Health & Safety Association of BC



Introduction to CSSHSA Programs & Services

Tigran Bajgoric, CSSHSA CEO

TERRITORIAL ACKNOWLEDGEMENT

CSSHSA humbly and respectfully acknowledges the unceded lands of more than 200 distinct First Nations in British Columbia.

We further acknowledge that colonization and associated attitudes, policies, and institutions have significantly changed Indigenous peoples' relationship with this land.

In our work and in our lives, we are committed to listening and learning, to truth and reconciliation, and to finding better ways of being on this land.

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About CSSHSA

Every day across this beautiful province, our members deliver high-quality services to children, youth, adults, and families within their communities. These organizations provide vast, diverse, and complex services and programs across the province, and every British Columbian will, at some point, use these social services. Our organization, Community Social Services Health and Safety Association of BC (CSSHSA or Association) is composed of more than 2,400 member organizations, all part of the Community Social Services (CSS) sector.

ORGANIZATIONAL SERVICES

The type of services these organization cover are:

- Community Living: (i.e. support services to people with developmental disabilities, and people who have Autism or FASD, and also need support with daily tasks)
- Indigenous Services: (e.g. education, employment, gathering centres, health and healing, housing, legal, women and youth, and First Nations and Métis communities and councils)
- General Services: (e.g. immigrant services, harm reduction services, youth & family services, shelters, housing, food banks, needle exchange distribution & programs, language instruction, counselling, supports for refugees,
 family support programs)

The CSSHSA provides support and delivers health and safety information, education, and resources to employers and employees (unionized and nonunionized) of our membership. We engage the CSS sector to implement best practices in health, safety and wellbeing. And we continue to build industry partnerships to improve the health and safety culture of the sector.

Established in 2022







Our Values

Our values are interconnected and mutually reinforcing. We understand that our commitments to reconciliation and equity, diversity and inclusion are threads which weave through and inform how we engage with the sector and how we approach prevention.



We use our knowledge, experience and diversity to build partnerships and community connections.

We are committed to continuous improvement based on input and feedback from the sector.



We commit to the journey of Reconciliation, recognizing it as both an individual and collective responsibility that calls for continuous learning.

We honor Indigenous ways of knowing, being, and leading, and strive to weave these principles into our organizational culture and practices.





We cultivate a culture of health and safety through ongoing education, resources, and awareness, by destigmatizing accident and injury reporting and by proactively identifying risks, opportunities, and innovations.



We foster a workplace culture that embraces equity, diversity, and inclusion at every level.

A diverse and inclusive environment creates a safer and more supportive work environment for both employees and the communities they serve. We commit to fostering cultural safety within our organization and as a fundamental aspect of health and safety.

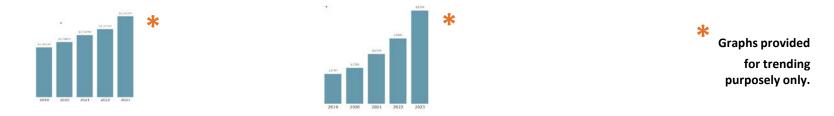
Our Current State

Who We Serve

CSSHSA represents organizations in the following three WorkSafeBC classification units**:



WHAT STARTED AS A PILOT PROJECT, AND A JOINT UNDERTAKING OF THE FEDERATION OF COMMUNITY SOCIAL SERVICES OF BC, CSSEA, AND WORKSAFEBC UNDER THE AUSPICES OF THE INNOVATION AND SUSTAINABILITY ROUNDTABLE, HAS NOW BECOME **AN INDEPENDENT, NON-PROFIT WITH THE SUPPORT OF THE CSS SECTOR.**



Our sector has been growing rapidly. Within our 3 classification units, the payroll has grown from \$1,881M to \$3,055M

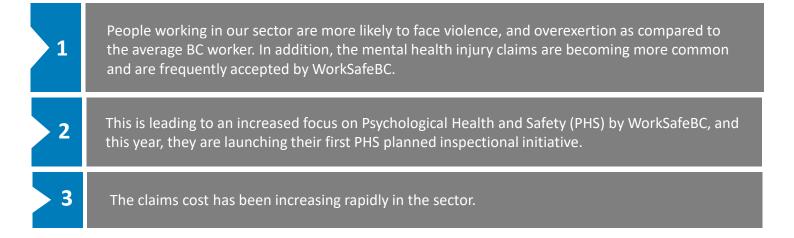
from 2019 to 2023. That's a whopping **62%** growth rate.

At the same time, the sector's WSBC assessment amount, from 2019 to 2023 has increased by

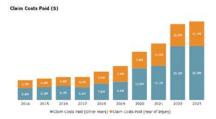
214%. This means we are paying more to WSBC for the insurance coverage that is provided. Much of the increase has been due to COVID claims, an increase in mental health claims and more violence and aggression incidents.

