Psychosocial Risk Assessment- Tip Sheet

Health and safety risks to workers include both physical and psychological injury risk. In relation to work, a psychosocial hazard is a condition or situation which has the potential to cause injury or illness but has not resulted in an injury or illness.

The *Managing the risk of psychosocial hazards at work Code of Practice 2022* outlines obligations for duty holders and provides practical guidance on how to support effective psychosocial risk management.

The process for psychosocial hazard risk management is the same used for physical hazards, outlined in *PPL Health and Safety Risk Assessment* and reflected in UQSafe, the corporate system for HSW risk management at UQ.

Psychosocial Risk Management Process

The risk management process includes:

1. Identifying hazards
2. Assessing the risk posed by each hazard
3. Controlling the risk- identify and implement control measures
4. Monitoring and reviewing the control measures

All psychosocial risk assessment processes should be supported by consultation.

Other relevant principles and actions include:

- The **hierarchy of controls** must be used when establishing methods to control the risks.
- **Consultation and communication** throughout the risk assessment process is essential to ensure those with the best knowledge of the hazards and resulting risks are involved and that sufficient resources to eliminate or mitigate risk are made available.
- Risk assessments must consider both physical and psychological work risks.
- Risk assessments should be reviewed regularly, in accordance with requirements outlined in *PPL Health and Safety Risk Assessment* and according to the managed risk level assigned to the risk assessment.

For sensitive matters a risk assessment in UQSafe can be categorised as restricted. This ensures that only the owner (author), approver, WHSC and HSW Manager is able to view the risk assessment. Privacy can be upheld by communicating to all involved who will see the information collected and what it is used for.

Identify the sources of potential harm (Hazards)

The first step of the psychosocial risk management process is to identify psychosocial hazards present in the work or study environment. As psychosocial hazards are in many cases subjective, it is important to draw on **multiple data points** to provide a holistic picture of the psychosocial hazards presenting in the work and study area. Some of the data points that can help to identify psychosocial hazards include:

- Gathering anecdotal feedback through consulting staff, students, leaders, and subject matter experts (e.g., HSW advisers).
- Reviewing desktop data (e.g. incident or hazard reports, unplanned leave data, work injury claims).

- Conducting surveys or focus groups to gather targeted information.
- Observing staff and students in the environment for signs of psychosocial hazards.

There are a number of resources and risk assessment tools that can help to support your risk assessment process (see Resources section). This documentation can be added as attachments to any risk assessments recorded in UQSafe.

The data collected during this stage should be considered holistically and used to identify psychosocial hazards that may be present in the work or study environment. Ensure all identified psychosocial hazards are documented clearly within your organisational unit's health and safety risk register, as per *PPL Health and Safety Risk Management*

Assess the risk

The second stage of the psychosocial risk management process involves assessing the potential for psychosocial hazards to cause harm. Psychosocial risk is typically assessed by weighing up the ***prevalence*** and ***consequence*** to determine the severity of the risk and the urgency for which the hazard should be addressed. A matrix structure is provided in the UQSafe- Risk database to support this process for identified hazards. The risk assessment should explicitly document consideration of the duration, frequency and severity of the exposure of the hazard.

Assessing the ***prevalence*** of the psychosocial hazard is used to evaluate the 'likelihood' of the hazard occurring. Prevalence is assessed through considering the proportion of staff/ students impacted by the risk and the proportion of the time they are likely to be impacted. In the absence of comprehensive data, you may need to take an educated guess to assess prevalence. Consider the data sources at your disposal and consult with staff or students to make this assessment.

Assessing the ***consequence*** of the psychosocial hazard is used to evaluate the impact or potential harm that the hazard may cause. It is important to review this as the *most likely* consequence with the current controls in place.

UQ's Enterprise Risk Matrix can also be used to determine level of risk. Defining the risk level can help to prioritise risk control actions, with higher ratings indicating greater urgency with which the risk should be addressed.

! It is important to remember that psychosocial hazards are often intertwined and should be considered as multifactorial and rarely be considered in isolation. The compounding effect of multiple psychosocial hazards is likely to have a greater impact than each hazard alone, so you may need to assess multiple hazards together.

Ensure risk ratings are documented for each identified hazard within your organisational unit's risk register.

Identify control measures

The third stage of the psychosocial risk management process involves identifying appropriate risk control measures to manage psychosocial hazards in the work and study environment. Employers are obligated to do whatever is 'reasonably practicable' to control or minimise the impact of psychosocial hazards in the work and learning environment. There are three broad categories of intervention that can be used to control psychosocial risk. These include:

1. **Primary (preventative):** eliminating o**r** reducing the nature of the psychosocial hazard *before* employees' experience stress-related symptoms or disease. This level of intervention targets psychosocial hazards at the source, such as the organisation of work and working conditions. Examples include:
    a. redesigning the work or environment to prevent exposure to the hazard/s;
    b. the introduction of rosters that provide advance notice of work hours schedules to eliminate the hazard of highly unpredictable work hours;

c. setting achievable performance standards and workloads for the number of workers, work hours and their skill sets;

d. providing regular opportunities for meaningful feedback and professional development.

e. provision of clear job descriptions and reporting lines.

2. **Secondary:** to help equip employees with resources to cope with stressful conditions. This level of intervention targets employee responses to psychosocial hazards. This may include training in stress management, mental health awareness or communication skills.
3. **Tertiary (reactive):** post-exposure support to impacted individuals. This level of intervention is aimed at reducing the health effects of exposure to psychosocial hazards through support programs such as the Employee Assistance Program or other rehabilitation programs.

In planning psychosocial risk controls, local areas can utilise existing policies, programs and services available to all teams at UQ or can introduce their own initiatives at the local level (see Resources section for example controls).

It is important to remember that while training can be an important feature in a risk management plan, a focus on worker training, including mental health training, is unlikely to ensure health and safety in isolation. **Risk control plans should focus on primary prevention, but also include secondary and tertiary prevention activities.**

Ensure all identified planned controls are documented clearly within your organisational unit's risk register along with an assessment of residual risk assuming all controls are implemented as planned.

Include planned implementation and review dates for all controls within your organisational unit's risk register.

Review and monitor effectiveness of control measures

Reviewing and monitoring the effectiveness of the control measures is essential to ensuring they are achieving what they were designed to in protecting the UQ community against psychological harm. It is important to remember that risk assessments will only reflect the moment in time in which you assessed the psychosocial hazards. Risk assessments should be monitored and reviewed ongoingly as per *PPL Health and Safety Risk Assessment*, and if necessary adjusted to maintain effective risk mitigation systems.

Workers should be encouraged and supported to formally report hazards and incidents in UQSafe and to notify their supervisors and safety contacts if there are any emerging hazards associated with a task.

Ensure any modifications to controls are captured clearly within your organisational unit's risk register.

Resources

There are a number of resources available to support the Psychosocial Risk Management Process. Supporting templates and tools can be attached to the UQSafe risk assessment as supporting documentation.

- Psychosocial Risk Assessment supporting template
- Workplace Health and Safety QLD Risk Assessment Tool
- Workplace Health and Safety QLD People at Work resources
- Taking Action- example controls for psychosocial hazards