CODE OF PRACTICE

MANAGING
PSYCHOSOCIAL
HAZARDS AT WORK

SAFEWORK NSW

MAY 2021

This Code of Practice has been developed by SafeWork NSW and has been approved under section 274 of the NSW *Work Health and Safety Act 2011*. The code commenced on the date of gazettal on 28th May 2021

Copyright Information

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FOREWORD

This code of practice on how to manage psychosocial hazards at work is an approved code of practice under section 274 of the New South Wales *Work Health and Safety Act 2011* (*WHS Act*).

An approved code of practice provides practical guidance on how to achieve compliance with the work health and safety standards required under the *WHS Act* and the *Work Health and Safety Regulation* (*WHS Regulation*), including effective ways to identify and manage risks.

A code of practice applies to anyone who has a duty of care in the circumstances described in the code of practice. In most cases, following an approved code of practice will assist the duty holder in achieving compliance with the health and safety duties in the *WHS Act* and *WHS Regulation* concerning the code's subject matter.

Like regulations, codes of practice tend to deal with particular risks, and do not cover all hazards or risks that may arise. The health and safety duties require duty holders to consider all risks associated with work, not only those for which regulations and codes of practice exist.

Codes of practice are admissible in court proceedings under the *WHS Act* and the *WHS Regulation*. Courts may regard a code of practice as evidence of what is known about a hazard, risk or control and may rely on the code in determining what is reasonably practicable in the circumstances to which the code relates. For further information, see Safe Work Australia *How to determine what is reasonably practicable to meet a Health and Safety Duty*.

Compliance with the *WHS Act* and *WHS Regulation* may be achieved by following another method if this achieves an equivalent or higher standard of safety than set out in this code.

An inspector may refer to an approved code of practice when issuing an improvement or prohibition notice.

SCOPE AND APPLICATION

This code is intended to be read by persons conducting a business or undertaking (PCBU) and those who have duties under the *WHS Act*. It provides practical guidance on the process a PCBU could use to identify and to manage psychosocial hazards at work. You should use this code of practice if you have functions or responsibilities that involve managing, so far as is reasonably practicable, exposure to psychosocial hazards and risks to psychological and physical health and safety at work.

The code may also be a useful reference for other persons interested in complying with the duties under the *WHS Act* and *WHS Regulation*. Examples in this code identify actions a PCBU, an officer of a PCBU, a worker, or other persons should take, but which by themselves may not be sufficient to fulfil a PCBU's obligations or a worker's or other person's responsibility under WHS legislation.

This code applies to all work and workplaces covered by the *WHS Act*. Throughout this code, the reasonably practicable limitation under section 18 of the *WHS Act* applies to the general duty.

HOW TO USE THIS CODE OF PRACTICE AND KEY TERMS

This code includes references to requirements under the *WHS Act* and *WHS Regulation*. These are included for convenience only and should not be relied on in place of the full text of the *WHS Act* or *WHS Regulation*. Codes of practice do not create new WHS duties, nor do they extend any existing duties, but rather explain how to meet those duties.

The words 'must' or 'require' indicates that a legal requirement exists and must be met, 'should' indicates a recommended course of action, and 'may' an optional course of action. This code's advice covers the prevention of exposure to psychosocial hazards at work, which may create psychological or physical health and safety risks.

A duty holder means any person who owes a duty under the *WHS Act*, including a PCBU with management and control of a business, or a designer, manufacturer, importer, supplier, installer of products or plant used at work (upstream duty holder), or officer or a worker.

A worker means *any* person who carries out work for a PCBU, including work as an employee, contractor or subcontractor (or their employee), self-employed person, outworker, apprentice or trainee, work experience student, an employee of a labour-hire company placed with a 'host PCBU', or a volunteer. Managers and supervisors are also workers.

A PCBU also owes a duty of care to persons other than their workers whose health or safety may be put at risk – that is, to any person who may be affected by the business operations such as visitors, customers or members of the public.

A workplace means *any* place where work is carried out for a business or undertaking, or where a worker goes, or is likely to be, while at work.

Work health and safety (WHS) hazards are anything that can cause harm. Risk means the possibility of harm (death, injury or illness) which might occur if a worker is exposed to a hazard. Control measures (controls) are actions taken to eliminate or minimise WHS hazards and risks.

1. INTRODUCTION

The *WHS Act* defines 'health' as including both physical and psychological health. A PCBU has a primary duty to ensure, so far as is reasonably practicable, the health and safety of workers and also to ensure that other persons are not put at risk from work carried out arising from the business or undertaking.

When psychosocial hazards and risks at work are not effectively managed, this may increase the risk of work-related psychological and physical injuries, incidents and errors. Therefore, it may be helpful when assessing the risk of musculoskeletal and traumatic injury to consider the psychosocial hazards and risks and controls noted in the code.

Ensuring a systematic process to manage psychosocial hazards and risks will help the PCBU and duty holder meet their WHS responsibilities. It will also decrease organisational disruptions and costs resulting from work-related harm and may improve WHS and broader organisational performance and productivity.

1.1 WHAT ARE THE COMMON PSYCHOSOCIAL HAZARDS AT WORK?

Psychosocial hazards at work are aspects of work and situations that may cause a stress response which in turn can lead to psychological or physical harm. These stem from:

- the way the tasks or job are designed, organised, managed and supervised

- tasks or jobs where there are inherent psychosocial hazards and risks

- the equipment, working environment or requirements to undertake duties in physically hazardous environments, and

- social factors at work, workplace relationships and social interactions.

Psychosocial hazards and the appropriate controls will vary for every workplace and sometimes between groups of workers depending on the:

- organisational context to work (e.g. economic pressures, type and size of the business, organisational structure and culture, environmental conditions, technologies, and business activities, products and services, supply chains and contractual arrangements, workers' skills and attributes and workplace relationships) and

- content of the work (workload, workers' roles, responsibilities and activities required to deliver the product or service).

Some hazards by themselves have the potential to cause serious harm, such as experiencing occupational violence. In most circumstances, hazards will not occur alone but together with a range of psychosocial and physical hazards. As part of the risk assessment process the frequency and duration of exposure to psychosocial hazards will need to be considered. The more psychosocial hazards that are present, the more likely there is for harm to occur.

Some of the most common psychosocial hazards are noted in Table 1. There may be hazards not relevant to your work or relevant to your work but not included. These will be identified through your hazard and risk identification process.

Table 1 Common psychosocial hazards

Hazard	Example
Role overload (high workloads or job demands)	For example, where there is: • too much to do in a set time or with insufficient workers or other resources • unachievable task deadlines, expectations or responsibilities • unpredictable shifts or hours of work, shift structures or rosters that do not allow adequate time for workers to recover • frequent cognitively difficult work • multiple tasks that require repeated rapid switching between each to complete them, so it is difficult to concentrate • where there is sustained or frequent exposure to emotionally distressing situations • tasks that require workers to continually show false displays of emotion, e.g. customer service roles • tasks and decisions that are safety critical and that may have a serious impact on the health and safety of workers and others.
Role underload (low workloads or job demands)	Where there is sustained low effort required, for example: • tasks or jobs where there is routinely too little to do • highly repetitive or monotonous work (like picking and packing products, monitoring production lines).
Exposure to traumatic events	Where workers provide care to those experiencing a traumatic event or listen to, view, or read detailed descriptions of harrowing and traumatic events experienced by others. For example: • emergency responders or health care workers • rape crisis and child protection workers, officers of the court, lawyers or immigration officers etc • experiencing, witnessing, or investigating a serious near miss, injury or workplace fatality.
Role conflict or lack of role clarity	For example, where there are: • conflicting priorities within roles (e.g. providing 'good customer service', but with insufficient time allowed to spend with customers) • uncertainty around roles, tenure, tasks and work schedules and standards (frequent changes, lack of clear explanations to role or tasks, important task-related information/training is not available, or not providing a clear performance agreement or reporting requirements).
Low job control	For example, where workers: • have little control over how they do their work, when they can change tasks or take breaks • are not involved in decisions that affect their work or clients • are unable to speak up about WHS, and the way work is done. Note: Where the safety or quality requirements need to be strictly prescribed, there is likely to be more limited opportunities for worker input into decision making, however workers must still be consulted.
Conflict or poor workplace relationships between workers and their supervisors and managers and co-workers	For example, where there are: • frequent disagreements about how work should be done • frequent interpersonal workplace conflict • harmful workplace behaviours. Conflict can be stressful, especially where the consequences of miscommunication can lead to additional time pressures or serious errors. Conflict can escalate if it is not dealt with promptly and fairly and if steps are not taken to address poor, unacceptable or harmful behaviours.

