

CSSHSA Psychological Health and Safety Environmental Scan

Findings and
Recommendations

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In Partnership with
People Working Well

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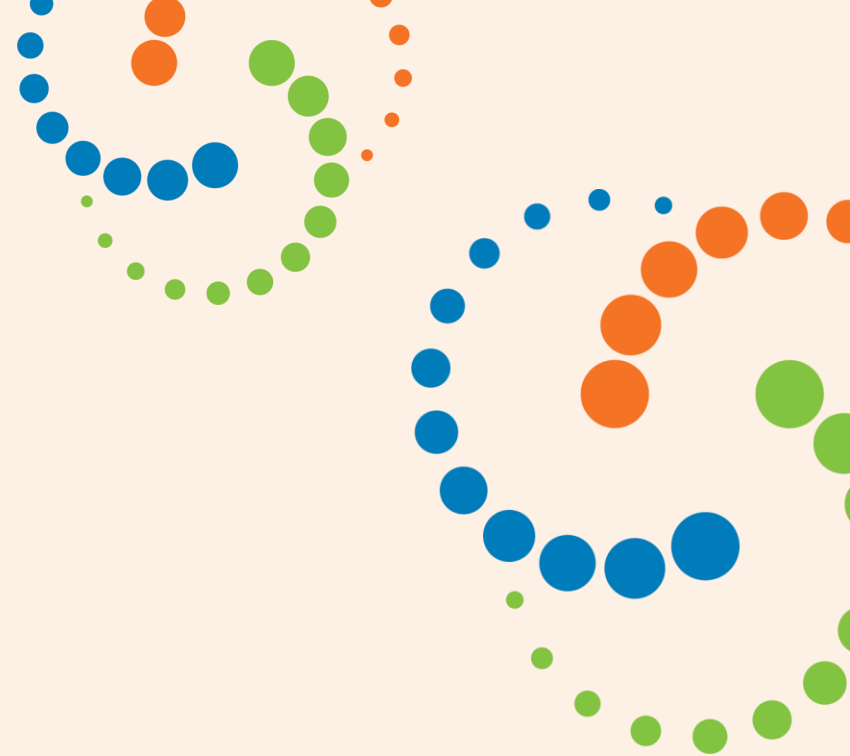


TERRITORIAL ACKNOWLEDGEMENT

CSSHSA humbly and respectfully acknowledges the unceded lands of more than 200 distinct First Nations in British Columbia.

We further acknowledge that colonization and associated attitudes, policies, and institutions have significantly changed Indigenous peoples' relationship with this land.

In our work and in our lives, we are committed to listening and learning, to truth and reconciliation, and to finding better ways of being on this land.



Purpose and Background

The community and social services industry is vital in supporting vulnerable populations in British Columbia. However, workers in our sector face mental health challenges due to high levels of emotional strain, heavy workloads, limited resources, and trauma exposure. The mental health of workers has increasingly been linked to the work environment, thus the work environment is a key factor to impact worker mental health. A growing body of research supports that individual and organizational improvements can be achieved by using a health and safety lens of risk identification and mitigation.



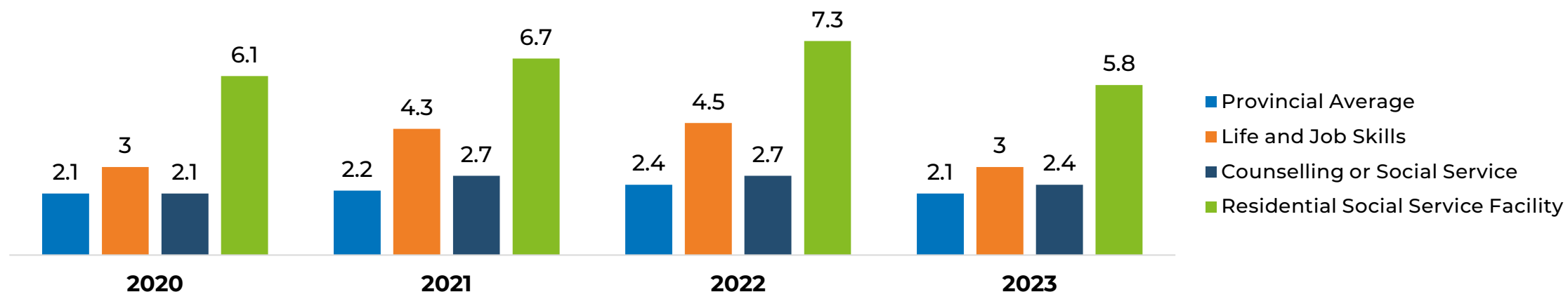
The purpose of the study was to develop recommendations for the sector, by collaborating and partnering with organizations, in order to help member organizations improve Psychological Health and Safety and achieve better mental health outcomes.