In January 2024, new amendments to the Workers Compensation Act require employers and workers to cooperate with each other and with WorkSafeBC in timely and safe return to work.

Key Sector Injury Trends

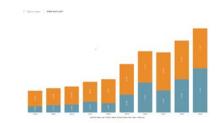


Claim Costs Paid

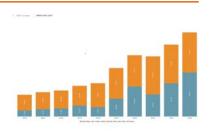


Claim Duration

Work Days Lost



Young Worker Claims



People working in our sector are **1.6X** more likely as the average BC workers to be injured on the job. The injury rate for our sector is **3.89** as compared to the industry average of **2.4**.

For people working in the residential social service sector that injury rate is **7.12**. They are **3x more likely** to be injured as the average BC workers. Nearly **30%** of claims are due to acts of violence.

Our Team



Tigran Bajgoric Chief Executive Officer



Ana Lucia Mateus Executive Coordinator



Suncha Satney Workplace Psychological Health & Safety Consultant



Therese Barrozo Community Engagement and Research Analyst



To be filled Occupational Health & Safety Specialist



Strategic Focus Areas

Content Education, Tools & Resources

Focus area objective: CSSHSA will build and deliver sector-specific education, tools and resources in order to improve health, safety and well-being, promote best practices, and create collaborative solutions for the sector.

O2 Health & Safety Culture

Focus area objective: CSSHSA will engage workers, employers, and organizations to build meaningful and collaborative partnership in order to create a health, safety and well-being culture in the sector where workers, managers and clients thrive.

O3 Association Capacity

Focus area objective: CSSHSA will develop organizational structures and systems to empower the internal partners and team and enable them to perform the work, maximize resources and grow the association.

04 Reconciliation

Focus area objective: CSSHSA will advance Reconciliation by integrating decolonization and Indigenous principles into our organizational culture, governance, and strategic operations and we will build authentic, reciprocal relationships and enact meaningful engagement with Indigenous communities and organizations connected to the sector.



HEALTH AND SAFETY MANAGEMENT SYSTEM

CSSHSA role is to support Community Social Service organizations across B.C. to provide safe and healthy workplaces, prevent work related injury and illness, and continually improve on occupational health and safety performance. This is also known as a health and safety management system (HSMS). An HSMS is a set of plans, actions and systems to support the creation of a culture of safety. It allows our organizations and sector to shift from reactive to proactive mode, one where every worker, supervisor and leader knows their health and safety role and responsibility and can achieve their best work.

CSSHSA will work in collaboration with our Board, Advisory Panel, CSS organizations and partners to tailor a HSMS solution in alignment with Canadian Standards Association (CSA) standards to promote the health, safety and well-being of anyone working in our sector.





HEALTH AND SAFETY CULTURE MATURITY SCALE*

CSSHSA role is to support organizations to move upstream on the health and safety culture maturity scale to proactive and resilient stages of safety culture. Such endeavours require a system approach to safety management. Organizations that reach the resilient stage have successfully implemented safety and risk management into its operations.





OUR SERVICES



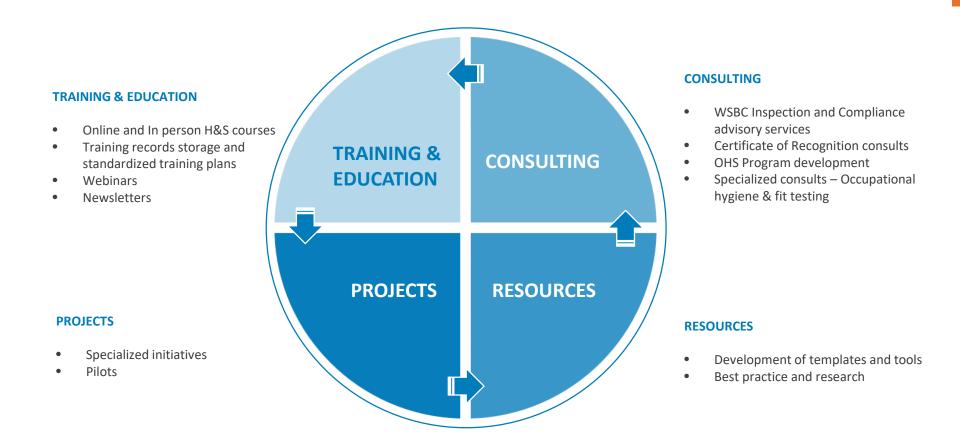


Health & Safety

Psychological Health & Safety



HOW CAN WE HELP: HEALTH AND SAFETY SERVICES





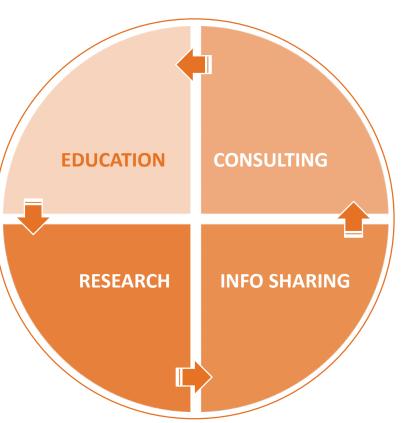
HOW WE CAN HELP: OVERVIEW

EDUCATION

- Workshops
- Webinars
- LMS
- Return to Work Training
- Violence Prevention
- Articles and Resources
- Wellness Exchange

