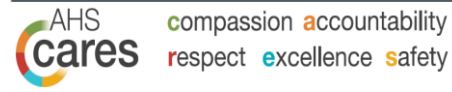


Healthy Communities.
Healthy Albertans.
Together.

To provide a patient-focused, quality health system that is accessible and sustainable for all Albertans.



Purpose & Strategic Alignment

Enablers and Risks

Purpose/Problem Statement

To lead psychological health and safety for our people by providing oversight, direction and support for initiatives that contribute to a safe, healthy, inclusive and supportive place to work.

Enablers

- Active support and endorsement from Executive, the Board and Leadership.
- Psychological Health and Safety embedded in all aspects of Our People Strategy.
- Alignment with the Patient First Strategy, Information Management / Information Technology Strategy, and the Research and Analytics Strategy.
- Positive and consistent reinforcement of AHS Values.
- Meaningful engagement with all levels and areas of the organization.
- Psychological Health and Safety and Mental Health resources and activities must be easily accessible and visible.
- A comprehensive change adoption and communications plan and common language.
- Preparing and supporting our leaders.
- Identify roles and create awareness of those roles to our people.

Strategic Alignment

The Psychological Health & Safety Steering Committee is aligned with Our People Strategy (OPS) and enables OPS Action Plan deliverables.

Risks and Barriers

- Lack of understanding, “buy in”, negative responses from stakeholders (employees, leaders, volunteers & physicians) who do not see a need to create a psychologically healthy and safe workplace.
- Lack of awareness of existing initiatives and their effectiveness / impact.
- Ability to adequately fund, resource and sustain psychological health and safety initiatives.

Principles, Guidelines & Behaviours

- Our behaviours and decisions will be grounded in our organizational values and support our Code of Conduct, Just Culture and the principles of patient and family-centered care.
- AHS and all health care providers have a shared responsibility for their own and their co-workers health, safety and wellbeing.
- Living our values of Compassion, Accountability, Respect, Excellence, and Safety are core to psychological health and safety.
- We will collaborate with each other, our patients, their families and our external partners to find the right balance between organizational consistency and local needs.
- Our work to create a psychologically healthy and safe workplace will reflect and align with the legal requirements, occupational health requirements, and the spirit of Alberta’s Human Rights Act.
- We will collaborate with subject matter experts within and outside of AHS.
- We will align with Collective Agreements.

Linkages and Dependencies

- Identify and work with projects and activities that will impact or be impacted by the PHSSC work. This work will include but not be limited to:
 - Helping Healers Heal
 - EMS Psychological Health & Safety Steering Committee
 - Prevention of Violence
 - Diversity and Inclusion
 - Respect in the Workplace
- Ongoing work with the By Health, For Health Collaboration which includes the Mental Health Commission of Canada, 20 Canadian health care providers and Health Care Canada.
- Strong linkages and dependencies with AHS Addiction & Mental Health, Alberta’s Workers’ Compensation Board, Employee and Family Assistance Program, Great-West Life, our unions, Alberta Medical Association and Canadian Mental Health Association.

Steering Group Focus (Strategic Direction)

Project Team Focus (Operational Implementation and Monitoring)

Our Committee Goals

What will be different when the project is done.

Success Measures

Key measures for each goal to gauge the successful outcome of the project.

Psychologically Healthy & Safe Work Environment

A work environment that is psychologically healthy & safe for our people (AHS employees, physicians, contractors and volunteers).

1. By June 30, 2018, at least three (3) strategic opportunities have been identified and plans of actions developed.
2. AHS can measure progress on a Psychological Health and Safety Strategy for our people by March 31, 2019 and for contractors by March 31, 2021.
3. By March 31, 2020, AHS meets the Canadian Standards Association – Workplace Psychological Health and Safety Standard (CAN/CSA-Z1003-13/BNQ 9700-803/ 2013) as per the CSA audit tool.

Workplace Competence and Capacity

Our people (employees and leaders) are empowered to create and support a psychologically healthy and safe workplace.

4. Workplace Engagement scores on Our People Survey are improved year over year in areas linked with psychological health & safety.
5. By March 31, 2021, 80% of our people are in agreement that their psychological health and safety needs are identified and addressed.
6. By June 30, 2018, a variety of supports are available.
7. By March 31, 2019, a list of high priority gaps in resources is available.
8. By March 31, 2020, a wholesome and robust series of supports is available to all employees, physicians and volunteers.