Hazard	Example
Poor support from supervisors and managers	For example, where there is: • inadequate information, advice and help with work tasks or to resolve issues, or access to necessary equipment and resources • performance feedback or other management action which is unreasonable or delivered in an unreasonable manner. See also clarification on reasonable management action on page 9.
Poor co-worker support	For example, where there is: • inadequate information, advice and help to complete tasks, and support for work-related matters from co-workers.
Workplace violence	Including, by workers, clients, patients, visitors or others. For example, see *Safe Work Australia Guide: Preventing workplace violence and aggression*; and *Workplace violence and aggression – guidance for small business*, and *Workplace violence and aggression – advice for workers*.
Bullying	Incidents of bullying by workers, clients, patients, visitors or others. For example, see *SafeWork Australia: Guide for preventing and responding to workplace bullying*, and *Dealing with workplace bullying - a worker's guide*.
Harassment including sexual harassment	Single or repeated incidents of forms of harassment by co-workers, clients, patients, visitors or others around a person's race, religion, gender, age, disability etc. For example see information from *Safe Work Australia: Guide: Preventing workplace sexual harassment* and *Preventing workplace sexual harassment - guidance for small business* and *Workplace sexual harassment – advice for workers*.
Inadequate reward and recognition	For example, where: • workers' efforts are not recognised • there aren't reasonable opportunities for skills development and fair career advancement.
Hazardous physical working environments	Where there is exposure to hazardous physical working environments to the extent that it evokes a physiological or stress response. For example, due to concerns about exposure to biological or chemical agents where there is inadequate personal protective equipment (PPE).
Remote or isolated work	Arising from the location, time or the nature of the job. For example: • where there is limited access to other people, reliable communication or technology to get physical and emotional support, if required • working alone or in other peoples' homes if accessing help, especially in an emergency, is difficult (such as, where there is potential exposure to violent or aggressive behaviour).
Poor procedural justice (processes for making decisions)	Where there are absent or inadequate, unfair or inconsistent application of the processes, for example: • applying organisational policies or procedures (for example, fair access to preferred shifts or overtime) • allocating work and resources, or • managing job performance.
Poor organisational change consultation	For example, where there is: • poor consultation or communication with other relevant duty holders or affected workers about significant changes • insufficient consideration of the impact of changes on WHS and performance • poor practical support for affected workers during change implementation.

If inappropriate or harmful workplace relationships and behaviours are identified, the PCBU should record these as psychosocial hazards and investigate work-related contributing causes. In some circumstances, poor workplace behaviours may be an inappropriate response to high job demands or inadequate support (e.g. excessive time pressures, lack of role clarity or inadequate training and skills). To effectively control risks, duty holders will need to eliminate or minimise the underlying causes as well as directly addressing unacceptable or harmful behaviours.

REASONABLE MANAGEMENT ACTION

Managing psychosocial hazards and risks may require decisions that may be perceived as causing stress and therefore a WHS risk. However, reasonable management action, when carried out lawfully and in a reasonable way, may be uncomfortable or distressing to some, but is a legitimate way for managers and supervisors to:

- lead, direct and control how work is done

- give feedback and manage performance, including around inappropriate or harmful workplace behaviours

- deal with differences of opinion and disagreements, or/and

- recruit, assign, transfer, implement disciplinary action or terminate employment.

For more information refer to Fair Work Commission guidance material *What does 'reasonable management action carried out in a reasonable manner' mean?*

1.2 INDIVIDUAL FACTORS

While the psychosocial hazards outlined above influence the likelihood and severity of harm, there may be individual differences in how people perceive and respond to the same psychosocial hazards, just as there are with physical hazards.

When managing psychosocial hazards, the PCBU should take into account tasks and activities that may increase risks to particular groups, for example, workers:

- who are younger, in training, older, or who are new to the organisation or doing those tasks

- with diverse language, literacy, numeracy, or cultural backgrounds, or

- who have experienced work-related injury, illness or previous exposure to a traumatic event.

The PCBU's risk management process should:

- identify reasonably foreseeable risks for these workers

- ensure risk controls take these workers' needs into account, and

- ensure a fair and transparent process, so workplace behavioural standards are known and upheld, including reminding all workers of their legal duty not to cause harm through their behaviours to others or themselves while at work.

By talking to your workers, including those from at-risk groups, you can decide if they may need additional support to be healthy and safe at work.

Where non-work-related factors, for example, a worker's personal circumstances or mental or physical health status may increase their risk of harm at work, the PCBU is required to make reasonable adjustments under the *Disability Discrimination Act 1992*.

2. WHO HAS DUTIES TO MANAGE PSYCHOSOCIAL HAZARDS AT WORK?

Everyone involved in the workplace has health and safety duties when carrying out the work; this includes PCBUs and other duty holders.

2.1 PERSONS CONDUCTING A BUSINESS OR UNDERTAKING

Primary duty of care

> *WHS Act 2011 s19(1) Primary duty of care to workers*
>
> *WHS Act 2011 s19(2) Primary duty of care to others*

A PCBU has the primary duty to ensure, so far as is reasonably practicable, the health (including psychological health) and safety of each worker who is engaged, caused to be engaged, influenced or directed by the PCBU while the worker is at work in the business or undertaking. This means that the PCBU must ensure that psychosocial hazards at work are effectively managed by first trying to eliminate psychosocial hazards, and only if that is not reasonably practicable, then by minimising the remaining risks so far as is reasonably practicable. The PCBU's duty to workers includes ensuring the health and safety of workers from harmful acts from third parties, such as clients, patients or their families, and students in educational institutions.

The PCBU must also ensure, so far as is reasonably practicable, that the health and safety of any person who is not one of the PCBU's workers is not put at risk from work carried out as part of the conduct of the business or undertaking.

> *WHS Act 2011 s19(3) What is required to fulfil the primary duty of care*

Examples of what the PCBU is required to do to manage psychosocial hazards include ensuring the provision and maintenance of:

- safe systems of work
- a safe working environment
- the safe use, handling, and storage of plant, structures and substances
- adequate access to welfare facilities at work
- necessary information, training, instruction or supervision of workers, and
- the health of workers and the conditions at the workplace are monitored to ensure any risks remain adequately controlled.

OUTSOURCING, CONTRACTING, PARTNER AND PROCUREMENT ARRANGEMENTS

Outsourcing, contracting, partner and procurement arrangements will affect how work is done and may create psychosocial hazards for workers in organisations involved in this supply chain and others such as contractors or suppliers. The PCBUs must ensure, so far as is reasonably practicable, that their own workers and others health and safety, such as suppliers and contractors are not put at risk by the arrangements.

Duty holders affected by the outsourcing, contracting and procurement must be consulted on clear arrangements made on how the shared duty to protect and promote the health, safety and well-being of workers will be managed by each duty holder.

> *WHS Act 2011 s17 Management of risks*
>
> *WHS Act 2011 s18 Reasonably Practicable*

The PCBU's duty in section 17 of the *WHS Act* is to take measures to eliminate the risk; and if this is not 'reasonably practicable', to minimise the risks 'so far as is reasonably practicable'. In working out what is 'reasonably practicable', the PCBU must take into account and weigh up all relevant matters, including

- the likelihood of the psychosocial hazard or risk occurring
- the degree of harm that might result from the hazard or risk
- the availability and suitability of ways to eliminate the hazard or risk
- what the PCBU knows or ought reasonably to know about the hazard or risk and ways of eliminating or minimising the risk.

Once these factors have been weighed up, the PCBU may consider the cost of the measures to eliminate (or minimise) the risk – but a measure is only considered not reasonably practicable if the **cost** of implementing it is **grossly disproportionate** to the risk e.g. the cost of engineering changes to plant will be high and there is only a slight risk of minor sprains.

Duty to consult workers

WHS Act 2011 s47 Duty to consult workers

WHS Act 2011 Part 5 Consultation, representation and participation

All PCBUs have a duty to consult, as far as is reasonably practicable, with all workers who carry out work for the business or undertaking and who are likely to be directly affected by a health and safety matter. In particular, consultation is required when the PCBU is conducting risk management activities as required by its section 19 duty, and when it proposes any changes that might affect the health and safety of workers. PCBUs' other obligations include negotiating with workers to establish work groups; facilitating the election of health and safety representatives (HSRs) for those work groups; allowing choice of course and paying for HSRs to attend an approved course(s) of WHS training; conferring and consulting with HSRs; and providing them with reasonably necessary resources, facilities and assistance.

WHS Act 2011 s68 Powers and functions of health and safety representatives

A HSR should:

- undertake training on psychosocial hazards and risks, their duties and risk management, and
- talk to workers they are representing about any psychosocial hazards and work-related risks and monitor actions taken to address concerns, and
- raise concerns about psychosocial hazards and risks in relevant meetings with the PCBU and provide feedback to the affected workers whilst protecting privacy and confidentiality where required.

Multiple duty holders

The nature of the work being undertaken may mean that more than one PCBU may have duties to manage the psychosocial hazards. For example, PCBUs:

- who are carrying out work on the same site (e.g. where work schedules and deliveries need to be coordinated so as not to create unreasonable time pressures or ensure safe site access, or where visiting care workers need to know if a client's behaviour may be a risk)
- who together deliver a service (e.g. government agencies who establish the systems and policies that affect the work activities of others), or
- have management or control of a workplace where other PCBUs and their workers are working.

WHS Act 2011 s46 Duty to consult with other duty holders

All persons with a duty under the *WHS Act* must consult, cooperate and coordinate with other persons who owe a duty in relation to the same matter. For example, in managing psychosocial hazards and risks a PCBU will need to consult, cooperate and coordinate activities with partner organisations, suppliers, sub-contractors, building managers or workers.

Duties cannot be transferred

> WHS Act 2011 s14 Duties not transferable
>
> WHS Act 2011 s272 No contracting out

A PCBU cannot transfer or delegate any of its duties to another person. Nor can the PCBU contract out their health and safety duties, but they can consult, cooperate and coordinate with other PCBUs to do the things that will assist them in meeting their duties.

> WHS Act 2011 s16 Each duty holder must comply

Where two or more PCBUs have the same duty, *each* must comply with that duty, even if another duty holder has the same duty. Their requirement to discharge this duty is, however, limited by the extent to which they can influence and control the matter.

Consulting, cooperating and coordinating activities with other duty holders in your contractual networks, including supply chains, will help address WHS risks that often occur when:

- there is a lack of understanding of how the activities of each person may create risks for others
- duty holders assume someone else is taking care of the health and safety matter
- the person who takes action is not the best person to do so.

