Psychological Health and Safety Program / PTSD Prevention Plan

for

The Region of Peel

Submission by:

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This PTSD Prevention Plan has been developed, in consultation with the Paramedics Services Multi-Site Joint Health & Safety Committee, to outline the Region’s approach to managing Post Traumatic Stress Disorder. The goal of this plan is to take a holistic approach across prevention, intervention and recovery and return to work. The Public Services Health and Safety Association’s PTSD Prevention Plan Template was used as a reference for developing this document.
1 Introduction to PTSD and the Framework

The Executive Leadership Team, Directors, Chief and Deputy Chief of the Region of Peel are committed to addressing Post-Traumatic Stress Disorder (PTSD) in our Paramedic Services Division. This Psychological Health and Safety Program and inherent prevention plan outlines a holistic approach to addressing PTSD and the focus of this document is to outline and/or establish foundational elements based on the PTSD Framework below. Specifically this plan highlights our prevention, intervention and recovery and return to work policies and practices.

This is a living document which will be updated as our organization advances on our PTSD prevention journey.

![PTSD Framework]

*Figure 1: PTSD Framework*
1.1 Prevention Focus Area

Prevention focuses on outlining the basic elements of occupational health and safety management such as understanding legal responsibilities, recognizing, assessing and controlling the hazard, developing policies and procedures, outlining roles and responsibilities and incident reporting procedures in an organization. The goal is to establish or integrate PTSD prevention practices for the promotion of a healthy and safe workplace that actively works to prevent harm to an employee’s mental health.

1.2 Intervention Focus Areas

Intervention focuses on outlining actions that can be taken to improve a situation. This includes ensuring that employees know how to report psychological injuries when they occur and are supported in doing so. It also highlights intervention options that are evidence based and that can be utilized in organizations.

1.3 Recovery and Return to Work Focus Area

The recovery and return to work ensures that managers understand how to accommodate an employee who is suffering from PTSD and that there are clearly established roles and responsibilities for supporting employees through this process. Recovery and return to work is an important aspect of preventing future or further injury.
2 Goals and Objectives

One of the inherent results of all of the work being done under the corporate Psychological Health and Safety (PH&S) Program is a strategy and plan that addresses the need for PTSD Prevention. The goal of this document is to present an overview of the PH&S Program in general and then further detail on the Paramedic Services Division specific supports for PTSD prevention, intervention and recovery and return to work.

The specific objectives of the plan are to:

• define the legal requirements
• explain how to identify and respond to PTSD
• outline organizational current state and the overall program
• identify crisis intervention and support plans
• outline the roles and responsibilities within the Paramedic Services division
• outline the policies and procedures to support PTSD prevention in the Region of Peel
3 Legal Requirements

At the Region of Peel, we understand that we have a legal requirement under the *Occupational Health and Safety Act* to take every reasonable precaution to protect employees from harm. Employers and supervisors are required to inform all employees about psychological hazards on the job and provide training to employees on how to prevent these hazards and protect themselves from harm. Employees are also required to follow policies and procedures set out by the Region of Peel.

**Notification of Injury/Illness**

Following the notification of an injury/illness, Section 51 and 52 of the *Occupational Health and Safety Act (OHSA)* requires notification to the Ministry of Labour, Joint Health and Safety Committee (JHSC) and union, if an employee is critically injured, disabled from performing their own work or receives medical attention resulting from an incident. The details required in these reports, and the parties who must be notified are based on the severity of the injury and are outlined in the *OHSA*, and in Section 5 of the *Industrial Establishment Regulation*. Of particular importance is the necessity in S 5(2)(j) to include steps to prevent further injury/illness.

Reporting PTSD through required channels is handled in the same manner as other injuries or illnesses. There are not special reporting requirements set out by the WSIB at this time. When an injury or illness occurs, the employer must submit a Form 7 Report of Injury/Illness within three days.

In many cases, an employee with PTSD will require time off from work, but in some instances, it may be possible to accommodate them with alternate work as they are receiving treatment. The same WSIB Form 7 is used regardless of whether the injured/ill employee loses time from work (Lost Time Injury), or only seeks medical attention (No Lost Time Injury). The employee will be sent a Form 6 by the WSIB for completion following the employer’s submission of the claim.
4 Overview of PTSD, Risk Factors, Signs and Symptoms

PTSD can develop, for example, when someone experiences, sees or learns about an event involving actual or threatened death, serious injury or sexual violence among other things.

