Psychological Health & Safety Program

Part 1 of 2 · Foundation and assessment

HSE ADVISOR CANADA
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Employer / organisation: _____ Scope (site / division): _____

Prepared by: _____ Position: _____

Date: _____ Review date: _____

1. COMMITMENT AND POLICY

REQUIREMENT	WHAT GOOD LOOKS LIKE	Y / N / N-A	EVIDENCE OR GAP
Written policy	A psychological health and safety policy, signed by senior leadership and communicated.		
Named accountability	A senior leader accountable, with a working group that includes worker representation.		
Resources allocated	Budget and time assigned — not an unfunded addition to someone's role.		
Confidentiality commitment	Written commitment on how disclosures are handled and who sees what.		
Integration with OHS	Psychosocial hazards handled through the same hazard management process as physical ones.		

2. THE THIRTEEN PSYCHOSOCIAL WORKPLACE FACTORS — SCORE WHERE YOU ARE

*Score each 0–3: **0** no attention · **1** ad hoc · **2** addressed but not verified · **3** managed and reviewed on evidence.*

#	FACTOR	PRESENT WHEN	SCORE	EVIDENCE OR GAP
1	Psychological support	Coworkers and supervisors respond supportively to psychological concerns.		
2	Organisational culture	Trust, honesty and fairness are characteristic of how work gets done.		
3	Clear leadership and expectations	Workers know what is expected and how their work contributes.		
4	Civility and respect	People are respectful in their interactions with each other and the public.		
5	Psychological competencies and requirements	Roles are matched to workers' interpersonal and emotional competencies.		
6	Growth and development	Workers receive encouragement and support to develop.		
7	Recognition and reward	Effort is acknowledged in a way workers find genuine.		
8	Involvement and influence	Workers are included in discussions about how their work is done.		
9	Workload management	Tasks can be completed successfully in the time available.		
10	Engagement	Workers feel connected to their work and motivated to do it well.		
11	Balance	Competing demands of work and personal life are recognised.		
12	Psychological protection	Workers can ask questions, raise concerns and report mistakes without fear.		
13	Protection of physical safety	Management acts to protect physical safety, which underpins psychological safety.		
Total (out of 39)				

> Do not average this away. A single factor at 0 — most often *psychological protection* or *workload management* — will undermine progress on all the others. Fix the lowest before broadening.

3. HOW YOU GATHERED THE EVIDENCE

- ☐ Anonymous worker survey
- ☐ Focus groups or listening sessions
- ☐ Joint health and safety committee input
- ☐ Absence, turnover and disability data reviewed in aggregate
- ☐ Incident, complaint and grievance patterns reviewed
- ☐ Exit interview themes

Methods used and participation rate:

> **Do not collect what you cannot protect.** Psychosocial data is sensitive. Aggregate it, keep individual responses out of management hands, and tell workers exactly how it will be used before you ask.

Controls, Peer Support and Review

Part 2 of 2 · What the first year contains

Organisation: _____ Program owner: _____

Plan year: _____ Date: _____

4. CONTROL PLAN FOR PRIORITY FACTORS

Take the two or three lowest-scoring factors. Organisational controls first — changing the work beats teaching people to cope with it.

FACTOR	WHAT WORKERS TOLD US	CONTROL (ORGANISATIONAL FIRST)	OWNER	DUE	MEASURE

LEVEL	EXAMPLES
Organisational	Workload redesign, staffing levels, clearer role definition, manager training, changing how decisions are communicated.
Team	Civility standards, meeting norms, involving the crew in scheduling, conflict resolution routes.
Individual	Employee assistance access, accommodation, return-to-work support, peer support.

5. PEER SUPPORT PROGRAM OUTLINE

REQUIREMENT	WHAT GOOD LOOKS LIKE	Y / N / N-A	EVIDENCE OR GAP
Purpose defined	Peer support is early, informal, confidential connection — not counselling and not a clinical service.		
Scope boundaries written	What peers do, and explicitly what they do not do.		
Selection criteria	Volunteers chosen for trust and approachability, supported by leadership.		
Training delivered	Active listening, boundaries, recognising when to refer, self-care for the peer.		
Referral pathways	Clear routes to EAP, benefits, community services and emergency support.		
Confidentiality and its limits	Written, explained to peers and communicated to workers up front.		
Support for the supporters	Debriefing and supervision for peer supporters — the role carries load.		
Program promotion	Workers know it exists, who the peers are, and how to reach them.		

Peer supporters identified:

Peer support is not a substitute for fixing the work. If workload, civility or psychological protection are the low scorers, a peer program without organisational change asks workers to absorb a hazard the employer created.

6. CRISIS AND CRITICAL INCIDENT RESPONSE

REQUIREMENT	WHAT GOOD LOOKS LIKE	Y / N / N-A	EVIDENCE OR GAP
Critical incident response plan	What happens in the hours and days after a fatality, serious injury, violence or a death by suicide.		
Trained responders identified	Internal and external, named and reachable.		
Manager guidance	Practical guidance for supervisors on what to say and what not to say.		
Follow-up scheduled	Support that continues past the first week.		
Return-to-work process	Accommodation process for psychological injury, aligned with your duty to accommodate.		

7. MEASURE AND REVIEW

REQUIREMENT	WHAT GOOD LOOKS LIKE	Y / N / N-A	EVIDENCE OR GAP
Leading indicators tracked	Participation, training completion, engagement scores, time to close reported concerns.		
Lagging indicators tracked	Absence, turnover, disability claims, complaints — in aggregate.		
Reassessment scheduled	The thirteen-factor assessment repeated on a defined cycle.		
Results communicated back	Workers hear what the survey said and what changed as a result.		
Annual management review	Documented, with decisions and resource commitments.		

> Telling workers what you heard and what you did about it is the single highest-return action in the first year. A survey with no visible response suppresses the next one.

PROGRAM OWNER SIGNATURE _____ DATE _____

SENIOR LEADERSHIP SIGNATURE _____ DATE _____

8. WHERE THE DUTIES APPEAR

JURISDICTION	WHERE IT APPEARS	WHAT IT REQUIRES
Quebec	Act respecting occupational health and safety (CQLR, c. S-2.1), ss. 59 and 61.2	The prevention program and the action plan must identify risks that include psychosocial risks related to work.
Federal	Work Place Harassment and Violence Prevention Regulations (SOR/2020-130), under Part II of the Canada Labour Code	Harassment and violence prevention in federally regulated workplaces.
British Columbia	WorkSafeBC bullying and harassment requirements	Employers must implement procedures for responding to reports or incidents of bullying and harassment.
Ontario	Occupational Health and Safety Act, s. 32.0.1(1)	Employers must prepare written policies on workplace violence and workplace harassment and review them at least annually.

Sources: Legis Québec, S-2.1; Justice Laws, SOR/2020-130; WorkSafeBC; ontario.ca, OHSA; standard: Accessibility Standards Canada database. Other provinces differ; check yours.

Want help applying this?

Our consultants (CRSP Certified · COR & ISO 45001 Lead Auditors) can adapt this to your workplace or review your safety program with you.

(647) 620-5278 · info@hseadvisor.ca · hseadvisor.ca/contact

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