RESEARCH

• Baseline overview of CSS Psychological Climate



CONSULTING

- Gap Analysis & Recommendations
- Best Practices
- Employee Surveys
- One on One consulting
- Implement the National Standard

INFORMATION SHARING

 Opportunities to learn about what works well for others within the sector





Canadian Mental Health Association British Columbia Mental health for all

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Community Social Services Employers Association of BC (CSSEA)

Fresh Perspectives Conference

Wednesday 9 October, 2024

Jonny Morris, CEO – CMHA BC

We respectfully acknowledge x*mə0k*əýəm (Musqueam), Skwxwú7mesh (Squamish), səlilwəta?+ (Tsleil-Waututh), Lkwungen (Songhees) and Wyomilth (Esquimalt) peoples on whose traditional, unceded lands the CMHA BC offices are located.



DID YOU

One third of people in Canada will experience a mental illness or substance use disorder in their lifetime¹ – that is almost 1.7M people living in British Columbia.

Around 10% of the provincial population experiences a mood or anxiety disorder² and 25% of the population will experience a substance use disorder in their lifetime.³

BC has the highest rates of toxic drug deaths in Canada,⁴ and we have lost over 14,000 people to toxic drugs since 2016.⁵

BC also has a higher-than-average rate of self-harm, including suicide,⁶ losing at least 639 people to suicide in 2023.⁷

The cost of the status quo continues to outpace what is being invested.



DID YOU

Approximately 30% of short and long disability claims in Canada are attributed to mental health concerns.¹

Poor mental health conservatively costs Canada \$50 billion per year.¹

Most adults spend more of their waking hours at work than anywhere else, and 70% of Canadian employees are concerned about the psychological health and safety of their workplace.¹

In B.C. mental health injury claims increased by 38% between 2019 and 2021. And 40% of all mental health claims came from the health sector, WorkSafeBC.²

Employers bear the costs due to absenteeism, presenteeism, and turnover.



CMHA BC Workplace Programs and Services





Supporting the Mental Health of Healthcare Providers

Care for Caregivers & Care to Speak

www.careforcaregivers.ca/caretospea



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Advocating for Change: Jenna Schonke's Insights On Self-Care, Advocacy & Mental Health

Jenna Schonke shares her personal journey through mental health struggles, her professional insights, and her aspirations for the future of mental health care.

LISTEN NOW »

Empowering Healthcare Workers: Mark Antczak on Anxiety & Self Care

Mark Antczak shares his expertise in clinical counseling, highlighting the challenges and solutions for managing anxiety effectively.

LISTEN NOW »

People Working Well









The Mental Health Continuum and Stages of Wellness

Men's Mental Health Resources

Ways We Can Help

Caring for yourself is especially important when caring for others

Each of us plays a crucial role in shaping a healthy workplace culture. Let us support your journey towards building a healthier workplace for yourself and your colleagues.

Tourism & Hospitality	د.
Your voice, presence, and well-being matter.	
Community Social Services You support our communities in so many important ways.	÷
Healthcare and Continuing Care	÷

Workplaces that put people first

Workplace mental health has never been more important and we're here to support you every step of the way. Whether you're struggling with stress or concerned about a coworker, remember, you're not alone. Consider us your trusted guide, offering help, training, and a supportive community.

We're BC's Hub for Workplace Mental Health







Workplace Fee for Service

https://bc.cmha.ca/wp-content/uploads/2023/04/Workplace-Training-Brochure.pdf



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Workshops and training

- CMHA BC is a major workplace mental health training centre in BC
- 20 years old, training over 30,000 participants
- Collaborate with workplaces
 - o Customize presentations and trainings
 - Consult to help implement mental health strategies
 - Supporting psychological health and safety in the workplace
- Funded through our fees:
 - o \$500+ GST virtual session
 - \$600+GST and travel in-person session





Workshops

Most workshops are available both in-person or virtually, from 1 to 4 hours long

MENTAL HEALTH AT WORK

- Awareness
- Awareness for Managers
- Burnout
- Compassion Fatigue
- On the Front Line
- Resilience
- Responding with Respect
 for Managers