This environmental scan is a starting point to initiate the conversation around mental health and psychological health and safety in the sector. Our goal is to continue to collaborate and learn from each other on what is working well, and explore areas of improvement.



Injury Rates in Community Social Services

Injury rates in the community social service sector continue to be some of the highest in the province. To learn more, review our [2024 injury trends report](#).



Residential Social Service Facility covers organizations that provide supported residential living arrangements for individuals in need of shelters and/or some supervision. Examples of facilities covered include group homes, shelters, transition houses, halfway houses to name a few. The injury rates in this group are **176% higher as compared to provincial average**.



Psychological Injury Only Claims

By industry subsector and CU, 2019 – 2023 | Five-Year Summary, listing industry subsector and classification units with more than 25 psychological injury claims accepted in 2023.

	Psychological injury only claims reported					Psychological injury only claims first allowed in year				
	2019	2020	2021	2022	2023	2019	2020	2021	2022	2023
Total - All Sectors	4,506	4,438	5,455	5,902	6,791	1,718	1,626	1,742	1,982	2,208
Health Care and Social Services	1,659	1,760	2,321	2,498	2,977	730	785	876	948	1,094
Acute Care	520	532	762	877	1024	208	219	244	300	323
Pre-hospital Emergency Health Care	279	322	427	357	369	199	233	260	242	217
Residential Social Service Facility	150	177	236	294	391	81	103	105	121	171
Community Health Support Services	203	229	281	301	354	79	72	87	83	132
Counselling or Social Services	173	145	187	213	270	64	60	69	77	112
Long-Term Care	225	239	284	314	359	64	64	68	71	91



The number of psychological injuries reported and accepted continues to rise in the Social Services sector. In 2023, the number of psychological injury claims reported, **exceeded the number of claims reported by BC paramedics** (pre-hospital emergency health care) for the first time. This is potential an alarming trend since the paramedics have the highest WSBC rates in the province.



Caring for Communities

Why is Psychological Health and Safety important?

Psychological health and safety is crucial in Community Social Services, impacting both staff well-being and client care.

Here are ten key reasons why it's essential to prioritize mental health in the workplace.

1 Employee Well-being

2 Workplace Productivity

3 Participant Care Quality

4 Burnout Reduction

5 Staff Retention

6 Trauma Mitigation

7 Legal & Ethical Responsibility

8 Workplace Morale

9 Psychosocial Risk Prevention

10 Resilient Workforce



Project Method

The following methodology was used to collect data for the environmental scan:

- Conducted literary research to identify best practices, industry trends and risks
- CSSHSA identified key leaders for interviews and semi-structured interviews explored perceptions of PHS, how risks were addressed, and what improvements were needed.
- Facilitated three semi-structured volunteer focus groups of direct service providers identified by CSSHSA from across the sector.
- Information was reviewed, thematically organized, and recommendations formed.



Definitions



Psychological safety: the absence of harm and/or threat of harm to mental well-being that a worker might experience.



Psychologically healthy and safe workplace: a workplace that promotes workers' psychological well-being and actively works to prevent harm to worker psychological health including in negligent, reckless, or intentional ways.



Hierarchy of controls: Is a way of determining which actions will best control exposures. The hierarchy of controls has five actions – to reduce or eliminate hazardous workplace exposure. The preferred order of action based on general effectiveness is 1) elimination 2) substitution 3) engineering controls 4) administrative controls 5) personal protective equipment.



