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CSIRO's Psychological Health & Wellbeing Strategy 2009 - 2011



Contents

- Introduction
- CSIRO HSE Strategy 2007 - 2011
- Health and wellbeing objective
- Psychological Health and Wellbeing factors
- Working Groups approach to learn of issues
- Lines of evidence
- Locus of control issues
- Workload issues
- CSIRO Leaders commit to psychological health and wellbeing
- Our three objective areas for improvement
- Psychological Health and Wellbeing Strategic goals
- Next steps
- An ultimate objective
- Any questions?

Introduction – why do something?

- Increase in bad behaviour (disputes, intolerance, bullying)
- Declining loyalty to CSIRO by employees and their families
- Increased physical and mental illness utilisation in EAP
- Decline in productivity – raising of staff concerns
- Absenteeism
- Increase in staff turnover
- An increased openness to discuss psychological health and wellbeing issues and concerns between staff and management.

CSIRO HSE Strategy 2007 - 2011

Our aspirational vision:



- ✓Zero Injuries
- ✓Zero Illnesses
- ✓Zero environmental harm
- ✓Zero tolerances of unsafe behaviour



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HSE Strategic Plan for 2007–2011

CSIRO's HSE Strategy Health and Wellbeing Objective

Element 3E. Health and wellbeing

- Workplace stressors are recognised and addressed
- Work-life balance is valued and leaders encourage good practice
- Health and wellbeing strategies effectively minimise workplace stressors

Psychological Health and Wellbeing factors

There is now a large body of organisational research, best exemplified by the Whitehall Study, that recognises psychological health and wellbeing is strongly controlled by three interacting factors:

1. job demands – the amount of work you are asked to do
2. perceived personal control in the workplace – the so-called ‘locus of control’
3. coping strategy – largely a personal disposition that requires management by both the individual and local supervisor

Establish a Psychological Health and Wellbeing working group

Objectives of this 2008 initiative

1. Establish a baseline of current data and knowledge of the presence and affect of psychological health and wellbeing stressors.
2. Determine what these stressors are and any impact to staff
3. Establish if there are specific locations where impact is highest
4. Identify mitigation strategies to reduce the potential of negative psychological health and wellbeing
5. Define a plan of action with an appropriate review mechanisms

Working Groups approach to learn of issues

- Lines of evidence

- Key studies (e.g. Whitehall (2) study)
- Existing H&S indicators (claims, time off work, sick leave, absenteeism, EAP utilisation, staff turnover)
- Insight Poll (staff feedback)
- Case studies from similar organisations
- Focus groups
- Accumulated experience of the Working Group and key leadership teams

- Emphasis

- We agreed on seriousness and likely recent increase in stress
- Acknowledged problems of reporting ('stress is an admission of weakness and failure') so avoided 'another survey'
- Primary reliance on focus groups to gain an understanding of extent and cause

Lines of evidence

- Nationally and globally most large Organisations are undergoing significant organisational change and CSIRO is not exempt.
- CSIRO as a creative Organisation has undergone very significant change in the last 5 years. Not surprisingly our early exploration of these changes on psychological health and wellbeing highlight a negative influence
- In looking at how other organisations confront these matters, we have found that the majority are addressing psychological health and wellbeing issues in isolation of other organisational dimensions, for example, through mental health awareness initiatives or employee assistance provider programs. Very few are tackling things at an organisational level as we do.

Locus of control (1)

- Insecurities associated with the larger pool within CSIRO for drawing on resources
- Loss of the 'Divisional Family' relationship
- Confusion over supervisory paths
- Inability to deal with ambiguities associated with the 'matrix way-of-life'
- Complexities of Support Services – loss of responsibility and identity within Business Units
- Implementation of new business processes

Locus of control (2)

- Rate and extent of changes
- Fragmentation of work relationships – remote teams
- Restricted opportunities for feedback
- Loss of trust that senior management understands the impact of decisions on organisational design
- Imbalance between responsibility and control

...I feel that I have all the responsibility and none of the authority to control it...

