

# Risk Topic - Psychosocial Risk Management

Good work is good for us. People respond positively to having a sense of purpose and inclusion, to stimulating work, positive relationships, and a safe working environment. Well-designed jobs and effectively managed psychosocial risks can support individuals to flourish at work, perform at their best and promote a sustainable workforce.

Conversely, work-related psychosocial hazards can cause a range of mental, social, and physical harm. These include excessive job demands, poor relationships, discrimination, poor relationships and change management and can cause a range of mental, social, and physical harms. This risk topic describes some considerations that should form a key part of any organisation's approach to worker mental health and wellbeing.



## Introduction

Many jobs are not designed effectively to assess and manage psychosocial hazards and are putting people at increased risk of physical and psychological harm. Psychosocial hazards arise from job design and how tasks are organised, social factors at work, the work environment, equipment, and tasks they perform.

This risk topic is about how organisations can use a traditional risk assessment approach for stress and psychosocial risk management and what they can reasonably do to reduce risk, support personal resilience, and provide rehabilitation when needed. The five stages of the risk assessment are:

1. Identify psychosocial hazards
2. Identify who might be at risk and how, taking consideration of personal factors
3. Evaluate the risk looking at the degree of exposure and severity of harm
4. Apply measures to reduce and manage these risks
5. Review hazards, assessments, and controls to continuously improve.

## 1. Identify Psychosocial Hazards



The American Psychological Association describes ‘psychosocial’ as the intersection and interaction of social, cultural, and environmental influences on the mind and behaviour. All these influences are present in the workplace and ISO45003 describes psychosocial hazards as including aspects of how work and tasks are organised, job design, social factors at work, work environment, equipment and hazardous tasks.

Some psychosocial hazards are associated with increased levels of harm. These hazards include:

- unmanageable workloads
- lack of support from line managers or colleagues
- poor management of change
- high cognitive or emotional demand, such as in blue light, healthcare, or education sectors
- shift patterns, for example night workers may experience loneliness and anti-social hours
- lone working, working from home and social isolation
- workplace discrimination, bullying and harassment
- fear of reprisal from whistle blowing
- abuse, threats, and violence.

Other psychosocial hazards can cause harm but are likely to also impact an individual’s wellbeing and how connected to and invested they are in the organisation. Examples include:

- lack of autonomy in how work is completed
- lack of perceived purpose or meaning in the work or the organisation
- lack of career development opportunities
- lack of ongoing professional development or training opportunities
- job insecurity
- poor interpersonal relationships with colleagues.

Organisations in some sectors rely on the compassion and duty of care of their workforce, for example police, education, and health and social care. When left unchecked, these types of occupations can have an enormous strain on a person’s mental and emotional resilience. Compassion fatigue and burnout can have quantifiable impacts on both the employees from an employer liability standpoint and on the service user from a public liability perspective.

At a personal level, managers or colleagues may also notice changes in behaviour or appearance of their colleagues. Signs of poor mental health are not always obvious, and it is important not to make assumptions, but some possible signs of psychosocial distress at work include:

- appearing tired, anxious, or withdrawn
- increase in sickness absence or being late to work
- changes in the standard of their work or focus on tasks
- being less interested in tasks they previously enjoyed



- changes in how the person interacts with the people they work with
- panic attacks
- drug or alcohol dependency
- avoidance and procrastination.

At an organisational level, information sources to help identify psychosocial risks include:

- reactive data such as absence, accidents, complaints, use of employee assistance programmes, or exit interviews
- proactive data from behavioural observation, inspections and audits
- job descriptions and expectations
- hours worked, holiday use and use of breaks and rest periods
- employee interviews or discussions, such as performance reviews or check-ins
- employee surveys or questionnaires.

Information of this type needs to be handled with care. It will sometimes be confidential, and it is important to reassure workers that their data or other contributions will be anonymised and treated in confidence. People need to be prepared and ready to engage with the risk assessment process if it is to be successful.

The nature of this data means it may be held in different teams such as human resources, learning and development, occupational health and health and safety. If psychosocial risk assessment is siloed in one team, it will not be as effective as a joint initiative.