PSYCHOLOGICAL HEALTH & SAFETY

- Introduction to PHS
- PHS Supporter Training
- PHS Navigator Training

SELF-PACED COURSES

Understanding Addictions

LUNCH & LEARN

- Awareness
- Compassion Fatigue
- Care Tips for the Front Line
- Diversity, Equity and Inclusion
- Emotional Intelligence
- Supporting Someone
 Who is Struggling
- PHS Introduction
- Resiliency



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Who we've worked with

- BC Farm Writers' Association
- BC Municipal Safety Association
- BCGEU
- Camosun College
- CIMS Ltd
- DLA Piper (Canada) LLP
- Fortis BC
- Harbour Authority Association of BC
- HME Mobility & Accessibility
- Hi Hostels
- Homelessness Services Association of BC
- Law Society of BC

- Lower Mainland Local
 Government Management
 Association of BC
- Manufacturing Safety Alliance of BC
- Ministry of Indigenous Relations and Reconciliation
- Ministry of Indigenous Relations and Reconciliation, Victoria
- Ministry of Social Development and Poverty Reduction
- Office of Auditor General of BC
- Pinchin Ltd
- Richmond Division of Family Practice
- Royal Bank of Canada, Victoria

- Royal Bank of Canada, Vancouver
- Simon Fraser University
- SafeCare BC
- Seven Oaks Shopping Centre
- Teck Resources Ltd (VHO in Vancouver)
- United Steel Workers District 3
- Vancouver Public Library
- Vancouver Airport Authority
- Vector Corrosion Technologies
- Western Economic Diversification Canada
- WorkSafeBC



Questions, ideas, feedback?

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MENTAL HEALTH AT WORK Workplace Mental Health Toolkit

Facilitators: Suncha Satney(She/Her), Geoff Moffett (He/Him)

Presented by: Community Social Services Health & Safety Association of BC and Canadian Mental Health Association, BC Division

Date: October 9, 2024



Ancestral Land Acknowledgment



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Geoff Moffett (he/him/his)

Workplace Mental Health Facilitator Canadian Mental Health Association BC Division

Suncha Satney (she/her/hers)

Workplace Psychological Health and Safety Consultant Community Social Services Health and Safety Association

COMMUNITY SOCIAL SERVICES Health & Safety Association of BC





Goals



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• Decrease stigma associated with mental health

 Learn to notice signs a person may be experiencing a mental health problem

- Develop supportive communication skills
- Learn how to take care of yourself when dealing with stressful situations
- Learn about resources to which you can refer

Mental Health at Work: Understanding Mental Health



Our Vision: A Canada where mental health is a universal human right

- One of Canada's most established charities
- Advocacy and resources to help prevent mental health and substance use problems and support recovery and resilience
- Anchored in evidence and informed by personal experience
- 14 branches providing community-based services throughout BC

There is no health without mental health

About CMHA





Facts

- Mental health challenges affect all Canadians
- 1 in 5 Canadians will experience a mental illness
- Mental health challenges affect an individual's feelings, thinking and behaviour
- Treatments can reduce the symptoms of mental health challenges
- Recovery is expected, with *timely, adequate* treatment



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Mental Health vs. Mental Illness

Terms are used interchangeably but mean different things

About Terminology



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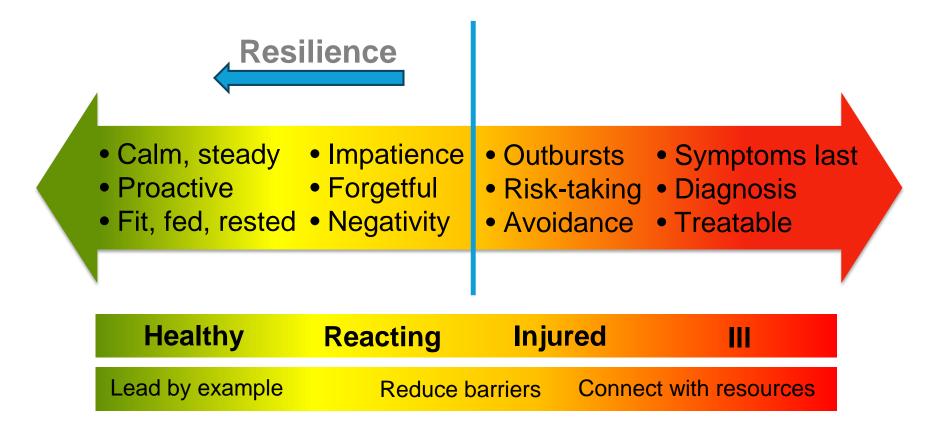
Association canadienne pour la santé mentale Colombie-Britannique La santé mentale pour tous • Mental Health is a state of well-being in which every individual:

- realizes their own potential
- can cope with the normal stresses of life
- can work productively and fruitfully
- is able to contribute to their community World Health Organization