4.1 Causes

It is believed that PTSD is caused by a complex mix of:

• life experiences, including the amount and severity of trauma you have experienced since early childhood
• the way your brain regulates the chemicals and hormones your body releases in response to stress
• inherited mental health risks such as an increased risk of anxiety or depression and inherited aspects of your personality or temperament

4.2 Risk Factors

The following factors may increase the risk of developing PTSD:

• having a job that increases your risk of being exposed to traumatic events, such as first responders, corrections and military personnel
• experiencing intense or long-lasting trauma
• feeling horror, helplessness or extreme fear
• seeing people get killed or hurt
• having experienced other trauma earlier in life, including childhood abuse/or neglect
• having other mental health problems such as anxiety or depression
• lacking a good support system of family and friends
• dealing with extra stress after the event, such as loss of a loved one, pain and injury, or loss of a job or home
• having biological (blood) relatives with mental health challenges including PTSD or depression

PTSD can increase the risk of other mental health challenges such as:

• depression and anxiety
• issues with drugs or alcohol use
• suicidal thoughts and actions
4.3 Signs and Symptoms

Symptoms may start within three months of the event, but can sometimes not appear until years after the event. The symptoms can make it hard for the affected person to live their everyday life and can be accompanied by depression, substance abuse, or other anxiety disorders. The following are three types of symptoms associated with PTSD\(^1\):

**Intrusive Memories**

Also called re-experiencing symptoms, these memories can start from the person’s own thoughts, or can be triggered by words, objects or situations that are reminders of the traumatic event. Intrusive memories include:

- recurring, unwanted distressing memories of the traumatic event
- reliving the event as if it were happening again
- upsetting dreams about the event
- severe emotional distress or physical reactions (heart racing, hands sweating) to something that reminds you of the event

**Avoidance**

Avoidance symptoms may cause a person to change their routine such as avoiding things that remind them of the event as well as negative changes in thinking and moods. These include:

- trying to avoid thinking about the event
- avoiding places, objects, activities or people that remind you of the event
- increased negative feelings about self or others
- feeling emotionally numb or an inability to experience positive or negative emotions
- feeling hopeless about the future
- losing interest in activities that were enjoyable in the past
- feeling strong guilt, depression or worry
- memory problems including not remembering important aspects of the traumatic event
- difficulty maintaining close relationships

**Hyper-arousal Symptoms**

These symptoms are changes in emotional reactions, usually constant, and can make a person feel stressed, angry, overwhelmed and “on guard.” The symptoms include:

- irritability, feeling tense or “on guard”
- difficulty sleeping
- angry outbursts or aggressive behaviours

\(^1\) Mayo Clinic, 2016, National Institute of Mental Health, 2016
• being on constant guard for danger
• feelings of overwhelming guilt or shame
• self-destructive behaviours
• trouble concentrating or sleeping
• being easily startled or frightened

4.4 Recognizing and Responding to Signs and Symptoms of PTSD

Within Paramedic Services the Chief, Deputy Chief, Managers and Supervisors are expected to know how to recognize and respond to signs and symptoms of PTSD in an employee or colleague. If signs and symptoms are found to be present it is expected that the Chief, Deputy Chief, Manager or Supervisor will:

• keep the communication lines open with the employee and ask how they or other team members can provide support to the employee. If the employee is not ready to talk, wait for them to open up. If they do start to share, do not interrupt. It is often difficult for people with PTSD to ask for help, particular if there is a concern about stigmatization
• deal with signs and symptoms directly and as soon as possible. If signs and symptoms are recognized it is best to open the dialogue and provide support so that the employee knows they are supported in the workplace
• provide information about the options the employee has to address PTSD. Help the employee access support resources, if they request or need assistance
• encourage the employee to talk to someone they trust about what has happened. This could be team members identified in the workplace to provide peer support, family members, friends, or a manager/supervisor
• share with the employee that what they are experiencing is a normal reaction. Provide information about signs and symptoms and when they should speak to a professional or seek additional help
5 Organizational Current State

The Executive Leadership Team at the Region of Peel has identified psychological health and safety in the workplace as an organizational priority. Regional Council has strongly supported these efforts. Multiple initiatives are either complete or underway as part of the Region’s psychological health and safety program, which aligns with the National Standard of Canada for Psychological Health and Safety in the Workplace (the CSA Standard). The program is broad in its overall mandate and within it provides a sustainable foundation and evolutionary support for mental health challenges including PTSD prevention.

PTSD-specific prevention efforts are focused on our Paramedic Services Division in support of Bill 163 and the increased vulnerability to occupational stress injury for this population. Our workplace injury statistics have shown an increase in occupational stress injuries in this division. In 2015, these injuries made up 2% of the Paramedic Services Division’s total WSIB claims. In 2016, these injuries accounted for 11% of the Paramedic Services Division total WSIB claims.

The psychological health and safety program has been designed to support all employees through formal and informal processes. In line with best practices, the program has been designed to be integrated into existing and new work practices, so it has longevity and will remain imbedded within the Region of Peel workplace culture.

An overview of the program is depicted on the following page.
Workplace Psychological Health and Safety (PH&S) Program

Define interim strategy and work plans 2016/2017
Implement program strategy
Monitor program strategy
Evaluate corporate strategy based on risk assessment and evaluation to date

Ongoing Integration

Create communication and awareness plans
Implementation of plans
Implementation of plans

Risk assessment using PH&S Standard
Development of action plan
Prioritize and implement actions

Risk assessment aligned with corporate culture program and PH&S
Development of action plan

Initiation and employee engagement
Stakeholder engagement, program development and peer support Selection
Training and program implementation
Monitoring and evaluation

Assess for corporate implementation

Finalize policy, procedures and guidelines
Roll-out new updated policy, procedures and guidelines
Continue program development
Initiate Project
Engagement
Review corporate guidelines

Leadership development modules launched

Strategic integration into new leadership competencies
Roll-out of competencies
Leadership development modules launched

Train the trainer
Roll-out of courses to all PRPS Staff
Evaluation of course
Review of course for corporate roll-out (Working Minds)
Possible course roll-out to ROP

Ongoing: client specific solutions to meet prioritized needs (introduced corporately where appropriate)

PRPS: Peel Region Paramedic Services
R2MR: Road Mental Readiness
6 Paramedic Services Early Intervention Programs and Support

The chart below identifies many of the support initiatives both completed and in progress for Paramedic Services division. It is directly mapped to the firstrespondersfirst.ca PTSD Framework.