Governance and Stewardship

A robust industry leading and sustainable governance infrastructure to guide and support a psychologically healthy and safe workplace.

9. By March 31, 2018, a framework and governance structure is in place to monitor and align work related to psychological health & safety.
10. By March 31, 2020, PHSSC governs internal groups and initiatives.
11. By March 31, 2021, PHSSC priorities and direction area aligned with key external groups and initiatives.

Committee Pathway to Reach our Goals

Broad activities and key milestones to achieve one or more of identified smart measures.

- A. Identify, develop and implement strategic opportunities and directions on workplace psychological practices. [Measures: 1, 2 and 3]. Develop guiding coalitions to:
 - i. Complete an inventory of what we have (supports, resources and education) and evaluate their effectiveness. Based on the outcome, determine what to continue to support and what to change.
 - ii. Complete a gap analysis and literature review of best and promising workplace psychological safety practice and mental health in the workplace.
 - iii. Plans of action with recommended strategic directions are developed and approved for
 - psychologically healthy and safe work environments; (we will work to put in controls for the workplace to prevent psychological harm) and
 - the promotion, protect and support our peoples mental health (we all have a responsibility for our mental health, it fluctuates on a continuum, the workplace can promote it but it is the individuals responsibility to take care of their mental health)
 - iv. Plans of action for each strategic directions (psychologically healthy and safe workplace environments and mental health) are implemented (implement Aii).

- B. Develop and implement an AHS Governance Framework for psychological health & safety. [Measures: 4, 5, 9, 10, and 11]
 - i. Committee and sub-committee structure.
 - Diversity & Inclusion.
 - Helping Healers Heal.
 - Violence in the Workplace.
 - Emergency Medical Services Psychological Health & Safety.
 - Respect in the Workplace.
 - Process for introducing new sub-committee structures.
 - ii. Develop and implement a cohesive monitoring and reporting approach for sub-committee to update PHSSC and other sub-committee.
 - iii. Develop and implement a robust Change Adoption and Communication Plan to ensure AHS is aware of the purpose and scope of PHSSC.
 - iv. Program evaluation: Develop and maintain an evaluation approach for all work.
 - Identify the impact of existing initiatives (linked to Ai). If they are effective, create greater awareness of the supports and measure ongoing impact.

- C. Build a platform of supports where AHS employees, physicians, contractors and volunteers can access resources when needed to help them to be psychologically healthy and safe. [Measures: 4, 5, 6, 7 and 8]
 - i. Identify, define and scope what is needed and what we can provide in the PHSSC psychological safety action plan.
 - ii. Supports that are currently available, are identified and easily accessible for AHS employees, physicians, contractors and volunteers.
 - iii. Gaps in resources are identified and resources or supports are made available to fill the gaps.
 - iv. Determine how the supports will be made available to employees, physicians, contractors and volunteers.

- D. Align work, outcomes and supports for employees, physicians and volunteers. [Measures: 9, 10, 11]
 - i. Connect, support and align existing work related to creating a psychologically healthy & safe workplace.
 - A list of teams and areas of work focusing on psychological healthy and safe workplaces including scope of work is created and a process to maintain the list is implemented. (Connected to Ai and Biv)

Project Management Model - Governance

Steering Individual or Group

- Meets regularly as required by core project team.
- Approvals and Decisions
- Evaluation Strategy
- Organizational and Strategic Alignment
- Outcomes-focused
- Prioritization
- Risk escalation
- Marketing and Championing
- Active and Visible Sponsorship
- Oversees all sub-committees

2018-19 quarterly meetings

- March 27, 2017 9-11am
- May 15, 2017 1-3pm
- July 10, 2017 1-3pm
- October 16, 2017 9am-4pm
- January 8, 2018 1-3pm
- March 5, 2018 1-3pm
- May 14, 2018 1-3pm
- July 9, 2018 1-3pm
- September 17, 2018 10-12(noon)
- November 7, 2018 2-4pm
- January 7, 2019 2-4pm
- March 4, 2019 2-4pm

Members and Roles

- Todd Gilchrist, Executive Sponsor
- Deb Gordon, Executive Sponsor
- Norma Wood, Co-Lead
- Mona Sikal, Co-Lead
- Dr. Laura Calhoun, Co-Lead
- Jennifer Yelland, Program Coordinator
- Sarah Guildford, Admin Support

Committee members

- Ann Harding, Mauro Chies, Jeannie Smith, Darren Sandbeck, Elaine Watson, Lynn Robertson, Susan McGillivray, Gayle Shurvell, Tara Foster, Matthew Murphy, Susan Given, Donna Tchida, Bryan Peffers, Kerry Bales, Teri Myhre, Diane Pyne, Paula Beard, Bob Stenhouse, Dr. Bruce MacLeod, Annie Brown, Teri Langlois.