Project Limitations

CSSHSA recognizes that this project was a limited industry scan and may not represent the entire sector. The focus was on PHS, with participants sharing both safe experiences and more commonly, PHS risks. The research does not quantify the presence of identified risks.

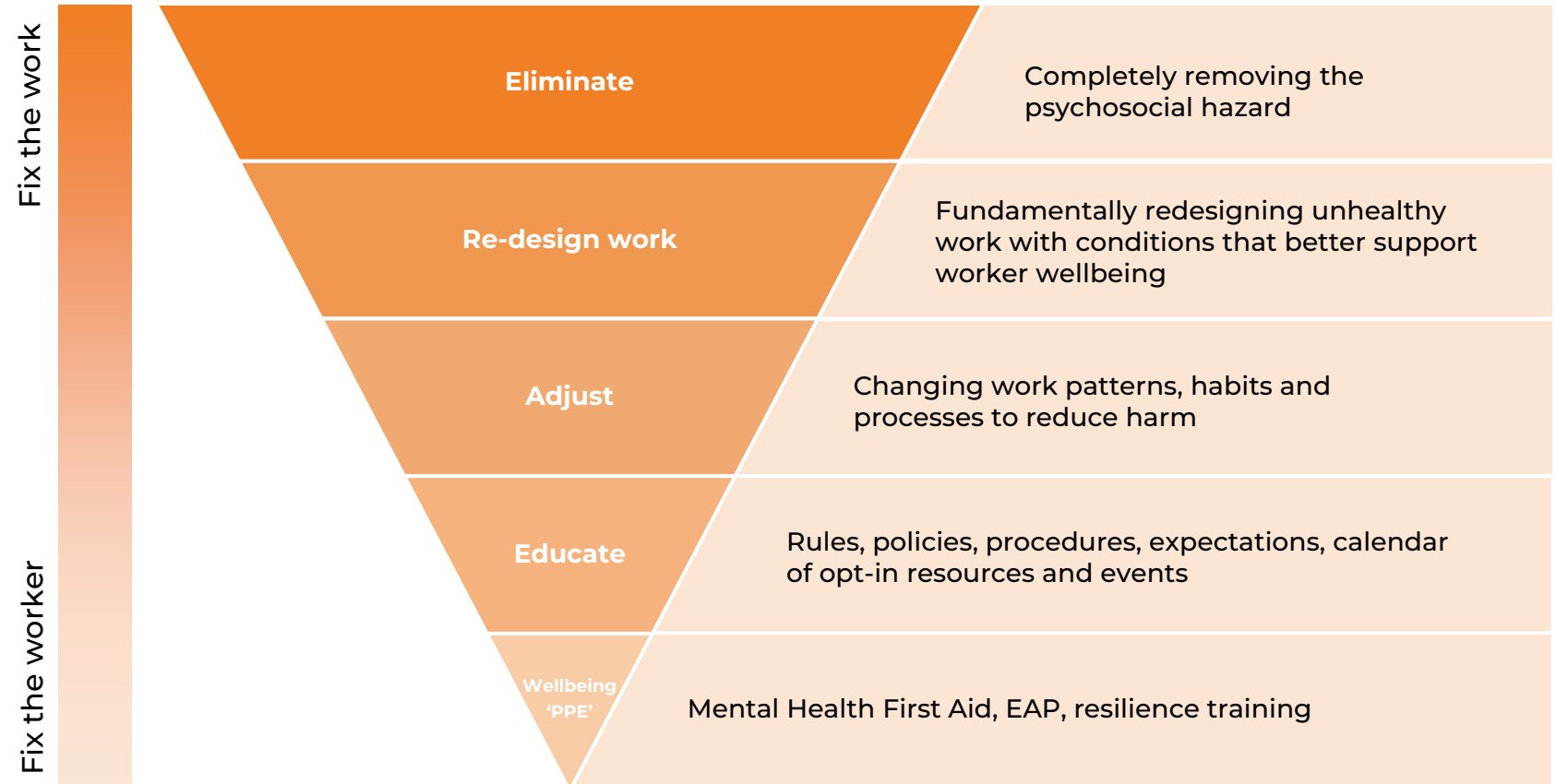
This report provides a high-level review to inform CSSHSA's PHS strategy. The findings were thematically reduced, prioritizing known risk factors for poor mental health outcomes.