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6.1 Critical Incident Management (Paramedic Services Division)

The Paramedic Services Division is aware of the need to address stress management as a result of the stressors paramedics encounter in their day to day job tasks. Individuals deal with stress differently and what can cause stress to one individual may not cause stress to another. Given the nature of the work done by paramedics, there is limited control over the environment in
which they work or the calls to which they respond. This can have an impact on individual paramedics or a group of paramedics who respond. Responses to stress may be immediate and incident specific.

Symptoms may be delayed for a period of time after the incident or they may be cumulative, building up over a long period of time and can include many incidents.

Specific critical incident stress standard operating procedures (SOPs) are in place for paramedics as they are more likely to be involved in critical incidents because of the nature of their work.

Critical incident stress guidelines have been developed for the Paramedic Services Leadership Team as a tool to assist in supporting paramedics in the performance of their duties. There are also a number of support sessions that can be utilized as outlined below:

**On Scene Support** provides assistance (to crews or individuals) while the event is still taking place. Superintendents will promote safety and comfort for paramedics which will help to create a stable and calm environment. Superintendents will monitor the crews while on scene to determine the effects of the call on employees. They will rotate or remove crews to ensure their well-being, as required.

**Individual Sessions** provide assistance to an employee following a critical incident. These sessions are intended to help the employee to mitigate the effects of exposure to a traumatic event prior to returning to duties or leaving the work environment. The session serves to establish the need for any other subsequent stress management measures. Support, follow-up and referral to appropriate resources are made available as requested.

**Access to Employee and Family Assistance Program (EFAP)** provides assistance to an employee following a critical incident. The employee can contact EFAP directly, and when they self-identify as a paramedic calling for trauma support, they are directly connected to a counsellor. Employees have access to this service 24 hours a day, 7 days a week, and can connect with this resource from anywhere. Additionally, the Region has arranged to have a specialized pool of trauma counsellors available with experience relevant to first responders to ensure that support sessions are tailored to the needs of the paramedics.

**Defusing Sessions** provide interventions immediately or relatively soon after a critical incident. This may entail crew(s) being temporarily removed from service to accomplish this session. Defusing sessions typically last for less than one hour and are intended to mitigate the effects of exposure to a traumatic event. It is preferable to conduct this prior to the crew leaving the
work environment or returning to duties. The session allows for the initial sharing of information and reactions about the incident. Information and educational materials on stress management can be provided at this time.

**Expedited Access to Psychological Care** provides assistance to employees requiring further support beyond the current counselling provided by EFAP. Expedited care will be considered if identified that an employee is not coping well and there is an immediate need for psychiatric care. Following discussion with EFAP, the paramedic may self-identify the need for expedited care based on the identified criteria to access this service. Expedited care will provide employees with quick access (within 3-5 days) to expert medical consultation to identify what psychological issues there may be and provide recommendations for treatment and safe return-to-work.

A new initiative is soon being launched to review the current protocols and assess where improvements and adjustments need to be made.
6.2 Peer Support Program

Peer support is a confidential, non-clinical, volunteer, mental health support program that utilizes the wisdom that comes from lived experience. Social and emotional support from a person with lived experience can inspire hope and empower others in similar situations. It may be complimentary to but is not a replacement for professional medical and clinical care. The peer support program is currently available to all Paramedic Services employees who are struggling with mental health challenges, and/or employees who are emotionally impacted by a family member or loved ones who are struggling with a mental health challenge. Peer supporters are Paramedic Services employee volunteers who have struggled either personally or through a family member or loved one, are now in a positive state of recovery and/or readiness, and have successfully completed five days of comprehensive peer support training.

The term “mental health challenge” refers to a wide spectrum of circumstances faced by Region of Peel employees. These can include, but are not limited to: feelings of depression, anxiety, anger or post-traumatic stress, substance abuse or adopting self-destructive behaviors. It also includes life challenges employees experience such as marriage breakdown, loss of a loved one or colleague and severe workplace stress or conflict.

The peer support program includes a unique cohort of peer supporters who have agreed to assist those who need support after extraordinary circumstances involving trauma, severe stress or following critical incident intervention processes.

Employees who choose to connect with a peer supporter can expect a private, confidential relationship based on support and understanding from a colleague who has walked in similar shoes. A peer supporter who has traveled the road to recovery can relate and offer empathy and validation. Drawing from personal lived experience and acquired skills, they can offer support as a colleague strives to find their own unique path towards recovery (or coping in the case of a family member or loved ones). Peer support is intended to be an avenue of hope towards recovery.