• Mental Illness is a health condition involving changes in emotion, thinking or behavior (or a combination)

American Psychiatric Association

Mental Health Continuum Model





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Adapted from Nash, 2011



Mental health challenges become illness when the symptoms:

Diagnosis

- Are severe
- Last several weeks
- Interfere with a person's work, school, and social life



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Mental Illness Risk Factors



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Genetics

- Family history, personal history, discrimination
- Trauma
- Personal stressors
- Workplace stressors



Mental Illness Protective Factors



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- Awareness of mental health challenges
- Social support (relationships)
- Sense of belonging (community or cultural connection)
- Environmental factors (workplace, community, home)
- Personal resilience (physical/ emotional wellbeing, personal coping skills, optimism)



Common Mental Health Disorders



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• Bipolar disorder

- Post-traumatic stress disorder
- Eating disorders
- Schizophrenia

For more details on mental health, disorders, treatments <u>www.heretohelp.bc.ca</u>

STIGM Let's talk about MENTAL HEALTH

This Photo by Unknown Author is licensed under CC BY-SA-NC

Negative attitudes toward mental illness remain widespread

Stigma

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- Negative attitudes and discrimination create stigma
- Can affect the person long after mental illness symptoms have diminished
- Disabilities due to mental illnesses are recognized under the Canadian Human Rights Act and BC Human Right Act

Workplace Mental Health Stigma

Employees who have given a false reason for mental health related time off.	40%
Employees who have kept a mental health diagnosis hidden from workplace management.	82%
Employees who want executives to help normalize the mental health conversation.	50%
Employees who say they would be more productive at work if there was better mental health support.	38%



Mental Health at Work: Stress and Mental Health



How are you feeling?

- Many of the signs and symptoms of stress, low mood and depression are the same
- Notice a change in our behaviours and respond with supports
- Early intervention = better outcomes



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What is Stress?



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- Stress is a response to emotional and/or physical threats
- When a situation is demanding and its difficult to manage, we label it as "stressful"
- Stress affects individuals differently
- Stress can affect every aspect of our lives
- Stress can be positive or negative



Sources of Stress

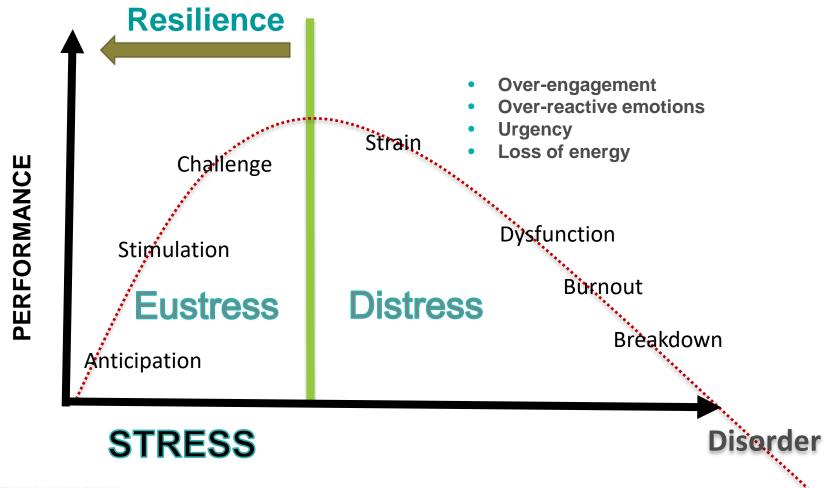


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Association canadienne pour la santé mentale Colombie-Britannique La santé mentale pour tous Two main sources:

- General life stress
- Work-related stress
 - What are your triggers?
 - What are your ways of coping?
 - What are your colleague's triggers and coping?

Stress Continuum





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Burnout



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Association canadienne pour la santé mentale Colombie-Britannique La santé mentale pour tous Not a disease or a medical condition

A syndrome ...resulting from chronic **workplace** stress that has not been successfully managed

- More likely when job demands exceed job resources
- Characterized by
 - Exhaustion
 - Cynicism or negativism related to one's job
 - Reduced professional efficacy

Ref: World Health Organization, ICD-11; C. Maslach



Burnout



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• stress feels never-ending

- feelings of emptiness, apathy, and hopelessness
- key signs include:
 - physical and mental exhaustion
 - a sense of dread about work
 - frequent feelings of cynicism, anger, or irritability

Contributing factors to burnout



Credit: break-through.ca



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Substances

- are beneficial for people in some situations
- contribute to health and social routines
- becomes a disorder if it's habitual and compulsive- despite negative personal or social effects

Addiction

- where problematic patterns of substance use, or behaviours can interfere with a person's life
 - substance related (such as the problematic use of alcohol, nicotine, etc.)
 - behavioural addictions (such as gambling, food, internet addiction, etc.)