## 2. Identify Who Might be at Risk and How

Working conditions and personal characteristics influence the psychosocial risks people face. To measure this in a way that helps an organisation act, it is useful to estimate how individual hazards affect people, how often this happens and for how long.

However, at this stage of the assessment process consideration must be given to individuals' strengths and vulnerabilities and how these may change over time. This provides context to why an individual's resilience to stress and occupational psychosocial hazards could be further affected positively or negatively.

The biopsychosocial model<sup>2</sup> is a useful way to reflect and capture the influences on personal health and wellbeing. Some psychosocial hazards will have a disproportionate effect on certain employees or may change an individual's response to a certain hazard.

As well as being part of the risk assessment process, this can provide organisations a useful opportunity to reflect on the scope and accessibility of their employment practices. For example, those with a new or pre-existing mental health condition or new or expectant mothers may be excluded intentionally or unintentionally from accessing the support they need.



### New of Pre-Existing Health Conditions

A person with a new or pre-existing mental health condition could be considered to have a disability if;

- it has a substantial impact on their life, for example it takes them longer to complete tasks or they regularly cannot focus on a task
- it impacts their ability to carry out day-to-day activities, for example interacting with people, following instructions or keeping to working times
- it continues or is expected to continue longer than 12 months.

Poor mental health can be considered a disability even if they do not have symptoms all the time. Under the Equality Act 2010, this would mean that the employee would have a protected characteristic and employers must not discriminate against them because of their disability and must make reasonable adjustments to facilitate their employment. The WHO<sup>3</sup> make a specific recommendation for reasonable work accommodations to be implemented for workers with mental health conditions, including psychosocial disabilities.

### New and Expectant Mothers

During pregnancy a mother's body undergoes significant change. This and the impact on changes in lifestyle can result in depression whilst pregnant and (or) a postnatal depression. Employers should have in place specific risk assessment for new and expectant mothers and monitor this regularly, checking in with the employee as often as needed. This needs to consider the psychological and social impact of pregnancy as well as the biological or physical changes it can bring.

## 3. Evaluate the Risk: The Degree of Exposure and Severity of Harm

The first two stages of the risk assessment process are mainly about gathering data and information. Stage three is about making decisions by evaluating the risks. Psychosocial risks arise from the exposure of a person to a psychosocial hazard combined with the severity of any harm. The evaluation should include:

- the impact on the individual (severity)
- how often they are exposed (frequency)
- for how long they are exposed (duration)

UK legislation, World Health Organisation Mental Health guidelines and ISO45003 all require the identification and assessment of psychosocial risk. For larger, more complex organisations this evaluation process can be made easier using digital platforms that capture and analyse information and give the results in a way the organisation can use them. A 2020 Deloitte study<sup>4</sup> found an average return on investment of £5 for every £1 spent on mental health and wellbeing interventions, summarising that "Interventions



with the highest returns tend to focus on preventative largescale initiatives, and on using technology or diagnostics to tailor support”. For example, Zurich Resilience Solutions partner FlourishDx provides customers with an enterprise grade digital platform. The platform features a psychosocial risk assessment tool, employee check-ins, and is supported by learning content for managers and workers.

#### **4. Apply Measures to Reduce and Control the Risk**

For organisations the negative effects of psychosocial risks will be found in poorer business performance and productivity, increased absenteeism, increased levels of presenteeism, leaveism, and increased accident and injury rates. Higher turnover rates and early retirement are also typical.

The costs to a business and society are significant. Poor mental health at a workforce level can impact the sustainability performance of a business and its social metrics within its Environmental Social and Governance (ESG) reporting. Worker health and safety is an International Labour Organisation fundamental right. ‘Decent Work’ is one of the UN Sustainable Development Goals. Many ESG disclosure frameworks include measures of health and safety, diversity and inclusion and labour practices, all of which form part of an organisation’s approach to mental health and wellbeing.

