Recognising changes in workers' wellbeing

There is no right way to respond to OV as everyone responds to stressful or traumatic events differently. However, there are some known responses that may be commonly experienced by workers that managers can be alert to.

Short and Long Term Responses

Physical
- OV trauma
- Nausea
- Shaking
- Heart Palpitations
- Headaches
- Aches & pains

Emotional
- Confusion
- Anger
- Feelings of Dread
- Stress, Depression, Anxiety, PTSD
- Sadness
- Guilt
- Helplessness
- Numbness/shock

Behavioural
- Sleep disturbances
- Withdrawal
- Avoidance of reminders
- Alcohol/drug use
- Apathy
- Easily irritable

Cognitive
- Intrusive Thoughts
- Memory blanks
- Flashbacks
- Thoughts of self-blame
- Ruminating thoughts
- Difficulty concentrating
- Feelings of isolation or dislocation

Recognising an individual's response to OV

Healthcare workers (workers) may experience OV as a standalone critical incident from which changes in behaviour occur. It is also possible for workers to experience OV as an accumulation of low impact incidents, or a combination of accumulated incidents +/- a critical incident. Managers need to be aware of the ongoing wellbeing of their workers, being alert to both immediate and delayed changes to behaviour, attitude, and practice.

It is important to remember that anything that immediately or gradually impacts workers mental health (e.g., creating stress or anxiety) can result in a heightened emotional response by the individual to an OV incident. By being aware of workers ongoing wellbeing, managers can be alert to factors that may exacerbate, or trigger, a response from workers such as events prior to an incident and/or the workers pre-existing level of mental health and/or wellbeing.

Factors that may influence workers wellbeing at work include:

- existing stress or anxiety
- ongoing or new illness
- unwell family members
- staffing levels
- skills-mix
- the work environment or workload
- rostering
- relationships with peers
- model of care, level of responsibilities.

Manager's responsibilities

Managers have a responsibility to the health and safety of workers. In their capacity of leading a safer culture they can develop and support individual and team resilience by implementing and leading preventative practices such as team building opportunities, social activities and role modelling self-care practices. This in turn may assist workers to achieve and maintain a positive healthy functioning state.

Managers need to observe changes in workers behaviours and practice that indicate there may be issues with their health and or wellbeing. When concerns are noted, managers can identify and provide suitable support or link workers to support services. Understanding the mental health continuum will assist managers to assess the health and wellbeing of workers.

Mental health continuum

Mental health is a state of wellness and is not merely the absence of illness and is known to exist on a continuum. The continuum represents a sliding scale of health and wellbeing ranging from 'positive, healthy and functioning' through to 'severe symptoms of mental health conditions'. Individuals typically move along the scale in response to factors such family, work, or other life events. When used as a tool the mental health continuum can help a manager recognise the signs that indicate that workers might need access to support.

Positive, healthy functioning   Severe impact on everyday functioning

- When people are in the **green** area of the continuum they are feeling well.
- Moving into the **yellow** area people may be having difficulty coping.
- In the **orange** area, as symptoms increase, it is recommended people seek support from a General Practitioner (GP).
- At the **red** end of the continuum people may be unable to perform at work or be at risk of self-harm or suicide.

Prompts for recognising how workers may be feeling along the mental health continuum

	Well	Reacting	Injured	Unwell
Feelings	Self-aware and calm	Irritable or impatient	Angry	Aggressive out of control
Stress Level	Coping well	Worried nervous	Highly nervous panicky	Very anxious panic attacks
Outlook	Positive outlook	Overwhelmed	Feeling hopeless	Depressed or suicidal thoughts
Productivity	Working productively	Putting things off, forgetting	Poor performance	Unable to perform
Sleep	Sleeping normally	Trouble sleeping	Restless disturbed sleep	Sleeping too much or too little
Energy	Energetic	Low energy levels	Tired	Physical symptoms of illness
Activity	Keeping active	Decreasing activities	Little enjoyment from activities	Avoiding activities
Social	Feeling connected	Withdrawing from social activity	Irritated and frustrated with others	Isolated from others