When duty holders within a supply chain act cooperatively, they can implement more effective controls than when acting alone.

> WHS Act 2011 s15 A person can hold more than one duty

A PCBU can also have multiple duties, for example, if they carry out work for another PCBU as a subcontractor, as a PCBU they hold the primary duty of care, the duty to consult workers, and the duty to consult, cooperate and coordinate, and they must also comply with the duties of a worker noted below.

EXAMPLES OF HOW TO DO THIS:

A PCBU should ensure that their approach to systematic work health and safety management is effective by:

- identifying psychosocial hazards present in their workplace—for example through worker consultation and considering organisational experience, data and surveys
- eliminating psychosocial hazards or minimising psychosocial risk by redesigning the work with safer alternatives
- providing safe systems of work by managing how, where and when work is done, as well as who is involved in performing the work, so the tasks and work are safe
- providing relevant information, training, instruction and/or supervision for workers on how to do the work safely and well, appropriate to their roles and responsibilities in the workplace (including to those responsible for managing or supervising the work of others)
- ensuring where required, actions are implemented early, and monitoring occurs of the work environment, processes and workers' health to prevent the onset of work-related psychological or physical injury or illness.

The PCBU's goal to produce a product or provide, for example, a particular model of patient care, achieve particular educational outcomes for students, or a focus on customer service, cannot override the duty that the *WHS Act 2011* places on the PCBU to ensure, so far as is reasonably practicable, the WHS of their workers and others.

2.2 AN OFFICER OF A PCBU

WHS Act 2011 s27 Duty of officers

Officers, such as company directors, senior managers and executives of government agencies, have an immediate, positive and proactive duty to exercise due diligence to ensure the PCBU complies with the *WHS Act* and *WHS Regulation*.

Each officer of the PCBU must *separately* take reasonable steps to meet their due diligence obligations concerning psychosocial hazards to health and safety. This means an officer must, for example:

- understand their WHS legal duties
- understand the nature of the PCBU's operations and the hazards and risks associated with those operations
- have a method to stay up to date on WHS matters of their organisation including psychosocial hazards
- ensure the PCBU is allocating the financial and human resources and is developing the systematic health and safety management processes required to eliminate or minimise psychosocial risk so far as is reasonably practicable; and
- take active measures to ensure that the above processes have occurred and are effective.

This duty requires officers to actively seek out relevant knowledge and understanding to make a decision or take action. In some circumstances, that may mean they need to rely on others' information. Where this is the case, they should verify the credibility and appropriateness of the sources of information.

EXAMPLES OF HOW TO DO THIS:
An Officer

- understands what their and others' WHS duties are, such as the PCBU's primary duty of care and requirement to consult affected workers
- keeps up to date on WHS in their business, and industry, including on new and emerging issues, by attending information sessions such as conferences, reading relevant publications and journals, and requesting and reading internal information and reports
- understands the operations of their organisation, knows what the common psychosocial hazards are in their organisation, and actively gathers their own information about the hazards in their organisation
- refers to what the guidance says about managing psychosocial hazards at work
- checks that their organisation's approach to systematic work health and safety management has appropriate processes to manage known and emerging psychosocial hazards, is allocating enough resources to manage these, and has effective consultation, coordination and cooperation processes. For example, periodically visits sites to talk with workers and supervisors about hazards
- checks the approach to systematic work health and safety management and key performance indicators are appropriate, seeks out their own information on the organisation's work health and safety performance, and insists that reports are provided to them promptly and their feedback actioned
- takes active measures to ensure that the PCBU is complying with its duties rather than waiting for information to be provided, for example, requesting information on risk assessments and incident notifications.

2.3 WORKERS OF THE PCBU

WHS Act 2011 s28 Duties of workers

While at work, workers must:

- take reasonable care for their own work health and safety
- ensure their actions or lack of action does not harm others, and
- follow reasonable health and safety instructions, policies or procedures. If workers believe these are not adequate, they should provide this feedback, in a reasonable way, to their supervisor or HSR(s).

EXAMPLES OF HOW TO DO THIS:
A Worker

- takes responsibility for their own work health and safety, e.g. follows the safe work systems and lets their supervisor or HSR know if they need additional support
- behaves fairly and reasonably when working with others, e.g. are courteous and follows the organisation's policies and procedures including those to manage the risk of bullying and harassment
- asks supervisors or experienced workers if not sure about something or how to do the work safely or well
- promptly reports to their supervisor or HSR(s) if psychosocial hazards are present or if existing control measures seem inadequate (to enable the PCBU to take appropriate actions to minimise the risks and if required, make reasonable adjustments) and
- follows the organisation's psychosocial health and safety policies and procedures, and standards of behaviour.

2.4 OTHER PERSONS AT THE WORKPLACE

WHS Act 2011 s29 Duties of other persons at the workplace

Other persons at the workplace, for example, clients, suppliers, visitors must:

- take reasonable care for their own health and safety
- take reasonable care that their actions or lack of action do not harm others' health and safety, and
- comply with any reasonable instruction given by the PCBU to allow the PCBU to comply with their WHS obligations.

EXAMPLES OF HOW TO DO THIS:
Visitors and others to a workplace, including suppliers and contractors

- are courteous and respectful of others when visiting worksites
- follow the site's safe work procedures and ask if they are not sure about these and how to do the work safely.
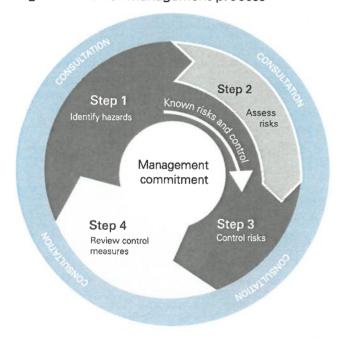
PCBUs requiring deliveries to workplaces do not make unreasonable demands around delivery schedules and conditions.

Principal contractors set reasonable demands for others, for example around delivery schedules and conditions.

3. WHAT IS INVOLVED IN MANAGING PSYCHOSOCIAL HAZARDS AT WORK?

A PCBU must eliminate psychosocial hazards and manage risks to health and safety arising from work so far as is reasonably practicable. As is required for any other hazard, the systematic four-step process described in the NSW code of practice *How to manage work health and safety risks* should be applied to address psychosocial hazards. The four steps are noted in the diagram below.

Figure 1: The risk management process

3.1 ESSENTIAL ELEMENTS OF AN EFFECTIVE SYSTEMATIC RISK MANAGEMENT PROCESS

Leadership and management commitment

Ensuring a genuine commitment to managing psychosocial hazards and risks by leaders and managers is essential for effective systematic work health and safety risk management. To achieve this, they must understand:

1. The WHS obligations of the PCBU, officer(s) and workers

2. the role of leaders and managers (including human resources and WHS managers) to assist the PCBU and officer(s) meet their WHS duties

3. systematic WHS management, including on psychosocial matters, and

4. the business case for WHS, including why managing psychosocial risks is a concern to your organisation.

Consulting workers

Consultation involves sharing information, giving affected workers and others reasonable opportunities to express views, taking those views into account before making decisions on WHS matters, and advising workers of the consultation's outcomes in a timely and appropriate manner.

A PCBU *must* consult, *at each step* of the risk management process, workers who carry out work for them and who are or likely to be affected by a matter and their HSR(s). Consultation should occur as early as possible on:

• new policies, procedures and systems of work

• organisational restructures, new reporting arrangements and work locations

• changes to tasks, duties, and working arrangements, including rosters

• new technology, plant, equipment and production processes, or

• the redesign of existing workplaces.

The consultation processes should suit the organisation's needs and the reasonable needs and expectations of affected workers and take reasonable steps where required to respect an individual's privacy and confidentiality. It should provide workers with:

• clear, timely information on how psychosocial hazards and risks will be proactively identified, managed and monitored, and

• how work can be safely carried out.

Consulting those in your supply chains

A supply chain is a contractual network between an organisation and its suppliers or between agencies to produce and distribute a specific product or provide a service. WHS risks may result from supply chain arrangements, practices, or shared systems. Each PCBU in the supply chain must ensure, so far as is reasonably practicable, the health and safety of all workers that they engage, cause to engage, influence or direct; and must consult all workers that carry out work for them on WHS issues.

PCBUs must talk with suppliers, those commissioning their services, or sharing systems to understand each other's needs and identify common psychosocial hazards, risks and controls, and opportunities to improve the health and safety of all workers and other persons affected by the activities in the supply chain. For further advice, see the Code of Practice *Work health and safety consultation, cooperation and coordination.*

Adequate planning

Before starting the risk management process, it is important to decide on the goals and processes to be used, for example:

- psychosocial hazard identification and risk assessment methods
- who will be involved (e.g. managers, workers, HSR(s) and, where required, subject-matter experts), and their roles in the process
- how appropriate confidentiality around personal information will be maintained
- what human, technical or financial resources will be provided to establish and implement effective psychosocial risk management processes e.g.
  - organisational policies and procedures to support the risk management process
  - information and training to ensure those participating in the process are competent, or
  - arranging in-house or external expert help, if required
- how controls will be selected and implemented

- who will be responsible for communicating the outcomes, and how and when will this be done, and
- how and who will review and document the effectiveness of the controls.

3.2 STEP ONE: IDENTIFY THE PSYCHOSOCIAL HAZARDS

The first step in the risk management process is to identify the psychosocial hazards which may arise from the work context or work content. This involves identifying the aspects of work and situations that could potentially harm people and why these may be occurring. It should also find where hazards and risks are, why they are not effectively managed, and opportunities to improve the quality of the existing controls.