At the Region of Peel, the process we have developed for this is outlined on the following page and is aligned with the standards set forth by Peer Support Accreditation and Certification Canada (PSACC). While currently launched within the Paramedic Services division, this program will be evaluated for further application within the Region of Peel. This link http://pathways.peelregion.ca/peersupport/ will take you to the Peer Support home page on the Region’s intranet where further information can be found.

NOTE: All links in this document are for Region of Peel internal use only.
Peer Support Program (PSP) Process Flow

PRPS employee expresses interest in PSP

- Is employee in crisis? [See red text below]
  - Yes
    - Follow current ROP and PRPS practices
  - No
    - Follow 'Steps to Access bios and contact info'

- PRPS employee to e-mail or call the PS directly

- PS to briefly review/discuss intent of Program
  - Does PRPS employee want to proceed with Program?
    - Yes
      - Pair is established
      - Is engagement on shift?
        - Yes
          - Follow SOP SCH-9
        - No
          - Conduct a Warm Transfer if employee is agreeable
          - END
    - No
      - Consider the following:
        1) you perceive that imminent harm to the employee or others may occur
        2) you sense that the employee is unable to function and requires immediate attention

- Follow current ROP and PRPS practices
  - Is employee in crisis?
    - Yes
      - Follow current ROP and PRPS practices
    - No
      - Does PS and PRPS employee agree to work together?
        - Yes
          - Pair is established
        - No
          - Conduct a Warm Transfer if employee is agreeable

- PRPS employee to follow up with PRPS employee within 24 hours

- Follow up with PRPS employee within 24 hours

- Is employee still interested in PSP?
  - Yes
    - Follow current ROP and PRPS practices
  - No
    - PRPS employee expresses interest in PSP

- Is employee in crisis? (See red text below)
  - Follow current ROP and PRPS practices
  - Follow up with PRPS employee within 24 hours

- Do they know of a Peer Supporter (PS) they want to contact?
  - Yes
    - Follow 'Steps to Access bios and contact info'
  - No
    - PRPS employee to follow up with PRPS employee within 24 hours

- Do they need their contact info?
  - Yes
    - Follow current ROP and PRPS practices
  - No
    - PRPS employee to follow up with PRPS employee within 24 hours

- Are they comfortable utilizing Pathways to find this?
  - Yes
    - Follow 'Steps to Access bios and contact info'
  - No
    - PRPS employee to follow up with PRPS employee within 24 hours

- Do they need their contact info?
  - Yes
    - Follow current ROP and PRPS practices
  - No
    - PRPS employee to follow up with PRPS employee within 24 hours

- Consider the following:
  1) you perceive that imminent harm to the employee or others may occur
  2) you sense that the employee is unable to function and requires immediate attention

WARM TRANSFER - Ask PRPS employee:
- if they would like you to assist them in choosing another Peer Supporter
- if they would like you to (and give consent for you to) provide some background to the new Peer Supporter
- if they would like to be connected (or know how to reach out themselves) to the Program Manager
- if they would like assistance in understanding other resources outside of Peer Support available to them
- if they would like you to assist with getting EAP involved
6.3 Employee and Family Assistance Program

The Region’s EFAP provider offers workplaces, employees, and their families with accessible tools and resources anytime, anywhere. The goal is to provide service in a prompt manner and in a method most suitable to the individual’s lifestyle and learning style. The service is available 24/7/365 through the EFAP telephone number, through the internet site (workhealthlife.com) or via the MyEAP mobile app.

**WorkAssist** is a service which helps resolve the psychological barriers that are preventing an employee from remaining at work and ensures the appropriate assessment, treatment and follow up is provided. EFAP intake counsellors also have the ability to leverage customized and extended counselling supports for paramedics facing difficult clinical issues like significant depression and post-trauma stress symptoms. Counsellors screen for potential referral into one of the following enhanced services:

**Depression Care**, where the counsellor has the ability to measure the severity of symptoms and determine an appropriate care path, treating individuals with mild to moderate depression. The counsellor is able to extend the duration of counselling while maintaining the existing counselling relationship.

**Trauma Assist**, which is a clinically validated approach focused on accessing the individual’s needs, ensuring their safety, and achieving emotional stabilization. It differs case by case and offers an individualized program dependent upon the severity and the care path. This program is not a PTSD treatment program but a Post-Traumatic Stress Program.

A summary chart from the Region’s current provider can be found on the following page.
6.4 Risk Assessment Initiative

The Region of Peel wants to operate in a way that actively works to prevent harm to employees’ psychological health, including in negligent, reckless, or intentional ways, and that promotes psychological well-being, as per the National Standard of Canada for Psychological Health and Safety in the Workplace (the CSA Standard).

It is recommended in the CSA Standard that organizations should first assess needs and address gaps in psychological safety, using the 13 workplace psychological factors identified within the CSA Standard as a base, before undertaking far-reaching health promotion activities.

In particular, due to the nature of paramedic work, there is an increased exposure to traumatic events. Paramedics Services, both staff and leadership, had raised the need for increased attention to workplace psychological health & safety.