Substances and Addiction



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NON-USE	BENEFICIAL USE	LOWER-RISK USE	HIGHER-RISK USE	ADDICTION (Substance use disorder)				
Avoiding use of substances (abstinence) Example: No drugs, tobacco or alcohol	Use that can have positive health, social, or spiritual effects Example: Taking medication as prescribed, ceremonial/ religious use of tobacco (such as smudging)	Use that has minimal impact to a person, their family, friends and others Example: Drinking following the <u>low-risk alcohol drinking</u> <u>guidelines</u> , cannabis use according to the <u>lower-risk</u> <u>cannabis use guidelines</u>	Use that has a harmful and negative impact to a person, their family, friends and others Example: Use of illegal drugs, impaired driving, binge drinking, combining multiple substances, increasing frequency, increasing quantity	A treatable medical condition that affects the brain and involves compulsive and continuous use despite negative impacts to a person, their family, friends and others Example: When someone cannot stop using drugs, tobacco or alcohol even if they want to				
A person may move back and forth between the stages over time								
				F				

Substance Use Spectrum

- Substance use is different for everyone and can be viewed on a spectrum with varying stages of benefits and harms
- approximately 21%, or about 6 million people, will meet the criteria for addiction in their lifetime in Canada



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Source: Canada.ca

Mental Health at Work: Communicating at work



Working contributes to recovery

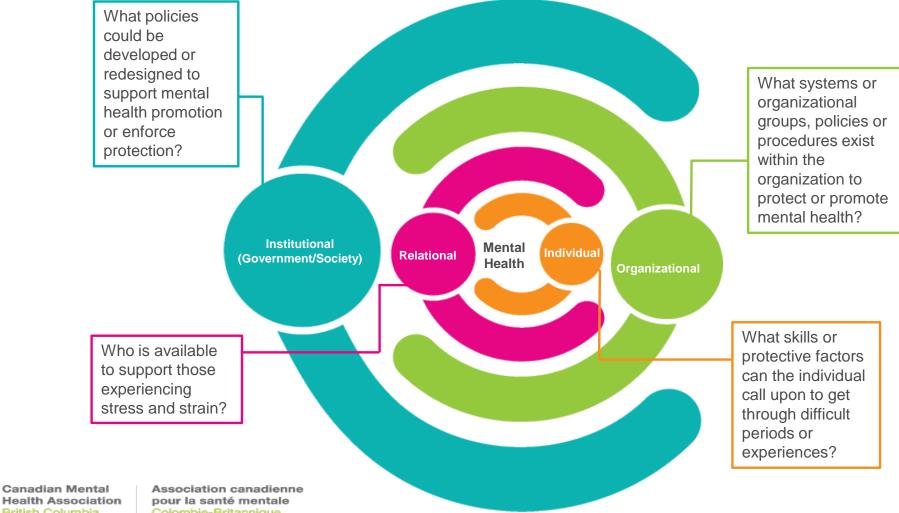


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Association canadienne pour la santé mentale Colombie-Britannique La santé mentale pour tous Working - in a healthy work environment - contributes significantly to mental wellbeing

- Routine
- Social contact
- Activity
- Contribution, meaning
- Sense of identity
- Financial security

Mental Health is Everyone's Responsibility



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Noticing

- Changes to behaviors
- Struggles
- Verbal and non-verbal communication
- Concerns to address



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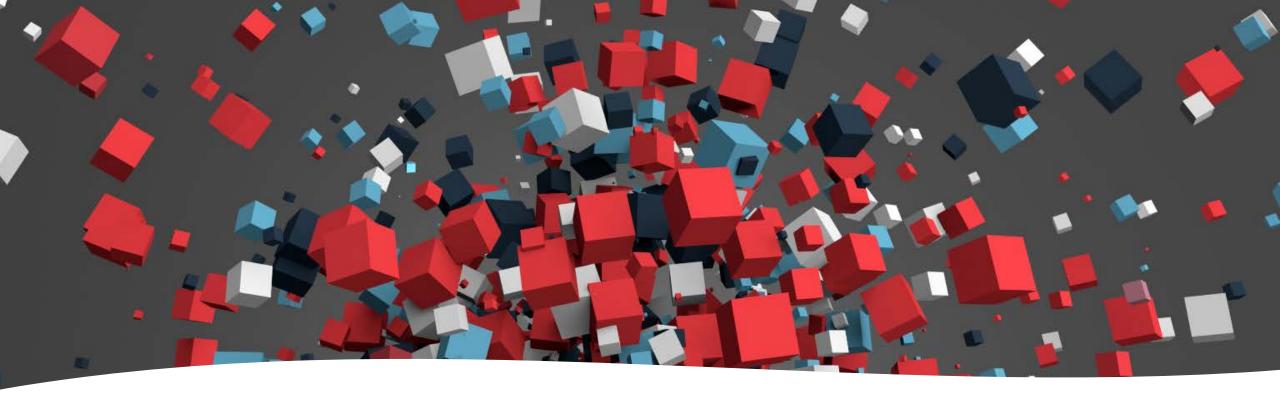


Good mental health



Association canadienne Canadian Mental Health Association pour la santé mentale Colombie-Britannique Mental health for all La santé mentale pour tous • What does it feel like?