To inform your risk assessment, you should always consider the underlying sources of psychosocial hazards and risks; these are likely to be both external and internal to your organisation. For example:

- the work environment, nature and type of work undertaken by your organisation
- your operating environment and economic pressures
- interactions and behaviours between people at work and within your supply chain (outsourcing, contractors, partner agencies, suppliers or customers) that impact workers' and others' health and safety
- the design and management of your organisation as a whole – structure, and governance, procurement and resourcing decisions
- resourcing decisions affecting work demands, training, instruction and supervision
- design and management of the work tasks and jobs
- design and maintenance of buildings, technology and plant
- hazardous working environments and locations, arrangements with those in your supply chains (e.g. contract requirements such as labour-hire, delivery schedules and penalties, overlapping policies and procedures), and

- significant changes such as downsizing, organisational restructuring, new work arrangements or technologies.

Psychosocial hazards can arise from organisational-wide systems, work practices and cultural issues. Where this occurs, information about psychosocial hazards may need to be collected across the organisation. This can help to confirm if there are widespread risks that need to be controlled. Other psychosocial hazards will relate to specific tasks and jobs, in this case you will only need to collect information from the affected workers.

There is commonly *more* than one psychosocial hazard present, however they can occur as an isolated event.

Some psychosocial hazards will be quite apparent, and others will require a more comprehensive process to identify them and their underlying causes. For example, arising from the business pressures, the way the organisation or work group is structured, how work is designed and managed, or from the actions of others such as contractors, partners, or suppliers.

The hazard identification process should consider if the psychosocial hazards differ between workgroups or teams, functions or workplaces.

Systematically collecting and reviewing available information and data

The PCBU should consider how the organisation's work systems, including operating procedures and governance arrangements influence:

- the nature of the work
- how work is managed and undertaken, and
- impact on workers', supervisors' and managers' attitudes and behaviours.

Relevant information and records should be reviewed; these may include, for example:

- psychosocial hazard and workforce or culture surveys
- outcomes from WHS focus group discussions
- work-related psychosocial hazard and incidents reports

- complaints and investigations into alleged harmful workplace behaviours
- issues raised at health and safety committee (HSC) meetings
- absenteeism, turnover, exit interviews, sick leave data and workers' compensation claims
- business strategy resourcing decisions (e.g. staffing levels, achievements of key performance indicators)
- outsourcing, contracting, partner and procurement arrangements
- advice from WHS professionals, employer organisations and unions
- advice provided by the WHS regulator
- staff skills and experience profiles
- analysis of work tasks, schedules and locations
- duty statements and performance agreements
- WHS and human resources systems, policies and procedures, and
- WHS key performance indicators, including those specific to psychosocial hazards.

Useful insights into potential psychosocial hazards and risks may also be found in project risk management or procurement documents and through your supply chains and networks.

Workers generally know which aspects of the work are creating or likely to create hazards or risks and may have practical suggestions on how to manage these. The PCBU must consult affected workers and their HSR(s) when identifying psychosocial hazards and risks and throughout the risk management process. For example, this can be done through consultative forums, workplace surveys, health and safety committee meetings, and routine or dedicated project meetings between worker(s) and their supervisor.

By talking to your workers and asking about their experience of psychosocial hazards, you can also decide if they may need some additional support so they can do their work safely and effectively.

Observe and talk to workers about work activities

Hazards and risks can also be identified by looking and talking (walk-through/talk-through) with workers about how work is done under:

- normal operating conditions
- during peak workloads, and
- under unexpected circumstances, *including* emergencies (e.g. injury of a colleague or serious workplace incident).

You should also compare this to the work methods described in policies and procedures and check they are appropriate for the different circumstances. It is useful to talk with both experienced and inexperienced workers.

Examples of things to look out for and ask about may include:

- tasks or situations that are generally considered mentally, emotionally or physically very difficult or stressful
- frequent rushing, delays, work backlogs, increased rates of errors or wastage, unexpected incidents, or process failures
- workers improvising how work is done due to time pressures, or inappropriately delaying or avoiding tasks
- concerns about understaffing or inappropriate staff skills mix, inadequate or inappropriate tools or amenities

- significant differences between duty statements and required activities
- complaints that organisational policies, procedures and systems of work that are unsafe or too difficult to follow, or conflicts between patient or customer needs and WHS standards
- significant changes in the behaviours of workers (e.g. incivility, openly criticising others or the organisation, refusing offers of help when it is needed or others requests for help, lack of engagement, low-quality performance or failure to complete tasks/assignments on time, or increased absence from work)
- the behaviour of others at the worksite, including visitors (e.g. suppliers, clients, parents etc.), and
- new technology and equipment changes.

Many psychosocial hazards are quite common, and the risks well known. In these situations, if, after identifying the hazards, you already know the risks and how best to control them, you do not need to assess the risks. You must still consult with the affected workers and HSR(s) when considering proposed controls, on how these will be implemented and when checking if these are effective and working as intended.

For better psychosocial hazard identification, the PCBU should use a combination of information sources such as organisational data, observing work activities and consulting workers.

If you choose to conduct workplace surveys, giving your workers the option to respond anonymously may improve the response rate and quality of the information you receive. Ideally this information should be collected from a representative cross section of workers or through existing structures such as WHS Committees.

The free online and validated Australian Psychosocial Risk Assessment survey and resources which may suit your purposes are at the People at Work website.

3.3 STEP TWO: ASSESS AND PRIORITISE THE PSYCHOSOCIAL HAZARDS AND RISKS

The psychosocial risk assessment process will assist the PCBU in determining:

- the seriousness of the risk (considering both the consequences for affected workers and others and the likelihood of harm occurring)
- which workers are most at risk and affected
- if risks are organisational-wide or apply to specific groups of workers or work tasks
- what controls are currently used (if any), how effective they are
- what controls could reduce the risk(s) to the lowest practical level, and
- the priority for action.

You should do a risk assessment when:

- it is unclear if the psychosocial hazards may result in harm or how they may interact with each other to produce a new or more significant risk(s) of harm, or
- changes are planned, or underway that may impact the effectiveness of controls.

For small businesses, it may be as simple as regular toolbox discussions with affected workers. A more comprehensive process may be required if serious WHS risks have been identified or are suspected.

> A risk assessment is not something that only happens once but should be part of a continuous improvement process.

Some hazards and risks may be widespread, and others only under certain circumstances. Like all risk assessments, you must make sure you consider both the usual work conditions and reasonably foreseeable unusual operating conditions.

Determine the psychosocial risk

When assessing risk, it is crucial to focus the most effort on psychosocial hazards that are severe or can impact large numbers of workers or groups of workers or things that have very high risk of harm for smaller numbers of people.

For new or high-risk activities, a structured task analysis should be completed, including:

- a detailed description of the activities and which workers are undertaking these
- locations, duration and frequency of activities
- necessary information, plant and equipment
- environmental conditions
- mental and physical requirements to do the tasks
- identified psychosocial and physical hazards and risks, and
- any other relevant factors.

Working through the following questions will help determine which aspects of the tasks or jobs pose a risk of harm from exposure to psychosocial hazards and help prioritise controls.

First, make sure you sufficiently understand:

- the main tasks and duties that make up your workers' tasks and jobs
- the number and locations of affected workers
- if psychosocial hazards listed in Table 1 of this code or others identified through your consultation processes are present
- how psychosocial hazard(s) might interact and increase or decrease the risk, and
- the effectiveness of existing controls implemented.

Then consider the following:

- the seriousness of the consequences for workers if exposed including:
  - the severity of possible harm and/or
  - the duration of exposure to harm
- the reasonably foreseeable likelihood that workers may experience harm doing the task or jobs, for example, has harm occurred previously or in similar workplaces?
- next determine consequences and likelihood in combination.

The outcomes and decisions from considering these three factors can help you prioritise action. Consider whether the consequences and likelihood of harm suggest controls are required, and how urgently action is needed to implement these.

Affected workers and their HSR(s) must be consulted as part of the risk assessment process.

To improve the accuracy of this process it is suggested you separately consider and rate risks to health and safety that are:

- unlikely but where the consequences may be very serious to catastrophic, and

- likely or very likely but where the consequences may be less serious.

Combining both groups together means psychosocial risk which is less likely, but may have very serious or catastrophic consequences, may not be given appropriate weight.

3.4 STEP THREE: CONTROL PSYCHOSOCIAL HAZARDS AND RISKS

Every workplace is different. So, the best combination of control measures to eliminate hazards or minimise risks will be tailored to your organisation's business size, type and work activities to manage risks during both everyday operations and emergencies.

Most effort should be on implementing control measures which target the psychosocial hazards identified and assessed in steps one and two. The risk controls can involve good work design across the organisation and/or be targeted to affected work groups and tasks with the highest risks. Targeting controls in this way will provide the highest level of protection for the largest number of workers. These controls will usually also benefit individuals identified to be at risk of harm.

This next section provides information about the considerations and processes you should use to select appropriate controls for your organisation.

Eliminate or minimise risk through good work design

Good work design is concerned with specifying and organising existing and new jobs and tasks of a workgroup (and if needed for individual workers) to be less hazardous. This will help meet organisational requirements to efficiently deliver services or products and assist in minimising harm from psychosocial hazards and risks.

Groups of workers may be exposed to several different kinds of psychosocial hazards and risks. The best and most effective way to control these is at the source, that is, by substituting the current work methods with less hazardous alternatives.

It may not always be reasonably practicable to eliminate the hazard or risk for example, where jobs have some inherent hazards such as shift work, or police dealing with violent or abusive members of the public. Or if by doing so you cannot make your product or deliver your service, or where the cost of implementing the control(s) is grossly disproportionate to the risk.