Just as we use a traditional risk assessment approach, organisations can apply another key occupational health and safety requirement to psychosocial risks: the principles of prevention<sup>5</sup>. These can provide a ‘north star’ to organisations as they review existing risk controls and explore new ones. There is a focus on prevention rather than cure in the following principles:

- developing a coherent overall prevention policy which covers technology, organisation of work, working conditions, social relationships and the influence of factors relating to the working environment
- avoid risks, combat risks at source and adapt to technical progress
- adapting the work to the individual, especially the design of workplaces, the choice of work equipment and the choice of working and production methods.

#### **Psychosocial Risk Control Measures and Worker Involvement**

Eliminating hazards and reducing psychosocial risks encourages wellbeing at work. There are various strategies to manage psychosocial risks and promote mental health and wellbeing which should be developed in consultation with employees alongside a mental health and wellbeing communications plan. It’s important to align organisational plans with employee awareness, competence, and investment in those plans.

The following are examples of the control's organisations can take to reduce risks, enable resilience and provide rehabilitation against the three main hazard categories. These categories are how work is organised, social factors at work and the work environment, tasks and equipment. At this stage in the risk assessment process, it is beneficial to consider whether risk controls exist, if they are relevant to the hazard and people affected and whether they are implemented effectively. This is critical to having an assurance that the risks are adequately controlled and managed.



### **Risk Control Measures: How Work is Organised**

These controls relate to how managers and individuals work together to plan and execute work tasks including supervision, training and support, and performance management. They include:

- worker and manager prioritising tasks and allowing flexible time frames for completion where possible
- development of employee competence and allocating work tasks to employees with appropriate knowledge, skills and experience suitable to the complexity and duration of the task
- isolation: providing appropriate access to social support for employees who are working remotely or working in isolated locations as and when needed
- limit work that is remote or isolated from social contact and other workplace support
- providing effective supervision, constructive feedback, and guidance to employees
- improving attitudes towards managing and reporting psychosocial risk, including work-related stress, harassment, bullying and violence and fear of reprisal
- providing practical support during peak workload periods, e.g., from additional, or more experienced employees
- autonomy: increasing employee's control over the way they do their work e.g., by introducing flexible working, job-sharing, more consultation about working practices or enabling workers to control the pace of work tasks
- allowing breaks to manage fatigue, and restricting work-related contact via mobile phone and email in non-working time
- employee consultation: about workplace changes and how these can affect them
- consciously defining work roles, supervisory relationships, and performance requirements to minimize confusion and ambiguity.

### **Risk Control Measures: Social Factors at Work**

These control factors relate to how individuals are supported to identify or resolve mental health and wellbeing problems in the workplace. They include:

- providing training to managers and workers to develop awareness and appropriate skills to identify psychosocial risks and recognise early signs of work-related stress and ill-health
- encouraging early reporting of issues that may prevent psychological wellbeing by employees by demonstrating the organisation's commitment to providing a supportive, respectful work environment and maintaining confidentiality
- providing access to, or information about, support services, general occupational health services, confidential debriefing, counselling, conflict mediation services and mindfulness
- providing information to employees about their employment rights and responsibilities
- recognising and rewarding employee commitment and achievement



- improving workplace culture through a range of integrated programmes e.g., health and safety management practices, social responsibility, environmental sustainability, and community engagement
- promoting a workplace that is free of work-related violence and harassment
- providing victims of work-related violence and harassment (including gender-based violence and sexual harassment) with access to responsive and safe support services
- increasing awareness of psychosocial risks and providing information and training to workers on how to report them
- developing policies and guidance that outline expected work behaviours and how unacceptable behaviour will be managed
- providing specific instructions on how to manage foreseeable risks, how to respond if an incident occurs and how to provide post-incident assistance to workers
- implement assistive technology to educate employees and allow them to report on their own mental health.

### **Risk Control Measures: Work Environment, Equipment and Hazardous Tasks**

These controls could be considered to reduce or eliminate psychosocial risks associated with specific tasks. They include:

- providing and maintaining appropriate equipment for performing the work e.g., manual handling equipment) and improving equipment as necessary
- improving workplace surroundings and physical workplace features to isolate or protect workers from hazards (e.g., noise, lighting, vibration, temperature, chemicals etc)
- isolating or protecting workers from psychosocial hazards e.g., with physical barriers to reduce risk of violence
- providing and requiring the use of appropriate and effective personal protective equipment (PPE) where there are risks that cannot be minimized using more effective risk controls in the hierarchy.

