

Alberta Health Services a Brief History – Working to Create a Psychologically Healthy and Safe Workplace

Timeline

2008: Concept of psychological safety was introduced

April 2009: AHS was formed

2011: Collaboration between AHS Mental Health & Addictions and Workplace Health and Safety (WHS). Hired Morneau Shepell to complete a literature review of what exists within workplaces to create a psychologically healthy and safe workplace.

2012 to 2014: Minding the Workplace: Psychological safety & mental health in the workplace pilot project. Work with the Mental Health Commission of Canada (MHCC) and four internal groups (WHS, Infection Prevention Control (IPC), Westlock hospital, Glenrose hospital) to assess psychological health and safety (Guarding Minds @ Work survey) and test out a variety of tools to create awareness and improve mental health and psychological safety at work.

2010 - Present: Violence in the workplace work

 Working to prevent harm (both physical and psychologically) through policies, process, supports and training.

2013: Launch of CAN/CSA-Z1003-13/BNQ 9700-803/2013SA Psychological health and safety in the workplace – Prevention, promotion, and guidance to staged implementation standard.

2012 to Present: Development of tools, online education and resources to create awareness of psychological health and safety and mental health for AHS employees and leaders.

- Toolkits:
 - Making AHS a Psychologically Safe Workplace: A toolkit for managers
 - Manager Toolkit to Address Bullying
 - Employee Toolkit to Address Bullying

С

- Online education:
 - o WHS Supporting Mental Health in the Workplace
 - WHS Introduction to Psychological Safety and Mental Health for Leaders
 - Integration of the importance of psychological health and safety in:
 - AHS Annual Continuing Education (ACE) Safe, Healthy & Inclusive Workplace
 - New employee orientation
 - New leader orientation
- 2013 to 2018: Not Myself Today: Stigma reduction campaign available to AHS via the Wellness Champion Network
- Worked with over 200 units to complete the GM@W needs assessment and assisted leaders to make improvements in their teams improving the psychological health and safety.
- Lots of other supports and tools are available i.e. EFAP, peer support, etc.

2016: Our People Strategy (OPS) is one of four foundational strategies that guide AHS' efforts to sustain safe, high-quality health care in Alberta. OPS addresses a critical success factor for the other three strategies: an engaged workforce connected to our collective efforts to improve Alberta's health care system.

2016 to Present: EMS Psychological Health and Safety committee developed to address EMS specific concerns linked to mental health in the workplace.

2017: Launch of the AHS Psychological Health and Safety Steering Committee (PHSSC)

- **2017:** AHS makes a public commitment to psychological health and safety (in collaboration with the By Health, For Health Collaboration).
- **2018:** PHSSC develops a plan to improve and maintain psychological health and safety within AHS (placemat).

Work with Mental Health Commission of Canada

2014 to 2016: Participation in the MHCC – Case Study Research Project

Goal of the MHCC – to follow a number of organizations (~40 across Canada) as they
implement the National Standard for Psychological Health and Safety in the workplace.

2016 to 2017: Participation in the one year MHCC – Case Study Research Sustainability Project

 Goal of the MHCC – to follow a few Canadian organizations (across Canada) to identify key factors or necessary elements required for successful sustainability of implementation of the Standard.

2016 to Present: Work with the Mental Health Commission of Canada (MHCC) and 20 other Canadian health care organization on the *By Health, For Health Collaborative.*

• Goal of the MHCC – to work with Canadian health care organizations to identify health care specific needs related to psychological health and safety and to develop supporting tools.

2018: Asked AHS employees to complete a survey that will identify what is working and areas for improvement related to psychological health and safety.

What makes us different?

- The commitment and interest of our senior leadership hence the development of the PHSSC
- Because of our size recognizing that one thing will not work for everyone. Thus a variety of
 options, supports and approaches will help teams/leaders/employees to maintain and improve
 the psychological health and safety of their workplace.
- Our foundational strategies specifically OPS which is for our people working to create a better workplace overall with the hope of improving patient care.
- The many leaders and staff who have taken it upon themselves to create a psychologically safe workplace i.e. Angela, Rockyview Hospital Mental Health unit, Glenrose Hospital, etc.
- We have a group dedicated to helping to improve the psychological health and safety within EMS with a focus on supporting employees to maintain and improve their mental health.

Next steps:

- The PHSSC will continue to work towards obtaining its goals as outlined in the placemat
- The data collected (MHCC survey completed in April and the gap analysis of the CSA Standard Audit) will inform next steps for the PHSSC.
- AHS will be adhering to Bill C30 which will work to support the mental health and psychological safety of our people.