If a hazard or risk cannot be eliminated, then the PCBU *must* minimise it so far as is reasonably practicable.

When redesigning work, you can consider the psychosocial hazards identified and look for opportunities to turn these into controls to mitigate risk. For example, where there is role overload such as excessive time pressure, role conflict, and poor practical support you could improve scheduling to minimise overload, clarify roles and responsibilities and provide additional practical support. For more information, see Safe Work Australia *Principles of Good Work Design: a WHS Handbook*.

Physical hazards contributing to psychosocial risks should be controlled through relevant isolation and engineering controls for example, the use of physical barriers to help control the risk of violence in the workplace.

Where hazards and risks remain even after the work has been redesigned, then administrative controls, including safe systems of work, and appropriate information, training, instruction and supervision, will also be required. Relying on administrative controls should never be the main risk management approach.

Safe systems of work

Safe systems of work are organisational rules, policies, procedures and work practices that must be developed and followed to ensure workers and others are not harmed by any remaining (residual) psychosocial risks. Systems of work may include rostering, working hours, task rotation and breaks to allow opportunities for rest and recovery, standards and procedures to manage hazardous tasks, and policies and

procedures to manage workplace behaviour (such as bullying and harrassment) or organisational codes of conduct.

Safe systems of work must be developed in consultation with workers and reviewed whenever there are changes to the work activities to ensure they remain appropriate.

Information, training, instruction or supervision

The PCBU must provide adequate and suitable information, training, instruction or supervision to workers (including supervisors and managers) which has regard to and includes:

- the nature of the work and tasks to be carried out by workers
- the psychosocial hazards and risks associated with the work
- the required control measures including safe systems of work and how to comply with these
- how workers should report and respond if a problem or risk arises, and
- ensure information, training and instruction is readily understood by any person it is provided to.

A competent person (someone who has acquired through training, qualification or experience, the necessary knowledge and skills to safely carry out the task) should provide the information, training, instruction and supervision.

Uncertainty about how to safely and efficiently do new tasks including using new technology, or that may not have been undertaken for some time, or tasks undertaken during an emergency, and when working on unfamiliar worksites, are relatively common psychosocial hazards. Providing adequate and timely information, training, instruction and supervision are particularly important where the work has inherent risks (e.g. risk of violence for first responders).

In most cases, psychosocial risk management can use a mix of good work design, safe systems of work, and suitable and adequate information, training, instruction, and supervision. While

PPE is not a common control for psychosocial risks, in some cases, where the absence of or inadequacy of PPE to control physical risks is causing workers' concern, this will also need to be addressed. Some examples of common psychosocial risk controls can be seen in Appendix A.

Reasonable adjustments for individual workers

Duty holders may also need, so far as is reasonably practicable, to make reasonable adjustments to the design and management of the work to accommodate the needs of an individual worker to prevent harm (for example, a worker with a disability or retuning to work after an injury). There may also be duties under anti-discrimination, privacy and other relevant laws that need to be considered.

Controlling residual risks

Before authorising the implementation of controls, the relevant duty holder should do a final check for residual risks that may remain and check the quality of the controls in place to reduce the risk as low as reasonably practicable.

Risk control quality could be rated as follows:

1. Controls are adequate, i.e., hazard/risk is eliminated, or residual risk is insignificant.
2. Controls are in place to the full extent that is reasonably practicable. The controls are not ideal, but there is no better control currently available, or the cost would be grossly disproportionate to the risk. Ongoing monitoring of this risk is needed.
3. Controls are satisfactory and appear to be working adequately. However, more effective controls are known and available and could be implemented.
4. Controls are inadequate. There are known limitations with existing controls, and further action to manage the risk is urgently needed.
5. The risk is uncontrolled. Controls either have not been implemented, or they are grossly inadequate. Immediate action is required.

If, after considering the residual risks and the adequacy of controls, the risk is uncontrolled, inadequately controlled, or controls are considered only satisfactory, further action is

required. When making a judgement, about what additional controls are 'reasonably practicable', the PCBU should weigh up the elements of what is 'reasonably practicable' as set out in section 18 of the *WHS Act*.

Implementing controls

Because the controls you implement may require changes to the way work is carried out, it is necessary to support these with:

- safe work procedure(s) that describe the tasks, hazards, how tasks can be safely done, and the duties, roles and responsibilities of all parties to follow these
- information, training, instruction and supervision of workers on implemented controls including safe work procedures
- appropriate information and instruction for site visitors, and
- a schedule for maintaining, monitoring and reviewing controls to ensure they are effective and are not creating new unintended WHS or organisational risks.

When proposing changes to existing or new controls or workplace arrangements, it is essential you consult affected workers and their HSR(s) as early as possible. For example, on the:

- design and management of the work such as restructures, work locations, changes to tasks, duties, and working arrangements
- new technology, plant, equipment production processes, or the redesign of existing workplaces.

3.5 STEP FOUR: PROACTIVELY IMPLEMENT, MAINTAIN, MONITOR AND REVIEW THE EFFECTIVENESS OF CONTROLS

Managers and supervisors should be provided with the *authority and resources* to implement and effectively maintain controls. Clear accountabilities for monitoring, reviewing and maintaining controls should be allocated.

The information and processes you used to identify hazards and risks will also help you monitor and review the effectiveness of control measures. Do not assume risks will not change or

that controls will remain suitable, sufficient, and effective over time.

Reviews can be used to check whether:

- the approach to systematic work health and safety management is effective
- hazards and risks are being effectively controlled
- the organisation is meeting its WHS obligations, including for due diligence, and
- there are opportunities for improvement.

Reviews should occur:

- before significant organisational or workplace changes occur, for example, changes to the organisational structure, work location, environment, equipment and resources, employment conditions or systems of work
- where a new hazard or risk is identified
- if a serious incident, injury or illness occurs arising from the psychosocial risk, or a psychological injury occurs
- if a physical injury occurs where psychosocial risks were likely to be a contributing factor
- if the hazard changes and you are now uncertain of the risk
- if a control measure is not adequately minimising the risk
- where consultation indicates a review is necessary
- if requested by a HSR
- at agreed review dates, such as annually, or
- where audit results indicate, a review is necessary.

The results of a review of controls should trigger discussions between the PCBU and the duty holders to check they are taking all reasonable steps to manage psychosocial risks.

The PCBU should also have strategies to intervene early (to make necessary changes to the work design) if workers report stress, psychological or physical problems and to provide appropriate workers' compensation arrangements and/or support for return to work if workers have been harmed.

The hazard and risk reporting system should be appropriate for the organisation and proportional to the seriousness and likelihood of potential harm. For example, where there is a reasonably

foreseeable risk of occupational violence, the reporting system should include reviewing the effectiveness of controls for this risk.

Appendix A shows some example scenarios with related hazards, possible controls and approaches to monitor, review and continuously improve systematic work health and safety systems.

Common failures in the risk management process are:

- to focus on poor workplace behaviours by an individual and not identify and or sufficiently control the psychosocial hazards which may be contributing or giving rise to these behaviours, or

- not following the hierarchy of control principles and relying on mainly administrative controls.

4. RESPONDING TO A REPORT OF A PSYCHOSOCIAL RISK OR INCIDENT

While most psychosocial hazards should be identified during the routine systematic risk management process, sometimes the first time a PCBU becomes aware of an incident is when it is reported.

WHS Act 2011 Part 6, Division 1 Discriminatory, coercive or misleading conduct

No person is permitted to undertake discriminatory, coercive or misleading conduct against workers who report a WHS matter, including about psychosocial risks or incidents.

There are various ways in which workers and others including other PCBUs may report hazards and incidents to the PCBU, including for example:

- during discussions between PCBUs with shared duties
- during discussions between workers, supervisors and managers
- entering issues into a risk or incident register
- in emails, mobile text messages, letters about a complaint or a grievance
- workers' compensation claim information, or
- reports from HSR(s) and/or union representatives.

Relevant duty holders should create a positive organisational culture which actively supports early reporting and follow up, so psychosocial hazards and risks are managed before serious harm occurs.

The person tasked with responsibility to respond to reports of psychosocial hazards and incidents should, (in line with privacy or confidentiality considerations) consult and communicate with affected workers including on how they propose to investigate the matter, and the WHS actions and improvements that may be introduced. This person should explain the likely timeframes of the process, provide updates to affected workers, and fair and adequate access to psychological support.

4.1 INVESTIGATING A PSYCHOSOCIAL INCIDENT

Responding to a report of a serious workplace psychosocial incident will mean the PCBU should undertake an investigation in a fair, timely and balanced way to try to find out what happened and why and what can be done to improve the controls, so the incident does not occur again. This process is typically more comprehensive than those used as part of the normal hazard identification and risk assessment process.

The comprehensiveness of any investigation will be proportional to the level of risk, the seriousness of actual or potential psychological harm and the number of workers affected. It will also depend on the business size and available expertise. For example, a small business may choose to have a conversation about the incident with affected workers. In contrast, a medium business may have a larger number of workers exposed and might choose to ask for assistance from an external safety professional, and a large business may use their inhouse WHS and/or external professionals.

When investigations are undertaken, especially around allegations of serious misconduct or harmful workplace behaviours, the PCBU should ensure that:

- those tasked with undertaking the investigation are competent and able to identify psychosocial hazards, sources of risk and root causes, assess the risks and recommend appropriate preventative and early intervention controls, and understand their organisational processes around investigations, and the requirements under both WHS and industrial relations legislation.