Psychosocial Hierarchy of Controls

Health and safety management involves developing mitigation strategies through a hierarchy lens.

The hierarchy of controls is a way of determining which actions will best control exposures. The hierarchy of controls has five actions/levels.



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Strengths Identified by Participants

The following represents information provided by project participants through interviews and focus groups. The comments represent the perspective of participants from their experience of their organization; therefore, the observations will not apply to all member organizations:

- Staff and leaders are compassionate and care about the work they do
- Many expressed strong values aligned with helping and supporting others
- Some organizations appear to have effective strategies to mitigate risk to personal psychological health amidst environments with hazards ie. Shift debriefing, mentorship for new staff, colleague check-ins, safe spaces to retreat to.
- Examples of thorough onboarding that prepare workers for their role
- Some individuals seem to have developed skills to maintain personal psychological health and wellness despite repeated exposure to psychological hazards.
- Shared interest and a desire to stay healthy and thriving in a challenging work role
- Some reports of supportive supervisors/managers that had significant impact for individual coping.



Risk/Hazards Identified by Participants

The following are some risks and hazards identified by participants:

- Under resourcing in the sector
- Uncertainty about what constitutes an effective self-care plan
- Difficulty working with vulnerable populations while managing their own mental health and substance use concerns
- Limited knowledge on burnout prevention
- Lack of safe space to escape risky situations, calm down, recover, and prepare to return to client-facing environments.
- Isolation at work
- Acceptance of aggressive behaviour as being “part of the job”
- Being unaware/uninformed of risks before starting job
- Being unaware/uninformed about risky participants
- Understaffing
- Exposure to death and suffering of participants and of colleagues
- Lack of access to mental health services
- Leaders feel isolated in their roles and have difficulty balancing budgets with worker safety



Participants Suggested Improvements

Participants were invited to provide suggestions to remedy the PHS risks in their work. Some excellent ideas were generated:



Improve screening at hiring by ensuring people know what they are getting into



Make sure everyone has access to mental health care: create universal access for the industry



Create small refuge areas in high hazard work areas where workers can retreat, regroup and recharge



Build in clinical supervision - not all direct service employees have professional associations that provide access to clinical supervision.

