

# HRP01: Psychosocial Hazard Management

## Section 1 - Purpose and Scope

(1) The purpose of this procedure is to outline Southern Cross University's approach to identifying, assessing, and managing psychosocial hazards in the workplace in accordance with its obligations under work health and safety legislation. It supports the University's commitment to providing a healthy and safe working and learning environment for its employees and others whose activities are under the University's direction or control.

(2) This procedure applies to all University employees. It also informs students, visitors, and other stakeholders of the University's expectations in relation to psychosocial risk, to the extent that their activities may be affected by or contribute to those risks.

(3) The procedure applies across all Southern Cross University work units, campuses, and controlled entities, including on-site, remote, and online work environments.

## Section 2 - General Principles

(4) Work, health, and safety legislation include psychological health within its scope because persons conducting a business or undertaking (PCBUs), typically employers, have an obligation to ensure that the risk of psychosocial hazards is appropriately managed. Further, employees at all organisational levels also have a proactive duty to take reasonable care of their psychological health and not adversely impact other people's psychological health.

### Characteristics of psychosocial hazards

(5) Psychosocial hazards can have many contributing factors, including:

- a. The design or management of work
- b. A work environment
- c. Plant at a workplace
- d. Workplace interactions or behaviours
- e. Non work related factors.

(6) The nature and prevalence of psychosocial hazards may vary across different types of work and work environments. For example, the psychosocial risks faced by academic, administrative, and client-facing roles may differ in kind and intensity. Accordingly, psychosocial risk assessments must be tailored to the specific context of the work and the work unit.

(7) Exposure to psychosocial hazards can contribute to a range of health outcomes, including psychological injury and, in some cases, physical health impacts. These effects may occur immediately following exposure or may emerge over time. Risk management efforts should focus on eliminating or minimising work-related contributors to psychological harm so far as is reasonably practicable.

(8) Individual factors such as a person's health status, previous experiences, personal circumstances, and coping capacity may influence how they experience or respond to psychosocial hazards. While these factors are not within

the University's control, they may affect a person's vulnerability to harm. Where relevant and appropriate, such factors should be considered when assessing psychosocial risk, provided this can be done lawfully, respectfully, and in consultation with the affected individual.

(9) Individual responses to psychosocial hazards may vary depending on a range of factors, including work experience, personal circumstances, and individual coping capacity. While the University cannot and should not make assumptions about personal vulnerability, it recognises that some workers may require additional support to ensure a safe working environment. Where reasonably practicable and with appropriate regard to privacy and dignity, these factors may be considered during psychosocial risk assessment and consultation processes

(10) Psychosocial hazards can combine and interact with each other, and physical hazards can increase the risk of harm.

(11) Psychosocial hazards may interact or co-occur with other hazards, including physical risks, and may contribute cumulatively to the risk of harm. For example, an employee working remotely may experience both social isolation and physical discomfort due to a poor ergonomic setup. Risk assessments should consider the relevant work context and the reasonably foreseeable interactions between hazards, rather than assessing each in isolation.

(12) An important consideration for psychosocial risk management is that, similarly to activities in the physical domain that carry risk (e.g., manual handling builds physical resilience), some level of stress can be positive when it is experienced in appropriate doses and within the framework of a well-performing organisational risk management framework. An example is a moderate level of job demands, which can be interpreted as a 'challenge' stressor that drives motivation and engagement in work tasks.

## **Managing psychosocial risks**

(13) There are four key steps involved in managing psychosocial risks:

- a. Identify hazards
- b. Assess risks
- c. Control risks
- d. Review control measures.

(14) Throughout all four risk management steps, there are two important consistent considerations:

- a. Management commitment and support
- b. Employee consultation.

## **Management commitment and support**

(15) Managing risks of all types (physical and psychosocial) requires genuine and sufficient commitment and support from senior leaders. Such commitment ensures that risk management systems are allocated the resources needed to be effective, risk-related decisions are appropriately elevated and prioritised by SCU, and there is an ongoing commitment to verifying and monitoring psychosocial risks and their corresponding controls (leading to continuous improvement). Senior leaders must be aware of their duties and obligations personally (e.g., WHS Act 2011 Section 27 – Due diligence) and the general duties that apply to the PCBU (e.g., WHS Act 2011 Section 19 – Primary duty of care).

## **Employee consultation**

(16) Consultation is critical for effective psychosocial risk management as outlined in [WHSMP07: Consultation, Communication, and Participation](#).

# Psychosocial Risk Management

## Step 1: Identify psychosocial hazards

Relevant psychosocial hazards are summarised in Table 1.