- the process is conducted in a fair, objective and timely manner ensuring due process for both those who raised the issue and workers who have had allegations made about them. Including:

  - the privacy and confidentiality of affected parties is protected

  - that throughout the investigation, affected workers (including managers and supervisors) are:

    - informed of their rights and obligations

    - provided with a copy of relevant policies and procedures

    - kept informed about possible outcomes, timeframes, rights of appeal and reviews, and

    - provided with adequate and fair support.

It will not always be appropriate to consult with the affected workers or their representative HSR(s) if the initiating report or subsequent investigation includes sensitive and confidential information about other workers. In this case, it is still useful to provide them with general information about the process and outcomes.

Harmful workplace behaviour is a WHS hazard. In addition to being reported through hazard notifications, it may be reported as a grievance or complaint, or as a potential breach of a code of conduct or professional standards. Where there are existing systems in place to investigate and discipline such behaviour, the workplace should still apply a systematic WHS risk management process to identify, assess and control underlying causes of, and risks of exposure to affected workers of the

behaviour. The PCBU must control the risks whilst investigations are being conducted, so the potential for further harm is eliminated or minimised.

Notifiable incident

WHS Act 2011 Part 3 Incident Notification s35-39

Where there is a notifiable workplace incident; such as a person's death or serious physical or psychological injury or illness requiring immediate treatment as an in-patient in a hospital, the PCBU must ensure that the regulator is notified immediately after becoming aware of the incident and that a record is kept of each incident.

4.2 KEEPING A RECORD OF THE RISK MANAGEMENT PROCESS AND OUTCOMES

Keeping an organisational risk register (see Appendix B for an example) is an optional but helpful way to record psychosocial and physical hazards, risks and incidents and monitor that these have been managed.

You could choose to include only high-level information in the general risk register where you are concerned about the need to maintain confidentiality.

A WHS Inspector may ask to see a copy of any records and ask about processes relating to psychosocial risk management. The PCBU should be able to demonstrate if asked how the psychosocial hazards and any incidents raised or reported by workers and others have been managed. The way the PCBU chooses to demonstrate this will vary and depends on their organisational circumstances. If the PCBU does not have a written record, an inspector could, for example, ask for statements from affected workers.

5. SUPPORTING A SAFE RETURN TO WORK AFTER A WORK-RELATED HARM

The PCBU must adhere to NSW workers' compensation laws, including supporting a worker's safe return to work after an injury. Workers who have experienced work-related psychological or physical harm may require specific medically authorised modifications to their duties.

When someone is returning to work, they may also be exposed to new and or different psychosocial or physical hazards (because they are doing different duties or working in a new worksite). The PCBU must proactively manage any new WHS risks which arise for the injured worker and the work group arising from the return-to-work process and the changed duties or work locations.

Additional advice on intervening early when reports of harm arise and supporting a safe and sustainable return to work is in the Safe Work Australia guide *Work-related psychological health and safety: A systematic approach to meeting your duties*.

If you require further clarification or advice about your WHS duties or about managing psychosocial hazards at work, contact SafeWork NSW on 13 10 50 or by email at contact@safework.nsw.gov.au.

APPENDICES

APPENDIX A. EXAMPLE SCENARIOS FOR MANAGING PSYCHOSOCIAL HAZARDS AND RISKS AT WORK

The control measures you choose must suit the organisational and worker needs and effectively control the risks to the highest level that is reasonably practicable. The tables below outline ten scenarios with common psychosocial hazards and risks, example controls and approaches to maintain, monitor, review and achieve continual improvement of the risk management approach.

Scenario 1. Health Care

Scenario context and work content	Psychosocial hazards and risks	Psychosocial controls	Review and improve
An emergency department in a public hospital triages people requiring acute mental health care. Aggressive and violent behaviour is common. Sometimes it's linked to the patient's clinical condition or sometimes some behaviours are due to patient frustrations and/or drug and alcohol abuse. Workplace culture discourages reporting of all but the most serious incidents and accepts patient/visitor aggression as part of the job. Workers regularly witness violent incidents and are part of the response team when incidents occur. High workloads and/or new policies requiring increased documentation frustrate workers by taking them away from direct patient care. Many inexperienced workers have not been trained in Violence Prevention and Management (VPM) and rely on hospital security officers to respond.	**Role overload:** not enough workers to manage patient behaviours, particularly when patient acuity is high and there is a poor skills mix with more inexperienced workers on the roster. Increased demands from new systems of work compete with existing workloads. **Exposure to Traumatic Events:** workers provide trauma informed care to some patients with extensive histories of trauma. Ongoing exposure to violent incidents has a cumulative effect on workers. Workers responding to incidents are at high risk of injury themselves. Appropriate support may not occur due to role overload. **Occupational violence:** workers have regular exposure to both threats and actual violence from patients. Inadequate rostering means there are not enough trained workers available on all shifts to participate in violence prevention if required.	The organisation managed **role overload and occupational violence** by rostering adequate worker numbers to take into account new systems of work, patient acuity, staff skills mix, and ensure there are adequately trained workers on all shifts to respond effectively to violent incidents. Workers received training in Violence Prevention and Management (VPM) and hazard/incident reporting. An **escalation process** was implemented to senior leadership to make quick decisions to respond to early warning signs, and for when there are differing views amongst the clinical team on patient management. **Exposure to traumatic events** was managed by regular supervision to allow opportunities to consult (for eg safety debriefing, early referral to support services), as well as a peer support program for workers.	Reported incidents are investigated and feedback on investigations and response to incidents is provided to workers. Review of all code blacks (assault on workers) is introduced including both clinical and non-clinical workers. Work is undertaken to improve the incident reporting system and encourage reporting of all incidents and near misses. A more comprehensive violence risk assessment and profile process is developed, and the design of the waiting area is reviewed to reduce, where possible, the frustration experienced by patients while waiting to be triaged.

Scenario 2. School

Scenario context and work content	Psychosocial hazards and risks	Psychosocial controls	Review and Improve
A new governmental policy is required to be implemented with little time for consultation. The school provides for students with complex needs. The changes mean that teachers will need to add to their current workload. This will increase tasks such as face to face teaching and its preparation and planning, data collection and analysis, ongoing assessment, staff meetings, and communications with parents and community. These requirements make it difficult to continue to manage daily incidents and interactions amongst increasingly complex student cohorts, professional learning and development and compliance activities.	**Role overload:** The change has added to the demand on workers. Workers are concerned that to meet deadlines, tasks such as professional learning, reporting and lesson planning are priorities, and therefore will need to be completed outside standard work hours. Workers are also concerned the changes may require learning new skills at a time when they are experiencing difficulty with the existing role overload. **Poor organisational change consultation, poor support and low job control:** Poor change consultation has contributed to the perception that there has been limited consideration of existing workload and poor support to manage the increase in workload from new requirements. Workers have limited say in the decisions about their workload, how the work is done and the changes to their work. There are no clear guidelines to support re-prioritisation of tasks to meet deadlines within the strict timetables of schools.	**Role overload:** The organisation consults with teachers to: • Review current tasks and new demands to prioritise. • Monitor and review the work hours undertaken by teachers and capacity to incorporate new work load associated with this policy. • Employ more permanent teachers to take responsibility for new policy/procedural requirements. • Provide system support centrally available for schools to access. • Ensure that there are enough resources allocated to manage these risks and undertake effective consultation, coordination and cooperation processes. To address **poor organisational change, poor support and low job control,** the organisation will: • Consult with workers about the proposed changes. • Undertake analysis to inform the re-prioritisation of tasks. • Communicate to affected workers how this will change their work and how they might now re-prioritise tasks. • Provide support and required professional learning to undertake additional tasks within core working hours.	The organisation will: • Review WHS procedures and processes to ensure that psychosocial hazards and risks including role overload and low job control are reported and recorded through the systematic approach to managing psychosocial hazards. • Implement cyclical and frequent reviews, both at system and school level, of current task demands of workers. • Monitor progress and impact on affected workers and provide responsive support based on consultation. • Review timetables to ensure that accommodations are made to reduce remote and isolated work caused by the increase in work demands.

Scenario 3. Government call centre

Scenario context and work content	Psychosocial hazards and risks	Psychosocial controls	Review and improve
A government department located in Sydney and a regional city deals with customers' telephone inquiries, some face-to-face requests for help, and takes complaints. There are tightly scripted responses, protocols and service standards to deal with the calls or interactions with limited time allocated to spend with each person. Workers always do the same tasks and their break times are regimented. Customers can become abusive due to long wait times and uncomfortable waiting areas. A recent restructuring occurred, and workers are unsure about their roles and future workloads. A new IT system with new performance monitoring software is making workers anxious as they have not yet all had training on it.	**Role overload, emotionally demanding work and role conflict** from the constant time pressures and required response times which are not adequate for complex matters and risk of verbal or physical abuse from distressed clients. Low **job control** and **lack of task variety** as work is tightly scripted and roles narrow, generally with poor support and recognition of efforts. Lack of **role clarity** and poor **change management** around new IT systems and the restructure.	The organisation, after consulting supervisors, workgroups and HSRs to reduce **role overload** and **role conflict**: • is renegotiating service level agreements and response times so they are manageable with existing worker numbers • has addressed some of the reasons for the role overload, and customer abuse - improved scripts, provided a concierge who triages and offers customers alternatives if wait times are lengthy, and has installed more comfortable furniture in waiting areas. The supervisor, to reduce **role overload/ conflict, emotional demands, low job control, lack of task variety, poor support** and **change management**, is: • triaging complex issues – sending these to more experienced workers first or where this is not possible junior workers can flag if they need help • providing task rotation so workers can build new skills and get a break from stressful calls/interactions • ensuring workers take short breaks, away from their workstation • providing emotional support during and following abusive interactions (e.g. ability to escalate the issue to a supervisor, debrief time and to recover away from the general work area if required) • developed call monitoring policies in consultation with workers and uses these for coaching • ensuring training on the new IT system is provided before it is introduced and relaxes the performance targets until workers are familiar with the new systems.	The organisation: • to identify and assess risks and adequacy of controls gets workers to complete the People at Work psychosocial risk assessment survey and monitors and reviews other WHS data • ensures the leadership team have all completed training on their WHS duties and good work design and are applying these to future restructures and planned IT upgrades • supports workers who want temporary secondments to other parts of the department for two-way learning and a break from the regimented work. The supervisor: • supports workers who want to develop technical or specialist skills, and provides technical and specialist workers with the opportunity to mentor new workers, and • became a member of an industry Mental Health Community of Practice to get ideas and support on managing psychosocial hazards and risks from other peers in the industry.