Source: Shepell (2017)
The Region commenced a project in 2016 to address this within the Paramedic Services Division. The two major objectives of this project were:

- to conduct a comprehensive workplace psychological risk assessment including focus groups, a confidential survey, and a program operations review (e.g. policies, procedures, and practices) based on the CSA Standard
- to use the results of the risk assessment to develop a relevant, evidence based, prioritized action plan, to inform next steps in fostering a psychologically healthy and safe work place within the Paramedic Services Division

This project is a multi-year initiative and a joint effort between Human Resources - Workplace Health, Safety & Wellness and the Paramedic Services Division to ensure learnings are captured for future corporate application. It is considered important to maintain linkages with complementary corporate projects such as corporate culture and the new leadership development program.

6.5 Internal and External Mental Health Supports

Attached as Appendix A and Appendix B are the resource sheets for Paramedic Services leadership and paramedics.
7 Return to Work

The Region of Peel’s return to work program is built on principles which support positive outcomes for our employees. Some highlights of the return to work process are outlined below:

- the employer will make early and considerate contact with the injured/ill employee
- the employer will make an offer of modified work to the injured/ill employee so they can return to work safely
- the return to work plan will be developed so that it supports the returning employee, their colleagues and their supervisor
- the supervisor will receive training in work disability prevention and will be included in the development of the employees return to work plan
- the employee will be provided an individualized return to work or stay at work plan that focuses on the employee’s functional and cognitive limitations
- the employer will maintain regular communication with healthcare providers (with employee’s consent) and the WSIB to ensure that all parties understand the employee’s job and the Region’s ability to accommodate

Return to work policies and procedures at the Region of Peel are based on functional and cognitive restrictions as opposed to symptoms or diagnoses.

7.1 Supervisor and Return to Work Considerations

When considering how to accommodate an employee, the Supervisor and the Disability Management Specialist will review the following:

- what are the employee’s limitations (functional and cognitive)?
- how will these limitations impact the work duties that the employee needs to perform?
- are there specific job tasks that will be problematic as a result of these limitations?
- what accommodations can help address these limitations?
- has the employee been asked about possible accommodations?
- does the employee’s supervisor or colleague(s) need additional training to help facilitate a successful return to work?
8 Roles and Responsibilities for Prevention, Intervention, Recovery and Return to Work

This section outlines The Region of Peel Paramedic Services Division’s specific roles and responsibilities regarding the prevention and management of mental health challenges including PTSD.

8.1 Chief, Deputy Chief and Managers

Our Chief, Deputy Chief and Managers will:

- understand the impact that PTSD, and other occupational stress injuries have on the organization
- identify what health and safety programs already exist and how a PTSD Prevention program can be integrated into existing systems. Consideration is given to:
  - management training
  - employee engagement
  - anti-stigma awareness
  - communication strategies
  - civility and respect, anti-stigma
  - critical incident response and management
  - employee assistance programs or other benefits that support a mental health and wellness program
  - training individuals in strategies for resiliency and healthy behaviour
- identify gaps that need to be addressed using an assessment
- determine how the organization should monitor trauma exposures
- establish policies, procedures, initiatives and services to support the prevention plan and program and monitor implementation
- engage Commanders, Superintendents and Supervisors in the development of policies and procedures
- set the tone and lead by example, reducing stigma and encouraging conversations and take every reasonable precaution to protect employees
- maintain the prevention plan and program, evaluate it and look for opportunities to improve it
- invest in a coordinated return to work program that supports recovery and stay-at-work practices
8.2 Commanders, Superintendents and Supervisors

Our Commanders, Superintendents and Supervisors will:

• be involved in the workplace assessment and participate in identifying controls
• participate in training to be aware and ready to address the day to day aspects of mental health challenges including PTSD prevention and management
• participate and contribute in establishing policies, procedures, initiatives and services to support the program.
• support the policies, procedures and prevention plan and program
• provide advice on how to monitor trauma exposures
• identify individuals at risk of mental health challenges including PTSD
• be prepared through training, coaching or other means to engage employees in discussions about psychological health and safety
• encourage active discussion with employees about mental health and psychological safety
• implement processes to report concerns and provide support to employees in need
• help identify control methods that support PTSD prevention such as workplace rotations for highly exposed individuals
• reduce stigma by participating in positive conversations
• make early and considerate contact with an injured/ill employee, if applicable
• actively participate in a systematic, structured and coordinated return to work process and plan

8.3 Joint Health and Safety Committee

The Region of Peel’s Joint Health and Safety Committee will be consulted in the development of a PTSD Prevention Plan and Program. To actively participate the committee will:

• understand the factors of the job that impact psychological health and safety, in particular PTSD. They should develop awareness about what Mental Health challenges, including PTSD, are as well as the symptoms, causes and risk factors
• be involved in the workplace risk assessment
• assist the organization in developing a process for identifying workplace mental health and wellbeing issues, and in particular PTSD
• help identify controls that can be put in place to address psychological health and safety.
• help reduce stigma related to mental illness by participating in identifying the need for education, training, and resources to address mental health challenges, including PTSD, and participating in delivering these to the organization
• participate in training to enable support of the workforce as required
• consult in the development of a communication plan and strategies related to address psychological health and safety, particularly PTSD
• reduce stigma by participating in positive conversations.