• What does it look like?



Poor mental health



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• What does it feel like?

• What does it look like?



Within your role



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Set boundaries

• It's your right and responsibility

Allow time

 for the person to express themselves as appropriate

Steer conversations

• to focus on support

Set limits

around time/topics if required

Pay attention

• to your emotional responses

Respect your limits

Know when to refer to supports



Communication Tips



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Verbal

- Open ended questions
- Paraphrasing
- Encouragements
- No interruptions

Non-Verbal

- Eye contact
- Body posture
- Attention
- Sitting down
- Tone (phone)



Having a conversation with a co-worker



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Prepare yourself

time, place, resources, your mindset

• I notice

validate what has been good, and changes you have noticed in behaviours (including via email, phone, etc.)

• I'm wondering

be open to listening and understanding the other's situation

• How can I help?

what can both you and the other person do in order to return to working well

• Take a moment for your own well-being



Spend a moment thinking about how you respond to people who seem

Sad Confused Anxious Angry



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Mental Health at Work: Supporting Staff



Empathy



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- Is not sympathy
- We try our best to see a situation through another person's eyes
 - Why does this person feel the way they do?
 - What are they dealing with that I don't see?
 - Why do I feel differently than they do?

Watch video – Brené Brown on Empathy





Situation Calling for Empathy



Canadian MentalAHealth AssociationpBritish ColumbiaCMental health for allLo

Association canadienne pour la santé mentale Colombie-Britannique La santé mentale pour tous A frontline staff member River, comes in to work visibly distressed.

River explains that they can't stop seeing or thinking about a traumatic event that happened with their client a few days ago. River also explains feeling overwhelmed with their current caseload, and just not feeling like themselves. River expressed that they feel isolated and is having difficulty talking to someone about this



Which is an Empathetic Response?



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- 1. Hang in there. Things will work out eventually
- 2. I think you just need to focus on yourself and use our EFAP benefits, you'll feel better
- 3. It sounds like you're carrying a heavy emotional burden right now
- 4. I'm hearing you say that you can't stop thinking about the traumatic event with your client, and you're feeling overwhelmed with work.
- 5. What the heck? Didn't we have a debriefing plan?
- 6. You wish you could talk with someone about your struggles but feel you can't. That must be so frustrating!



Four Components:

A Trauma Informed Approach

• Trauma Awareness

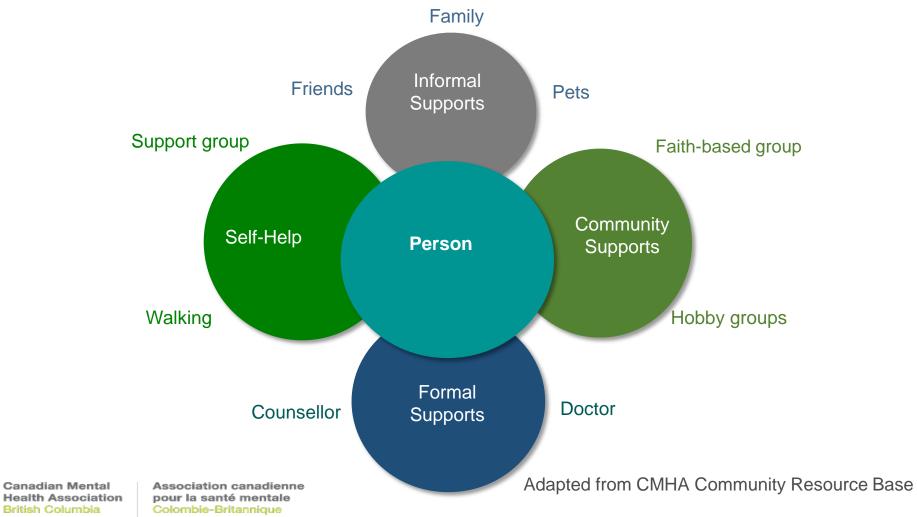
- Safety & Trustworthiness
- Choice, Collaboration & Connection
- Strengths Based and Skill Building



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Framework for Support





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Trauma-informed Workplaces

Principle	Safety	Choice	Collaboration	Trustworthiness	Strengths-based and skill-building
Definition	Ensuring physical and emotional safety	Giving employee choice and control	Involving employees in discussions	Providing task clarity, consistency, and interpersonal boundaries	Recognizing and utilizing strengths and a growth focused approach
Practices in the workplace	 Quiet spaces are available Privacy is respected "Check ins" & debriefing are valued 	 Employees have: Freedom to plan and manage work Choice to establish healthy boundaries 	 Input from employees is integral 	 The workplace has: Role clarity Approachable, reliable leadership Respect for professional boundaries 	 Relationships are valued Employees are validated and acknowledged Development & education opportunities are available

Adapted from U of Buffalo, ND





Questions to Ask



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• What has helped in the past when things get difficult?