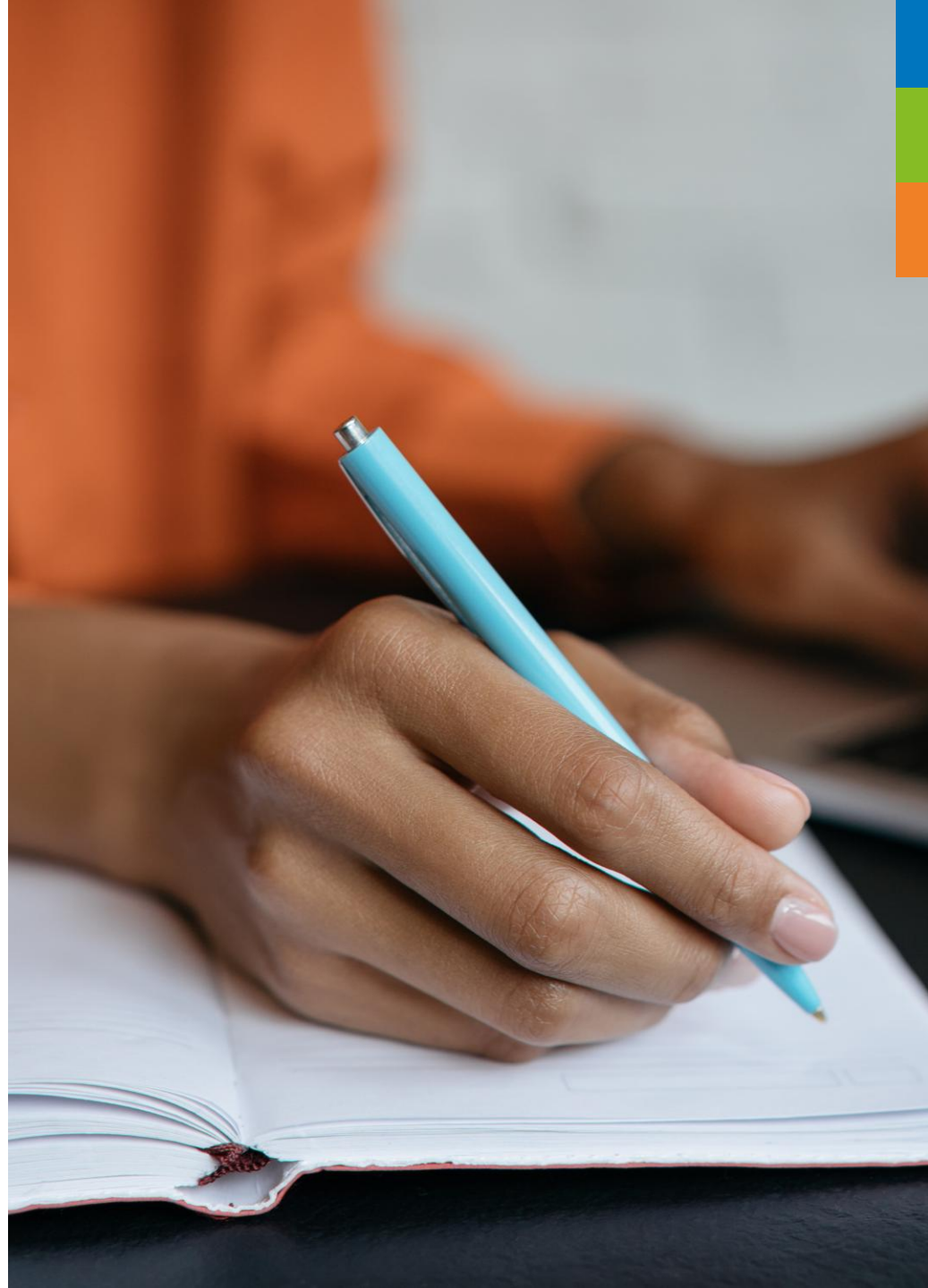


Recommendations

Throughout this research project, the shared compassion and value of caring for others was revealed in every contact. It is powerful to witness the drive of the people working in this industry to continue their important work despite the human cost they know, experience and observe sometimes daily. During this brief project encounter, we were privileged to hear from a cross section of the sector workers and leaders who share concerns for everyone working in it.

Many of the observed PHS concerns stem from the system in which the community and social service sector operates. We believe that CSSHSA is uniquely positioned to influence system through strategic information sharing and continue to gather sector data and speak to the collective experiences across industry.

What follows is a list of actions and goals that CSSHSA has initiated, will be initiating or is considering to action to reduce the risk of psychological injury in our sector.



Recommendations: Partnerships

We will develop a strategy to link partners from within the sector and those who have interest in the sector. CSSHSA will maximize the impact of its actions and use its role as a facilitator and resource provider:

- Develop collaborative partnerships with WorkSafeBC, Ministry partners, and other industry shapers
- Collaborate with the OHS committees from member organizations
- Promote and improve existing Peer Support Programs
- Create a leadership and mentorship group
- Develop employee resource groups



Recommendations: Tools and Resources

We will develop a tools, education and resource strategy in alignment with Psychological Health and Safety Standard and best practices.

- Explore options for access to quality mental health care for all workers who are exposed to psychological risks
- Develop a toolbox of resources for member organizations relating to psychological health and safety and support integration into existing health and safety management systems (HSMS)
- Research evidence-based best practices
- Develop healthcare provider directory of occupationally aware clinicians
- Develop training for supervisors on PHS
- Provide a learning forum on key PHS topics



Recommendations: Communication

- **Develop communication strategy to keep the sector informed about the psychological health and safety project; include multiple communication pathways:**
 - Website
 - Webinars
 - Newsletters
 - Community of Practice
 - Resources
- **Generate a report with trends to share with member organizations.**





CSSHSA wishes to thank all our partners for the continued support as we engage with the sector to develop this important work.

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