8.4 Employees
Our Employees will:
• comply with policies, procedures and the program
• participate in training and education about mental health and PTSD
• report concerns and incidents so that they can be investigated and addressed
• listen to coworkers and encourage engagement in the program if needed
• reduce stigma by participating in positive conversations

8.5 Disability Management Specialist
The Disability Management Specialist will:
• assist the injured/ill employee to remain or return to work while they recovering, while also ensuring that the employee’s return to work date is sensible, flexible and safe
• help the employee return to the workplace post-injury/illness
• connect and consult with the injured/ill employee, treating health professional, and WSIB representative and make sure that everyone understands what to expect and what is expected of them
• monitor the employees progress towards returning to work
• take steps to prevent further injury/illness
• help resolve issues or disputes related to the return to work
• reduce stigma by participating in positive conversations

8.6 Unions
The Union will:
• be consulted about policies and procedures
• participate in training to enable support of the workforce as required
• reduce stigma by participating in positive conversations
9 Policies, Guidelines and Procedures

The Region of Peel considers mental health, wellbeing and psychological safety of its employees to be an important part of a productive, effective and healthy workplace.

Executive leadership of the Region of Peel is actively involved in our employees’ mental health, wellbeing and psychological health and safety program and is committed to building psychological health and safety into all aspects of our organization’s operations, processes, policies, guidelines and procedures. They will ensure that these guidelines and procedures are applied in a timely, consistent and confidential manner, assessing claims and determining what corrective action is appropriate, if applicable.

Directors, Chiefs, Managers, Superintendents and Supervisors, along with Executive leadership, are responsible for fostering a stigma-free workplace and setting an example of appropriate behavior. This includes communicating the policy and procedures for bringing forward a claim, addressing situations which they become aware of in a timely fashion, and taking appropriate action in a sensitive and confidential manner for all employees.

Employees are responsible for treating coworkers with respect in the workplace, bringing forward claims and cooperating with investigations into claims. Employees are also responsible for treating all parties and situations in a sensitive and confidential manner.

The Region of Peel has the following policies (which, in turn, point to additional procedures and guidelines) that also apply to mitigating PTSD in our Paramedic Services division. We will continue to update and amend these as our program continues to evolve.

- Health and Safety - Policy HR3-01
- Complaints Process (excluding Violence and Harassment in the Workplace which is covered under a separate policy) - Policy HR02-09
- Hazard Reporting - Policy HR03-15
- Violence and Harassment in the Workplace - Policies HR02-04, HR02-10, HR11
- Incident/Accident Investigation - Policies HR03-27, HS02, HS15
- Accommodation for Persons with Disabilities - Policies HR03-32, HR18

The following links will take you to the Region of Peel’s Policies:

**Corporate**

**Paramedic Services**
- [http://pathways.peelregion.ca/dept/corp_services/emergency/sop.shtm](http://pathways.peelregion.ca/dept/corp_services/emergency/sop.shtm)
9.1 Health and Safety
Corporate Policy HR3-01 can be found on Pathways and commits to providing employees with a healthy and safe workplace. Our commitment to a healthy workplace is consistent with our Regional Values. The Region of Peel believes that healthy employees help to create a healthy work environment and a healthy work environment enhances the overall well-being of employees.

9.2 Complaints Process (excluding Violence and Harassment in the Workplace which is covered under a separate Policy)
Corporate Policy HR02-09 can be found on Pathways and provides all employees with a clear process to make complaints and ensures that complaints are dealt with in a fair, timely and confidential manner.

9.3 Hazard Reporting
Corporate Policy HR03-15 can be found on Pathways and ensures that the various workplace parties designated in the Act carry out their prescribed duties and responsibilities to ensure a safe and healthy workplace.

9.4 Violence and Harassment in the Workplace
Corporate Policies HR02-04 and HR02-10 can be found on Pathways and commit to a safe work environment for its employees which is free from harassment and discrimination. It is the policy of the Region to prevent, identify and resolve any employment-related incidents of harassment, discrimination, inappropriate behaviour or violent conduct; thereby ensuring a supportive and respectful work environment. Paramedic Services has an additional Policy HR11 - Harassment and Discrimination Investigations.

9.5 Incident/Accident Investigation
Corporate Policy HR03-27 can be found on Pathways and is to ensure that all incidents and accidents are properly investigated in order to obtain information that would prevent a future reoccurrence and for the purpose of regulatory reporting. Paramedic Services has additional Policies HS02 - Injury, Illness & Exposure Reporting and HS15 – Critical Incident Stress.

9.6 Accommodation for Persons with Disabilities
Return to work policies and procedures at the Region of Peel are based on functional and cognitive restrictions as opposed to symptoms and diagnoses. Recommendations for accommodation are obtained from appropriate and applicable third party medical professionals. Our current policies also cover the needs of employees suffering from PTSD. Corporate Policy HR03-32 can be found on Pathways. Paramedic Services has an additional Policy HR18 - Accommodations and Modified Work Program.
10 Training

The Region of Peel employs what is often referred to as the 70/20/10 model for workplace learning which utilizes both formal and informal learning options. It is an expansion of knowledge and skills through a weighted approach of job related experiences, mentoring, and classroom training.