### **Emergency Response**

The organisation should consider that emergencies, such as trauma, violence, or threats to life in the workplace can present psychosocial risks. Exposure to psychosocial risks can also create emergency situations for other workers, customers, contractors or the public. Key actions to help the organisation to prepare an emergency response include:

- recognise that a wide range of emergency circumstances can impact psychological health, safety and well-being
- use competent employees, emergency services or other appropriate specialists to respond to the emergency and seek additional advice and support as needed, for as long as is necessary
- prepare for inclusion of appropriate mental health care in the planned response to emergency situations





- establish priorities when responding to the needs of workers and other interested parties as appropriate.

### Obstacles to Effective Risk Assessment

There are potential obstacles to the successful planning and implementation of psychosocial risk assessment. Many of these relate to the workforce's beliefs, ability and willingness to engage with the process. This can be due to:

- fear of being seen as not up to the task
- poor workplace culture
- management not trained to recognise the importance of supporting employees
- senior management not understanding the importance of positive mental health and wellbeing and not recognising it's a relevant part of business performance and health and safety in the workplace.

A workforce that is predominately male may need a particular approach.

#### Predominately Male Workforces Can Present Obstacles to Effective Risk Assessment

*“Society's expectations and traditional gender roles play a role in why men are less likely to discuss or seek help for their mental health problems. We know that gender stereotypes about women – the idea they should behave or look a certain way, for example – can be damaging to them. But it's important to understand that stereotypes and expectations can also damage men. Men are often expected to be the breadwinners and to be strong, dominant and in control. While these aren't inherently bad things, they can make it harder for men to reach out for help and open up.*

*Some research also suggests that men who can't speak openly about their emotions may be less able to recognise symptoms of mental health problems in themselves and less likely to reach out for support.*

*Men may also be more likely to use potentially harmful coping methods such as drugs or alcohol and less likely to talk to family or friends about their mental health. However, research suggests men will get the help that meets their preferences and is easy to access, meaningful and engaging.”*

*Men and Mental Health (2022)*

## 5. Record and Review Hazards, Assessments and Controls to Continuously Improve

Psychosocial risk assessment cannot be viewed as a 'task and finish' project, nor a tick box exercise. People's mental





health resources and the mental demands they face change in the short and long term. So does the organisation, its activities and environment.

Therefore, the risk assessment approach that an organisation uses needs to be able to respond to provide a means to capture fresh information and enable individuals and the organisation to understand and act. Platforms such as FlourishDx enable this at a personal, frontline manager and leadership level. Benefits can include:

- records that the significant findings of each stage of the process have been completed
- reviewing the effectiveness of risk controls and interventions in reducing risk
- gauging and promoting changes in workplace culture
- demonstrating a robust risk management approach to stakeholders including employees, future talent, investors, standards auditors, enforcement agencies and insurers
- providing information to sustainability disclosures and reports
- defending legal actions.

The dynamic nature of psychosocial risks makes it hard to provide specific guidance on when to review these risk assessments. Gathering data and information should be an ongoing process. It may be useful to set periodic dates to review the information and discuss it with leaders and workers so that changes to policy and practice can be made as necessary.

## Conclusion

There is a clear relationship between psychosocial risks and impacts on employee mental health and wellbeing. The impact on people can be physical, psychological, or social. Stress at work is associated with heart disease, depression, and musculoskeletal disorders. There is clear evidence that excessive job demands, poor relationships, and effort-reward imbalance are risk factors for psychological and physical health. This is a key public health concern and with clear implications for employers and their duty of care.

Good work is good for us. Well-designed jobs and effectively managed psychosocial risks can support individuals to flourish at work, supporting business objectives and the transition to sustainability. People are more likely to flourish in a workplace that has been designed to reduce physical and psychosocial risks.



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Zurich Resilience Solutions  
Risk Support Services  
6th Floor, The Colmore Building  
20 Colmore Circus, Queensway  
Birmingham  
B4 6AT

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