Prompts for managers when looking to support workers at different stages of the mental health continuum
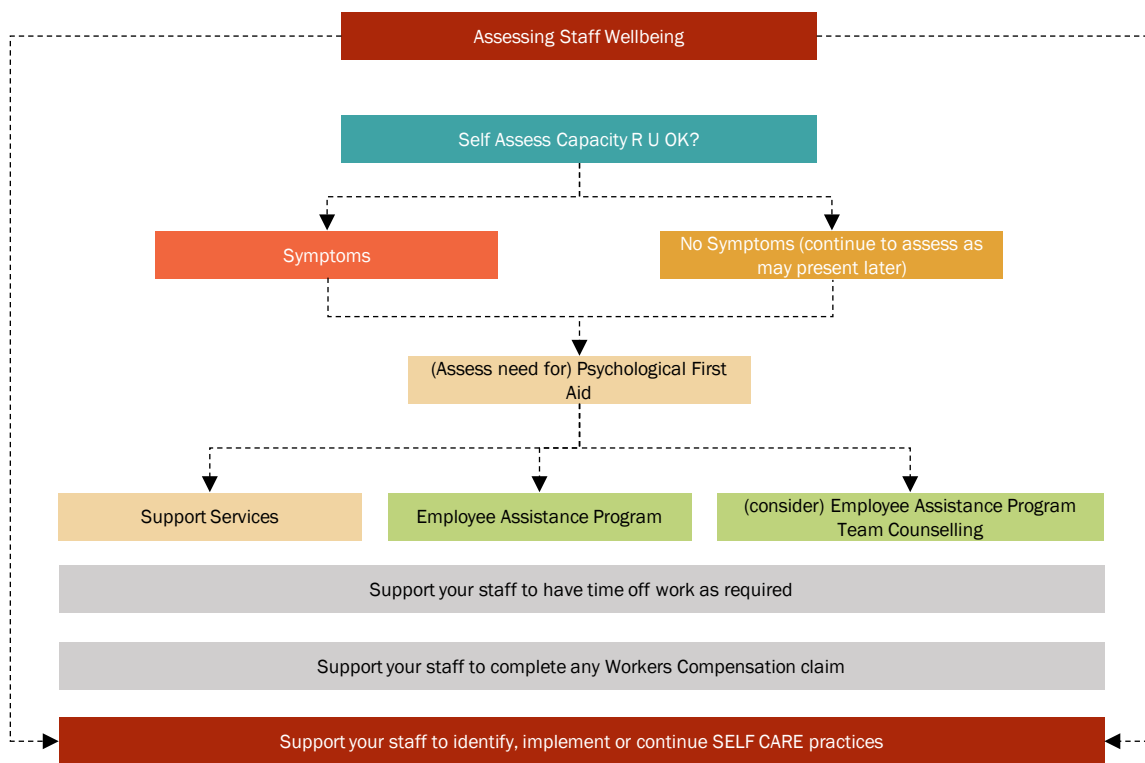
	Well	Reacting	Injured	Unwell
Options for engagement	Encourage continued engagement in team building activities etc.	Encourage support, be non-judgmental	Encourage to see a GP or link to other supports such as those listed in the **Support Services Factsheet**	Recommend the worker seek help and provide details of emergency/crisis support services such as Mental Health Line 1800 629 354
	Encourage to identify and resolve problems early	Encourage talking to friends and family	Encourage not to put it off, and to take action now	Let them know help is available. Help them to identify and utilise services that meet their needs **Support services factsheet**
	Provide opportunities for rest	Encourage doing something enjoyable	Encourage contacting EAP **EAP factsheet**	Talk with worker about options to modify work responsibilities to support recovery

Determining assistance to provide

Immediate support is typically about providing practical solutions that allow the affected workers time to process the situation. As well as dedicated support services and psychological first aid, you may be required to arrange an opportunity to debrief, to contact next of kin, support the workers to leave early, modify their duties, or take a period of time off work. The level of support individuals require will depend on how the OV incident has affected them.

The following are examples of how support may be provided:

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┌─────────────────────────────────────────────────┐
│              Assessing Staff Wellbeing            │
└─────────────────────────────────────────────────┘
                        │
              Self Assess Capacity R U OK?
                   │              │
              ┌────────┐    ┌──────────────────────────────┐
              │Symptoms│    │No Symptoms (continue to assess│
              └────────┘    │   as may present later)       │
                   │        └──────────────────────────────┘
          (Assess need for) Psychological First Aid
           │              │                    │
    ┌────────────┐  ┌──────────────────┐  ┌──────────────────────────┐
    │Support     │  │Employee          │  │(consider) Employee        │
    │Services    │  │Assistance Program│  │Assistance Program         │
    └────────────┘  └──────────────────┘  │Team Counselling           │
                                          └──────────────────────────┘
    │    Support your staff to have time off work as required        │
    │    Support your staff to complete any Workers Compensation claim│
    │Support your staff to identify, implement or continue SELF CARE practices│
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You may wish to read more in the following:

⇒ **Psychological first aid factsheet**

⇒ **Support services factsheet**

⇒ **EAP factsheet**

⇒ **Supporting workers with RUOK? Factsheet**

ACT Health acknowledges the Traditional Custodians of the land, the Ngunnawal people. ACT Health respects their continuing culture and connections to the land and the unique contributions they make to the life of this area. ACT Health also acknowledges and welcomes Aboriginal and Torres Strait Islander peoples who are part of the community we serve.

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