10.1 PTSD Awareness and Anti-Stigma Training

The Region of Peel is committed to providing mental health, including PTSD, and anti-stigma awareness training to all Leadership, Managers, Supervisors and employees within our Paramedic Services division and to maintaining the awareness training program so that all staff are familiar with the signs and symptoms of PTSD as well as all of our policies and procedures related to prevention, intervention and return to work. In addition to general e-training on mental wellness for both management and staff, and in conjunction with the Centre for Addiction and Mental Health (CAMH), our organization has implemented the Road 2 Mental Readiness (R2MR) Training Program. Below is the Mental Health Continuum that is presented as part of the awareness component.
10.2 Specialized Training
Disability management tools, templates, and processes have been updated to take both the physical and psychological needs of employees into consideration when coordinating return to work and accommodation efforts. Disability Management staff within Human Resources have received specialized training so that they can offer additional supports through the EFAP provider to at risk employees, as required. Job demand assessments, which are helpful in the workplace accommodation process, are being updated to include both the physical and psychological position requirements.

10.3 Corporate Leadership Development
The Region of Peel has a set of leadership and management competencies which are used for recruiting, developing and assessing leaders at all levels of the organization. As leaders can directly influence the health and well-being of their subordinates, the CSA Standard was a critical input into the design of the leadership competencies and their related behaviours. Together, these leadership behaviours support employee engagement, inclusiveness, innovation, and purposeful achievement of our mission and vision – which are essential elements for creating and maintaining a psychologically healthy and safe work environment. The Region has integrated psychological health and safety into its leadership competencies and leadership training in segments such as challenging conversations, communication skills, HR Fundamentals and competent supervision.

10.4 Staff Orientation
The mental health awareness and anti-stigma training, via R2MR, as well as the policies and procedures related to hazard recognition, reporting and interventions will be incorporated into the new employee orientation program within the Paramedic Services Division.
## 11 APPENDIX A

### Employee and Family Assistance Program (EFAP) and Other Mental Health Resources for Paramedic Services

#### Internal Resources

**EFAP**
The Region is committed to the health and well-being of our employees and their immediate family members. The EFAP is a service that is open 24 hours/7 days a week and is available for all staff, including temporary and part-time, and their eligible family members.

Note: Self-identify as a Paramedic, to bypass the normal intake assessment process and be connected directly with a counsellor for trauma/depression counselling.

**Disability Management Specialist**
Call to set up an appointment with your Disability Management Specialist for advice and support regarding a mental health or physical health issue, and workplace accommodation.

**Health and Safety Associate**
Provide proactive services to guide, support and enable workplace partners in fostering a safe, healthy, and inclusive work environment.

**Human Resource Associate**
Provide guidance and advice on all Human Resource matters such as recruitment, employee relations, performance management, benefits, salary administration, training, policy interpretation, and more general inquiries.

**Peer Support Program**
Trained, volunteer, PRPS employees, who have personally overcome a mental health challenge or that of loved ones, are available to assist peers who are living through similar challenges.

**LifeSpa**
A health and wellness platform which gives you and your family members instant access to expert advice on all kinds of health topics, including mental health.

#### External Resources

**Canadian Mental Health Association – Peel Branch**
Call for information, referral and training including information on all CMHA programs. CMHA Quick Guide for mental health and addiction resources also available. See other Region’s CMHA for their Quick Guide.

**Toma Centre Memorial Trust Foundation**
Peer support line for correctional, emergency and military service is open daily 8am-11pm. Offers funding to those who cannot afford services of mental health professionals.

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**You, Your Work, Your Workplace**
Updated: Mar 2017

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Psychological Health and Safety Program and PTSD Prevention

APPENDIX A
Employee and Family Assistance Program (EFAP) and Other Mental Health Resources for Paramedic Services

External Resources Continued - Information

Anti-Depressant Skills at Work
A self-care manual for dealing with mood problems at work.

sfu.ca/camh/toolsandresources.html

Being There when Mental Illness Strikes
A guide for friends, family members and co-workers who want to help.

Beingthereguide.com

Ementalhealth.ca
Provides anonymous, confidential and trustworthy information, 24 hours/365 days assisting you to find help and support in your community.

Ementalhealth.ca

Diakonos Retreat Society
Goal is to provide funding to those individuals who cannot afford access to mental health professionals.

403-201-9945 | legacyplacesociety.com

PTSD Coach Canada App
Application that helps in learning and managing symptoms occurring after trauma. Provides information and self-help tools to assist treatment.

veterans.gc.ca/eng/stay-connected/mobile-app/pted-coach-canada

Resources – Treatment Options

Bellwood – Health Services
Evidence-based treatment of addiction and mental health problems, including addiction and PTSD/DOSI.

Bellwood.ca

Homewood Health Centre
Mental health and addiction programs including PTSD and addictions, Traumatic stress recovery. Nov 2016 – PTSD and trauma, mood disorders and addictions outpatient clinic in Mississauga.

519-824-1010 | Homewoodhealth.com
Homewoodhealth.com/mississauga

The Mood Gym
By Centre for Mental Health Research (Australian National University). Learn cognitive behaviour therapy skills for preventing and coping with depression.

moodgym.anu.edu.au/welcome

First Responders First
Offers resources and services for the First Responder community to understand the various steps of a PTSD program from managing a crisis through to implementing best practices into an existing program.