Workload issues

- External pressures: funding – increased demands, decreased resources
- 100% allocation to work policy on science staff
- Work practices, email communications, unrealistic commitments –
- Poor Work Life Balance
- Fatigue, fear of failure, overwhelmed by workload
- Support Services work groups created with unrealistic workloads and demands

.....*“CSIRO has no brakes”*.....

CSIRO Leaders commit to psychological health and wellbeing

A Psychological Health and Wellbeing Strategy will require senior leaders to demonstrate commitment and encourage good practice. The Working Group concluded that the strategy should commit CSIRO's leadership to:

- improve the psychological health and wellbeing of staff at work and, as a consequence, in their personal lives
- explicitly consider psychological health and wellbeing in strategic planning and organisational design
- ensure psychological health and wellbeing is a priority in all communication and behaviour
- support staff on individual work and personal issues.

Our three objective areas for improvement

1. Science leadership and our Organisation
2. Science support and enterprise roles
3. Making psychological health and wellbeing part of CSIRO's Culture

1. Science leadership and our organisation

Improve the matrix, structure, roles and responsibilities, to be better able to intervene at the level enterprise work and management of enterprise Issues.

2. Science support and enterprise roles

Improve interaction with colleagues to increase staff involvement and enhance team-working and control over work targets at the science project and support work group level.

3. Making psychological health and wellbeing part of CSIRO's Culture

Recognise the impact on the individual, enhance a sense of control by staff over the work and the work environment and develop a culture in which staff are valued.

Psychological Health and Wellbeing Strategic goals - 1

STRATEGIC ELEMENTS

1. Science leadership and our Organisation

OBJECTIVES

1.1 Address the challenges of matrix organisations

1.2 Mend the rift between “input” and “output

1.3 Make longer-term commitments through the Science Investment Process

1.4 Improve Research Project Planning and Management

1.5 Use Officers-in-Charge at sites to enhance cohesion of science and support staff

1.6 Relax the 100% allocation of 100% of staff 100% of the time

Psychological Health and Wellbeing Strategic goals - 2

STRATEGIC ELEMENTS

2. Science support and enterprise roles

OBJECTIVES

2.1 The need for a greater focus on leadership and management

2.2 Coping with On-going change

2.3 Maintaining the connection to science

Psychological Health and Wellbeing Strategic goals - 3

STRATEGIC ELEMENTS

3. Making psychological health and wellbeing part of CSIRO's Culture

OBJECTIVES

3.1 Leadership commitment to Psychological Health and Wellbeing

3.2 Psychological health and wellbeing risks are considered and managed in all major organisational strategies and changes.

3.3 Maintain contract for CSIRO's National EAP program in support of staff

3.4 Business Units include psychological health and wellbeing and health and wellbeing in their annual HSE Management Plans

Psychological Health and Wellbeing Strategic goals – 3 (continued)

STRATEGIC ELEMENTS

OBJECTIVES

3. Making psychological health and wellbeing part of CSIRO's Culture

3.5 Establish a Work-Life Balance program incorporating psychological health and wellbeing

3.6 Reinforce the CSIRO Code of Conduct and processes for Eliminating Workplace Bullying and Harassment

3.7 Implementation and enhancement of psychological health and wellbeing awareness programs

3.8 Equity and Diversity Contact Officers are aware of their role in supporting staff with psychological health and wellbeing issues.

Next steps

The Psychological Health and Wellbeing Strategy be approved and incorporated into an overall Health and Wellbeing Strategy.

Business Unit annual Health and Safety Management Plans provide a mix of psychological health and wellbeing initiatives that are relevant to all staff.

An executive reporting framework is implemented to monitor the timeliness and effectiveness of actions and strategies.

A questionnaire to be utilised in one year to determine the success of the strategy.

An ultimate objective

“Psychological health is an inner state that involves a sense of optimism, calm and wellbeing, and feeling in control. Whilst people may have significant personal or work challenges, they feel well motivated, equipped and confident to deal productively with the demands they face” (Lardner 2004)

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