Sets Context For...

Influences, schedules, and coordinates the completion of...

Project Management

Governance

- Administrative coordination (e.g. agenda, minutes, decision requests, reports).
- Project scope and schedule.
- Client and Stakeholder Management.
- Approvals and Decisions.

Project Plan and Schedule

- Milestones, Actions, Activities, Deliverables.
- Plan schedule and timing.
- Status and priority.

Risk Mitigation

- Dependencies and risks.
- Risk Tracker.
- Issue Tracker.
- Mitigation actions.

Resources

- People – roles and responsibilities.
- Budget – requirements, forecasting and tracking.
- Equipment & supplies – identify and provide.

Reporting

- Reporting will be completed at each sponsor meeting (bi-monthly).
- Additional reporting to be determined.

Change Adoption

- Awareness, Desire, Knowledge, Ability, Reinforcement
- Market, communicate and champion.

Working and Advisory Groups

Sub-Committees

- Helping Healers Heal
- Diversity & Inclusion
- Violence in the Workplace
- EMS Psychological Health & Safety
- Respectful Workplace

Working Groups

- Will be created to support the deliverables under the PHSSC project plan.

Advisory Groups

- Includes, but not limited to: Frontline Leaders Council, Clinical Operations -Executive Committee, Volunteer, Zone Medical Groups, etc.

Key Stakeholders

Internal

- employees
- volunteers
- physicians

External

- unions
- regulatory bodies
- contractors
- colleges
- Employee and Family Assistance Program
- Great-West Life
- Alberta Medical Association
- Canadian Mental Health Association

Core Team meeting (monthly) and Sponsor meeting (every two months)

Core Team Meetings: (Mona Sikal, Norma Wood, Dr. Laura Calhoun, & Jennifer Yelland)

- March 22, 2017 (10:30-11am)
- April 2, 2017 (3:00-4:00pm)
- April 19, 2017 (11:00-noon)
- June 1, 2017 (noon-4:00pm)
- July 6, 2017 (2:00-3:00pm)
- August 3, 2017 (2:00-3:00pm)
- September 18, 2017 (3:30-4:30pm)
- October 2, 2017 (10:30-11:30am)
- November 10, 2017 (1:30-3:00pm)
- December 7, 2017 (3:00-4:00pm)
- January 3, 2018 (9:00-10:00am)
- February 7, 2018 (10:30-11:30am)
- March 7, 2018 (9:00-10:00am)
- April 2, 2018 (11:00-noon)
- May 9, 2018 (9:00-10:00am)

Sponsor Meetings: (Deb Gordon, Todd Gilchrist, Matthew Murphy, Mona Sikal, Norma Wood, Dr. Laura Calhoun, & Jennifer Yelland)

- March 16, 2017 (2:00-2:30pm)
- April 26, 2017 (8:00-8:30am)
- June 26, 2017 (1:00-1:30pm)
- August 16, 2017 (9:00-9:30am)
- October 11, 2017 (1:30-2:00pm)
- November 29, 2017 (3:00-3:30pm)
- February 5, 2018 (1:30-2:00pm)
- April 4, 2018 (9:00-9:30am)
- June 7, 2018 (2:30-3:00pm)
- August 8, 2018 (1:00-1:30pm)
- October 10, 2018 (1:00-1:30pm)

Core Project Team

- Meets Regularly
- Monitors project plan actions, activities and deliverables
- First line risks and issues management
- Change adoption and communications

Members and Roles

- Norma Wood, Co-Lead
- Mona Sikal, Co-Lead
- Dr. Laura Calhoun, Co-Lead
- Jennifer Yelland, Program Coordinator
- Jeannie Smith, Communications

Other multi-disciplinary teams and SMEs will be added to this group as work evolves.