Firstrespondersfirst.ca

Working Through It
Watch online videos featuring real stories of reclaiming mental well-being at work following a mental illness.

gw/centreformentalhealth.com/wti

211 Ontario.ca
Find program and services in your area including mental health, homelessness, and general community programs.

Dial 211 or 211ontario.ca

TruReach Mental Wellness App
Quick lessons based on cognitive behavioural therapy. Does not replace seeing a mental health professional; helps you deal with feelings of depression and anxiety.

psha.ca/mentalhealth/

Centre for Addiction and Mental Health
Combines clinical care, research, education, policy development and health promotion to help transform the lives of people affected by mental health and addiction issues.

1-800-463-2338 | camh.ca

National Service Dogs
Certified Service dogs are used to assist individuals suffering from long-term PTSD.

519-623-4188 | nsd.on.ca

For more information, contact your Health & Safety Associate.
# Appendix B

## Employee and Family Assistance Program (EFAP) services and other workplace mental health resources for Supervisors

<table>
<thead>
<tr>
<th>CONTACTS</th>
<th>EFAP SERVICES</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>EFAP [website]</td>
<td>Crisis, Trauma Intervention or Onsite Services</td>
<td>Onsite counselling services (group or one on one sessions). EFAP will help assess the situation and negotiate the best plan of action e.g. timing, number of counselors, and format of session. In person, telephonic or video conferencing. Notify senior management and HR Associate should a situation warranting EFAP crisis intervention exist. Paid by departments.</td>
</tr>
<tr>
<td>TTY:</td>
<td>Assisted Referral – Care Access Centre</td>
<td>Connect an employee who is having difficulties, directly with EFAP for assessment and support. With the employee’s permission, call EFAP, connect with clinician and pass the call over to the employee. For the caller’s privacy, let the clinician and employee know that you will be disconnecting from the conversation.</td>
</tr>
<tr>
<td>EFAP Website: workhealthlife.com</td>
<td>Management Consultations</td>
<td>Advice to supervisory staff on how to address sensitive employee situation (no fee).</td>
</tr>
<tr>
<td>MyEFAP app on your Region of Peel computer and BlackBerry also provides access and phone numbers.</td>
<td>Monitored and Mandated Referrals</td>
<td>A monitored clinical program used to help manage employee performance issues that may be caused by an underlying emotional/psychological or substance abuse issue. Requires employee consent for participation and workplace reporting: can be monitored (voluntary) or mandated and allows for the supervisor to ensure the employee is receiving help for the issue. Progress, attendance and goal adherence updates are provided. Few</td>
</tr>
<tr>
<td></td>
<td>Training</td>
<td>Request standard or customized training (fee).</td>
</tr>
<tr>
<td></td>
<td>Coaching</td>
<td>Customized one on one professional coaching, for issues such as: sensitivity training; support and skill development to manager/supervisors to coach and lead their teams; support individual in identifying his/her ineffective communication/behaviour style and work towards a more productive style. Minimum five sessions 1 hour in length; typically 8 to 10 sessions to achieve goal. Fee:</td>
</tr>
</tbody>
</table>

For more information please contact your Health and Safety Associate.
**APPENDIX B**

### Psychological Health and Safety Program and PTSD Prevention

For all staff including temporary and part time (no fee).

Topics such as:
- Personal issues (e.g., stress, depression, anxiety, crisis and grief)
- Relationships
- Addictions
- Workplace challenges
- Child or elder care
- Financial
- Legal
- Diet and Nutrition
- Naturopathy

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<tr>
<th>RESOURCE</th>
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</tr>
</thead>
<tbody>
<tr>
<td>DISABILITY MANAGEMENT SPECIALIST (DMS)</td>
<td>[Contact Information]</td>
<td>Call to set up an appointment with your Disability Management Specialist for advice and support regarding a mental health or physical health issue and workplace accommodation. Additional resources may be available.</td>
</tr>
<tr>
<td>HEALTH AND SAFETY ASSOCIATES</td>
<td>[Contact Information]</td>
<td>Provide guidance, support and advice on matters related to workplace health and safety including workplace violence.</td>
</tr>
<tr>
<td>HUMAN RESOURCES (HR) ASSOCIATES</td>
<td>[Contact Information]</td>
<td>Provide guidance and advice on Human Resources matters such as recruitment, employee relations, performance management, benefits, salary administration, training, policy interpretation, and more general inquiries.</td>
</tr>
</tbody>
</table>

**Psychological Health in the Workplace Resources for Supervisors (External)**

- **Workplace Strategies for Mental Health**
  - [www.workplacesstrategiesformentalhealth.com](http://www.workplacesstrategiesformentalhealth.com)
  - Resources to:
    - Increase knowledge and awareness of workplace psychological health and safety
    - Improve the ability to respond to mental health issues at work
    - Turn knowledge into action through practical strategies and tools for employers

Please refer to the “Employee and Family Assistance Program and Other Mental Health Resources for Employees” sheet for general mental health resources. Can be found on Pathways.