Scenario 4. Construction company

Scenario context and work content	Psychosocial hazards and risks	Psychosocial controls	Review and improve
A medium-sized residential construction company is currently managing several projects, some are not on schedule, and there is a backlog of work.	**Poor emotional and practical supervisor and manager support:** The manager does not acknowledge the apprentice's concerns or have the time to manage the training of apprentices.	The business owner, after consulting the manager and workers to address **poor workplace relationships, support** and **role overload:**	After consulting with the manager, the business owner:
The manager is responsible for organising the contractors, apprentices, ensuring supplies and equipment are delivered to different sites.	**Occupational violence and poor workplace relationships:** Verbal aggression by the electrician, which could escalate to physical aggression if not stopped, is also having a negative impact on the apprentice's ability to focus on his work. This is also stopping him from asking for help when he needs it.	• meets with the electrical subcontractor to develop behaviour standards for all their workers when undertaking work at the same sites and processes for addressing safety concerns, including violence and aggression	• to identify and assess risks and adequacy of controls gets staff to periodically complete the <u>People at Work psychosocial risk assessment survey</u>
An electrical subcontractor is engaged for all the sites, and the building manager is aware that one of the electricians has been verbally aggressive with a first-year apprentice engaged by the construction business. He tells the apprentice that this is how the industry is, that he does not have time to deal with this and that he needs to toughen up and get on with his work.	**Low job control:** the apprentice has little say in his work.	• informs workers that aggressive behaviour can be reported to him directly	• implements more regular 'look and listen safety walks' multiple times each build
	Role overload demands: the manager and workers experience a high workload with competing deadlines.	• speaks with the apprentice to check on his wellbeing and provide information about psychological support services	• integrates support and mentoring of apprentices into their systems
The apprentice just wants to learn but makes regular mistakes and is afraid to ask for help. He wants verbal aggression to stop.		• reviews the supervision and support of apprentices	• checks in with the apprentice to verify that the verbally aggressive behaviour has stopped
		• decides to reduce the demands on the manager by providing assistance with managing contracts and tenders.	• arranges training for supervisors of apprentices, particularly on managing young and inexperienced workers
		The manager, to improve **support and job control:**	• arranges regular reviews of workplace behaviour grievances and training to be included in the organisations WHS systems
		• starts daily toolbox talks with all workers, including contractors, to provide relevant information and instructions	• ensures the WHS systems are capable of capturing reports of high work demands and harmful workplace behaviour
		• sets time aside each week to understand the first-year apprentice's learning requirements, assess his progress, develop learning goals, gets the supervisor to give him responsibility for some tasks he should be competent to do, and allocates a third-year apprentice to buddy the first-year apprentice to support him on various tasks.	• creates (with workers) a safety culture charter displayed prominently in project offices, around the site etc.

Scenario 5. Small consulting firm

Scenario context and work content	Psychosocial hazards and risks	Psychosocial controls	Review and improve
A busy consultancy firm is based in regional NSW.	**Role overload:** high caseloads, demanding clients, and long working hours with inadequate opportunities for recovery	The business owner, after consulting with the consultants and office administrator to manage **role overload, cognitive and emotional demands, low control, poor support** and **recognition**, now:	As part of the process to improve the controls that can be quickly implemented, the senior partner:
The consultants regularly need to work long work hours and sometimes work alone at night to meet the demanding client turnaround timeframes. However, workers report they are exhausted, and do not have time to adequately prepare material and advice for clients. The culture discourages asking for help and encourages being 'seen to be at the office'.	**High cognitive and emotional demands:** complex technical cases where client's businesses may have financial problems so at times are rude and abusive to the consultants	• checks with consultants about their workloads before allocating new cases to ensure they have spare capacity and that these discussions are courteous and reasonable	• regularly consults workers, reviews the case management systems to identify psychosocial hazards and risks, ensures controls are working, and looks for opportunities to improve these
	Low job control: expectations to be 'present at the office'	• triages and file flags complex cases to better manage role overload and ensure there is extra support where required from a senior partner	• completes training on workload and mental health first aid.
In the past two years, workers are increasingly becoming visibly distressed, reporting feeling burnout and experiencing 'stress headaches'. Several workers have made complaints about unreasonable 'bullying' pressure from their supervisor to meet the revenue targets. Four have young children and are finding it hard to balance high work demands with their home life demands.	**Poor practical and emotional support** from the senior partner and allegations the behaviour borders on **'bullying'**	• allows consultants more job control to work from home, at times, to better manage their work-life balance	
	Inadequate reward and recognition: a culture that long hours and high workload should just be accepted as the norm.	• asks about tricky or distressing cases and provides support, recognition and feedback	
		• creates opportunities for workers to work on more varied cases and provides opportunities for professional development	
		• provides routine mentoring	
		• after talking with the consultants about the alleged bullying, instructed the supervisor to ensure that performance targets discussions are conducted in a reasonable manner and the supervisor was provided with additional support to cope with their own workload.	

Scenario 6. Retail store

Scenario context and work content	Psychosocial hazards and risks	Psychosocial controls	Review and improve
A small busy retail store which is open all week has an ageing building and poorly designed fit-out. There are three permanent and several casual workers who are mainly young workers. Customers often complain and have become aggressive about service delays during peak periods. The manager is sometimes short-tempered, yelling at the workers, especially when it is busy, the stock is being unloaded, and customers are waiting. The storeroom is cluttered and disorganised, which makes the quick collection of prepaid orders difficult. Casual workers often cancel their shift at the last moment, making managing peak periods quite stressful.	**Role overload:** insufficient skilled workers rostered on during peak periods **Hazardous working environment:** the layout makes it difficult to access, load and unload stock **Lack of role clarity:** new casual workers are often unclear about how to do the work efficiently and do not have the skills to help out, like operate the cash register during busy times **Bullying and occupational violence:** from customers and the manager, causing workers to be distressed as they do not know how to respond.	The business owner after consulting workers on **role overload, poor working environment and lack of role clarity**, now: • ensures more workers are adequately trained so they can assist customers and deal with problems • ensures adequate number of experienced workers are rostered during peak periods • arranges, where possible, for supplies to be delivered outside peak periods or for extra workers to be rostered during these times • reorganised the loading dock, storeroom and shop floor to improve safety and efficiency (including dedicated organised space for prepaid orders) and ensured this is maintained by regular safety walks each day • releases the rosters well ahead of time so workers can plan better, and pairs young workers with more experienced workers • ensures new workers have a thorough induction, given busy time tips and trained to use the cash register to manage bullying and violence risks • provided training to all workers, and • put up signs displaying designated queuing areas, and that worker abuse will result in refusal of service, etc • updated the policy and procedures to address identified gaps such as having a specific "service call" that could be made over the loud speaker system so all available team members come to that location to help. Also ensure workers are offered a short time out after incidents to recover and are checked on before the end of shift.	The business owner also: • now has regular team meetings to identify new hazards and risks and check controls are working and visits the store more regularly to talk with and recognise workers for their efforts • also conducts regular visual checks during visits of the storeroom and shop floor so changes are maintained and reviewed • did a course with his industry association on psychosocial risk management and supporting workers with mental health issues • implemented a customer feedback system to understand any causes for their frustration in the store such as unavailable products, long queues.

Scenario 7. Private health care provider

Scenario context and work content	Psychosocial hazards and risks	Psychosocial controls	Review and improve
A large private sector organisation delivers health care and social services to disabled adults and children, some with severe behavioural issues. The activities occur in a range of locations, including clients' homes, and the workers may work alone. The service level agreement with the funding agency has set evaluation targets with demanding reporting requirements. The workload and the clients' challenging behaviour makes it hard to recruit and keep workers. To stay competitive, the organisation needs to diversify its services.	**Role overload, emotional demands and violence:** the high caseload and complexity means performance targets are difficult to achieve in the required time with the existing worker numbers and skills mix. The clients often have distressing circumstances, and client behaviours can worsen if service is rushed. **Working environment, isolated/ remote work:** workers routinely undertake work alone in clients' homes, which may be crowded and difficult to work in safely. New and inexperienced workers often lack **role clarity.**	The Director, after consulting both the professional and office workers to reduce the **role overload, violence** and **isolated work** risks: • is working with the funding agency, where possible, to adjust the service level agreements and reporting standards, including where required, ensure two workers attend to clients with a high risk of aggression • matches the skills and experience of workers to client needs and, where required, allocates two workers • has adjusted the performance targets, so they are achievable with the current workers and skills mix • backfills workers when they are on leave. The team manager to manage **role overload, emotional demands, lack of role clarity** and **risk of violence** is now: • conducting regular work reviews to ensure caseloads are manageable, providing more emotional support to workers, and extra training • ensuring information about the client's home and previous history is considered when developing new care plans • ensuring, before workers first visit the client's home, they check with other service providers to get information on clients' needs and circumstances • ensuring whenever a risk of disturbed or aggressive behaviour is identified, adequate workers and additional time are allocated to provide care, and where possible, care during the high-risk period is provided in a controlled environment.	The business • to identify and assess risks and adequacy of controls gets staff to complete the People at Work psychosocial risk assessment survey and monitors and reviews other safety data • introduces flexible work arrangements and a mentally healthy workplace policy and program • provides information to all workers about the free counselling service and other employee assistance programs.