• What do you need?

- Do you have someone to support you?
- Would it be helpful to connect with your supports?



In a set timeframe

Continued sense of safety and acceptance

Follow up



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- To reinforce our support
- Provide encouragement, if appropriate



Debriefing

Informal de-briefing:

- the listener has no choice in hearing about the situation
- one person can pass on stresses to another

Formal de-briefing:

- Increased self awareness- level of details you tell
- Fair warning- if there is troubling news
- Consent –"I heard something very disturbing today, can I tell you about it?"
- Limit disclosure to what is appropriate at the time



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Mental Health at Work: Stress management



Autonomic Nervous System



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Association canadienne pour la santé mentale Colombie-Britannique La santé mentale pour tous Sympathetic (Gas pedal)

- Generates stress response;
 "fight, flight, freeze, fawn"
- Needed for short-term protection and survival

Parasympathetic (Brake pedal)

- Generates relaxation response; "rest and digest" and activities essential for recovery
- Needed for long-term survival



Stress management



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Find ways to avoid/alter stress:

- Establish boundaries
- Regularly do something you enjoy
- Take good care of yourself
- Watch your thoughts
- Connect with people
- Speak up and ask for help
- Help others

What are some ways you reduce stress at work?



Self care

- Breathe
- Seek and give support
- Debrief difficult situations
- Practice work-life balance
- Take a break

- Relax
- Practice healthy nutrition
- Walk
- Take care of your mind and body
- Treat yourself



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- Mindfulness is about noticing, not thinking
- Let's try this, for just 3 minutes

Mindfulness



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- Family and friends
- Family doctor/ Walk-in clinic
- Healthlink BC: 811
- Employee & Family Assistance Program
- Supervisor, Manager, HR or Union
- Resource Support Line: https://bc.211.ca; 211; #bc211; @bc211Help
- Mental Health Support: 310-6789
- National Suicide AND Crisis Lifeline: 988
- BC Crisis Line: 1-800-SUICIDE (1-800-784-2433)
- Police/ambulance: 911

Please reach out





Community Social Services Health and Safety Association of BC https://csshsa.ca/

Workplace Mental Health Resources



Association canadienne pour la santé mentale Colombie-Britannique La santé mentale pour tous People Working Well https://peopleworkingwellbc.ca/

Care for Caregivers & Care to Speak https://careforcaregivers.ca/caretospeak/

Workplace Strategies for Mental Health www.workplacestrategiesformentalhealth.com

Guarding Minds @ Work https://www.guardingmindsatwork.ca/



Mental Health and Wellness Supports for Indigenous People



Association canadienne pour la santé mentale Colombie-Britannique La santé mentale pour tous 24-hour KUU-US Crisis Line: Toll free (1-800-588-8717) Adults/Elders (250-723-4050) Child/Youth (250-723-2040) Métis Line (1-833-MétisBC)

Indian Residential School Survivors Society: 1-800-721-0066 or 604-985-4464

Hope for Wellness Helpline: hopeforwellness.ca or 1-855-242-3310

First Nations Health Authority: www.fnha.ca/what-we-do/mental-wellness-and-substance-use



Mental Health Resources



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Association canadienne pour la santé mentale Colombie-Britannique La santé mentale pour tous Canadian Mental Health Association www.cmha.bc.ca www.cmha.ca

Here to Help www.heretohelp.bc.ca

Anxiety Canada https://www.anxietycanada.com/ Centre for Addition and Mental Health https://www.camh.ca/

Mental Health Commission of Canada https://mentalhealthcommission.ca/

Mood Disorders Association of British Columbia https://mdabc.net/



CMHA Workplace Workshops



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Mental Health at Work:

- Awareness
- On the Front Line
- Compassion Fatigue
- Burnout
- Responding with Respect: Workplace Mental Health Skills for Management

Psychological Health and Safety:

- Introduction to PHS
- Supporter Training
- Navigator Training

Lunch and Learn:

• 1-hour workshops

CMHA Resources for Co-workers, Friends and Family Members

LIVING LIFE TO THE FULL helping you to help yourself





Confident Parents Thriving Kids





Please completing the following sentences:

For your own self

- For my own mental health and resiliency, this evening, I will
- I will take care of my well-being over the next month by





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Thank you!

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