—reinforce our internal efforts to implement *The Standard*?
- What deep-seated patterns of behaviour exist in broader society, and that are mirrored in our organization, will mitigate our potential for success?
- Given the answer to the 2nd and 3rd question, what impact will society's beliefs have on a realistic timeframe for success?
- Other than the practice of continuous improvement, are there other methods to encourage innovation within our organization, and/or stimulate creative ideas for improvement, that should be considered to create change in our organization?
- Are there examples in other health jurisdictions—other countries—where great strides have been made in creating psychologically healthy workplaces?
- What societal trends in law, technology, economics, or politics—both externally and internally—are either supports or threats to our efforts to create a psychologically healthy workplace?
- Within the many health professions themselves—either provincially or nationally--what systems, structures, and processes do they employ that will either support or mitigate our internal efforts at creating a psychologically healthy workplace (e.g., education practices, licensing, etc.)?
- Are there champions for change, or sponsors for change in the broader community that would support your efforts to create a psychologically healthy workplace?
- Do champions and sponsors within the organization know the kinds of tools, techniques and approaches to change that are designed to create change in a complex system? How might those approaches be used to help create psychologically healthy workplaces?

Summary

Healthcare workers dedicate their lives to providing quality healthcare to others. However, the unique rewards of delivering healthcare also present unique challenges. Creating psychologically healthy workplaces not only benefits staff engagement, wellbeing and satisfaction, but also translates to safer and more effective patient care.

Research shows that caring leadership is the primary factor in creating healthy workplace climates. The *Standard* outlines 13 psychosocial factors that support healthy workplaces. The LEADS Framework outlines the practices of leadership that are applicable to the health sector.

Health care leaders who employ the practices of LEADS will model behaviours that support The *Standard's* desired 13 psychosocial factors. Health care leaders can also use the LEADS Framework as a discipline for implementing The *Standard's* desired workplace conditions. Together, these two frameworks can create the kind of workplaces that will provide Canadians with the caring health care they so desire.



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