Scenario 8. Manufacturing business

Scenario context and work content	Psychosocial hazards and risks	Psychosocial controls	Review and improve
A medium sized manufacturing business produces frozen food for sale in supermarkets across Australia. The plant is based in regional NSW and is one of the major employers for the town. To meet the increasing production demands most workers are required to undertake shift work and there have been recent changes to the production software. The main tasks involve monitoring largely automated plant to ensure the cooking and packing processes are running smoothly. Workers always do the same tasks and their break times are regimented. A new production system with new quality software is making workers anxious as they have not yet all had training and are worried about making mistakes. A significant number of the workers are migrant workers and do not speak or read English fluently. There are rumours there are to be changes in the upcoming rosters.	**Role underload** - frequent repetitive and monotonous work but with the need to stay vigilant especially around dangerous areas of the plant. **Low job control** and **lack of task variety** as specific tasks and processes need to be followed to ensure quality standards. **Low job control** - inability to take breaks when required. Lack of **role clarity** and poor **change management consultation** around new software and rosters.	The organisation, after consulting supervisors, workgroups and HSRs to discuss the **role underload, low job control, lack of task variety and role clarity** is: • arranging for workers to rotate every few hours to a new task in the plant allowing more opportunities to learn new skills, reduce boredom and fatigue (so to improve their ability to detect errors), and allow more flexibility to take toilet breaks • ensuring all workers have had training on the new software • introducing a software champion on each shift who speaks the same language as the majority of that shift. **Change management consultation:** The supervisor is ensuring all affected workers have reasonable and equal opportunities for input on the options for changes to rosters. These consultations also brought up suggestions from workers on how to improve some of the packing processes to make them more efficient and save money.	The organisation: • to identify and assess risks and adequacy of controls gets workers to complete the People at Work psychosocial risk assessment survey and monitors and reviews other organisational data • ensures the leadership team have all completed training on their WHS duties and good work design and are applying these to future restructures and planned software upgrades The supervisor: • supports workers who want to develop skills where possible to move to different areas of the plant, and • became a member of an industry Mental Health Community of Practice to get ideas and support on managing psychosocial hazards and risks from other peers in the industry.

Scenario 9. Very small trucking company

Scenario context and work content	Psychosocial hazards and risks	Psychosocial controls	Review and Improve
Bob has been a truck driver for over 10 years and he generally enjoys driving. He and two other drivers contract solely to a large manufacturing company. The scheduling is done by the manufacturer's dispatch manager. The manufacturing company's customers are small retail businesses across NSW, Queensland and Victoria. Over the last two years the manufacturing company has grown and the demand for more frequent and faster deliveries has increased. The number of drivers in Bob's company has not changed. Bob worries about the delivery schedule and has skipped rest breaks to deliver goods on time. On occasion he and other drivers have been delayed due to heavy traffic and abused by angry business owners who then complained to the dispatch manager. Bob has tried raising scheduling concerns without success and thinks if he raises them again, he might lose the contract. He would like to have a say in how deliveries are scheduled but these are arranged between the manufacturing company and their customers.	**Role overload** – delivery deadlines are unachievable and the truck driver is skipping rest breaks to meet those deadlines. **Low job control** – not being able to influence the delivery schedules despite being an experienced driver and understanding the regular reasons for delays. **Poor support from managers** – raising concerns with management has seen no change in the increasing demands of the work. **Occupational violence** – drivers experiencing verbal aggression as customer expectations for supply of goods have not been managed.	The manufacturing company, after consulting with the drivers, to address **role overload, low job control, poor support** from managers and *occupational violence* is: • managing customer expectations by incorporating revised delivery timeframes into their customer online and phone ordering processes • contracting an additional three drivers and distributing interstate deliveries across all drivers to manage risk of fatigue • providing drivers with training in de-escalation techniques for dealing with aggressive customers • providing fatigue management information to all workers. The manufacturing company, after consulting customers, to address **role overload** and **occupational violence** will be communicating to customers: • company policy on delivery timeframes • notifying them in writing that verbal aggression is not acceptable and goods may not be delivered if truck drivers are exposed to such behaviours • requesting that delivery concerns should be directed to the manufacturing company directly. The trucking company manager: • checks in with drivers before agreeing to delivery schedules to ensure these are realistic and encourages early feedback on delivery issues • introduced a system to alert the dispatch manager and retail business if delivery delays are likely.	The manufacturing company: • includes a truck driver representative in the relevant WHS committee discussions • trains all dispatch managers in consolidating orders so that unnecessary trips are eliminated or minimised. The trucking company manager completes training on fatigue management and the effects of psychosocial hazards on health and safety.

Scenario 10. Mining workplace

Scenario context and work content	Psychosocial hazards and risks	Psychosocial controls	Review and Improve
A trainee truck driver with nil previous mining experience has commenced work with a large open cut mine. The trainee has just been signed off to drive solo in the haul truck and works twelve hour shifts on a rotating roster of day and night. Recently the trainee operator has been asked to drive in the rain by the supervisor to meet production demands. The trainee has indicated they do not feel confident about this, but the supervisor instructs them to start driving no matter the conditions. The trainee operator has asked for additional support from the trainer for driving in wet conditions, but this has been ignored. The trainee is not sure what to do in this situation and is not able to find any guidance in the induction material they were given. They have noticed some conflict in the workplace and do not want to make things worse for themselves.	**Low job control**- The trainee has only recently commenced at the mine and does not feel empowered to speak up in fear of losing their employment. **Poor role clarity** - the trainee is not aware of the responsibilities and the requirements of their position at this stage of their training. **Poor support** - the supervisor appears dismissive of the trainee's concerns about operating in the wet, and there appears to be little information on additional training and support when driving in wet weather. **Role underload** - The task of driving a haul truck is monotonous and repetitive. **Poor workplace relationships** - the trainee wants to avoid any additional conflict with their supervisor as there is already conflict in the workplace.	To manage **low job control, poor role clarity and poor support,** the mining operator reviews the overall performance of its safety management system including training and supervision to ensure: • all workers are empowered to seek assistance and help if they need more help to learn and or complete a task. • all workers are aware of the escalation processes if they feel that they are not resolving an issue with their supervisor. • supervisors of trainees receive additional training on managing young and inexperienced workers, including on support networks available. • supervisors and trainees are aware of the requirements of their position during training. • a system is available for mentors or 'buddies' to provide additional support and clarity to trainees. **Role underload** was reviewed in combination with the mine's WHS management plan to develop a specific learning and training program which sets goals and progression.	The organisation will: • review and update the mine safety management system, and health control plan to ensure information on the management of psychosocial hazards is up to date and regularly reviewed. • seek and review feedback from trainee operators about what could be done to improve the training process for trainee truck drivers and operating in wet conditions. This review will consider whether role clarity and expectations of trainees has improved. • undertake a review of workplace behaviour grievances to identify areas of conflict.

APPENDIX B. EXAMPLE OF A RISK REGISTER

Site: Customer service team in Ballina office				Management representative(s): Mark and Ahmet				Worker representatives: Ian, Jen and Tracey				
Date issue raised	Hazard/ situation	Information sources	Harm Consequences	Harm Likelihood	Level of risk	What controls are in place?	How adequate are existing controls?	What further controls are required?	Actioned by and comments	Date completed and comments	Who and how will monitored and review	Review date
30.9.20	Alleged harmful workplace behaviour - bullying when allocating work and managing performance	HR grievances, a psychological injury claim from team, HSC, and verbal reports by a sub-contractor	Severe	Moderate - two workers compensation claims for psychological injury in last 12 months in same team	High	Workplace behaviour/ code of conduct training completed annually.	Not effective - Consult affected workers about possible additional controls	Clarify and prioritise workload and confusion around service level agreements	Ahmet WHS manager did root cause analysis, and work design resulted in improved scheduling, reduced time pressure and improved role clarity. Referred to HR manager (Mark) for code of conduct investigation and allegation not substantiated.	30.10.20	Ahmet to check in with affected workers/ customer service team and manager to ensure controls have addressed underlying issues	27.11.20
11.12.20	Customer verbal abuse (probably due partly to long wait times)	Supervisor -feedback from planning day and Joe noticed during his' walk and listen' visit	Severe	High	High	Signs around the reception area on acceptable behaviour and that verbal abuse won't be tolerated	Not very effective - customers ignoring the signs. Doing a focus group on 17.12.20 with the team and talking to a sample of customers from that office.	Give customers alternatives if wait times will be lengthy, the concierge can let them know about some other ways to get their issue managed. Rotate front office team members to back of house duties every two hours for a break	Tony (supervisor), and Mark and Ahmet arranged for the concierge to start in January, rotating staff this month when training 'back of house' tasks completed	Still underway	Ahmet and Mark to review, still working out the best way to review	29.01.21

THIS CODE OF PRACTICE PROVIDES PRACTICAL GUIDANCE ON HOW TO MANAGE PSYCHOSOCIAL HAZARDS AT WORK