Hazard	Description
High and/or low job demands	Sustained or intense high levels of physical, mental, or emotional job demands that are excessive, unreasonable, or chronically exceed workers' capacity or sustained very low levels of mental demands from the job (e.g., monotonous work). A job can involve a combination of low or high physical, mental, and emotional demands. Examples: time pressure, role overload, unachievable deadlines, high vigilance, challenging work hours or shift work, unrealistic expectations to be responsive outside work hours.
Low job control	Workers have little or no control over their work environment, how or when their work is done, or the objectives they work towards. Examples: requiring permission before progressing routine tasks; excessive monitoring of work tasks and/or breaks; unpredictable working hours; little or no involvement or input into decisions that affect workers; insecure or precarious work, or work that involves uncertainty over the length of the job, such as casual, labour hire or rolling fixed-term contract work.
Poor support	Tasks or jobs where workers have inadequate emotional and/or practical support from supervisors and/or coworkers; inadequate training or information to support their work performance; or inadequate tools, equipment, or resources to do the job. Examples: poorly maintained or inadequate access to equipment/tools or supervisory support, lack of functional or adequate IT systems, and limited opportunities to engage with coworkers during the work shift.
Low role clarity	Jobs where there is uncertainty about, or frequent changes to, tasks and work standards; where important task information is not available to workers; or where there are conflicting job roles, responsibilities, or expectations. Examples: a worker being told one task is a priority, but another manager disagrees, a worker being given multiple priority tasks from different managers, a worker being given conflicting information about work standards and performance expectations.
Poor organisational change management	Organisational change management that is poorly planned, communicated, supported, or managed. Examples: not consulting workers on changes in the workplace that affect them (e.g., not communicating with workers about the change or genuinely considering their views) and lack of practical support for workers during the implementation of workplace changes.
Low reward and recognition	Jobs where there is an imbalance between workers' effort and recognition or rewards, both formal and informal. Examples: not being recognised for extra effort or commitment, no reasonable opportunities for career development.
Poor organisational justice	A lack of procedural fairness (fair processes to reach decisions), informational fairness (keeping relevant people informed), or interpersonal fairness (treating people with dignity and respect). Example: inconsistent, unfair, discriminatory, or inequitable decisions and application of policies or procedures.
Poor workplace relationships, including interpersonal conflict	Poor relationships or conflict between workers, managers, supervisors, coworkers, or others with whom workers are required to interact. Frequent or excessive disagreements, disparaging or rude comments, either from one person or multiple people. Examples: Unresolved and excessive conflict regarding work tasks, processes, customers, and interpersonal issues.

Remote or isolated work	<p>Work that is isolated from the assistance of other persons because of location, time, or the nature of the work. This may include work at places where access to resources and communications is complex and travel times are lengthy. Isolated work includes work where few other people are around or workers are required to live away from home for extended periods.</p> <p>Examples: a community nurse conducting visits at night; night shift operators; workers who spend a lot of time traveling (e.g., driving); workers working alone from home or socially isolated away from home over protracted periods.</p>
Poor environmental conditions	<p>Exposure to hazardous work environments creates a stress response.</p> <p>Examples: work environments that involve poor air quality, high or nuisance noise levels, extreme temperatures, or uncontrolled biological hazards (e.g., blood or bodily fluids or infectious pathogens).</p>
Traumatic events	<p>Investigating, witnessing, or being exposed to traumatic events. This may include reading, hearing, or seeing accounts of traumatic events. A person is more likely to experience an event as traumatic when it is unexpected, is perceived as uncontrollable, and where there is a threat to life or safety or is the result of intentional cruelty.</p> <p>Examples: witnessing or investigating fatalities, serious injuries, abuse, neglect, or serious incidents; being exposed to extreme effects of natural disasters or seriously injured people.</p>
Violence and aggression	<p>Any incident where a person is abused, threatened, or assaulted at work or while they are carrying out work. This includes abuse, threats, or assaults by workers, clients, patients, visitors, or others.</p> <p>Examples: Biting, spitting, kicking, throwing objects, using or threatening to use a weapon, verbal abuse and threats, aggressive behavior such as yelling, or physical intimidation.</p>
Bullying	<p>Repeated and unreasonable behavior directed towards a worker or group of workers creates a risk to health and safety. This includes bullying by workers, clients, patients, visitors, or others. Repeated behaviour refers to the persistent nature of the behaviour and can involve a range of behaviours over time. No specific number of incidents is required for the behaviour to be repeated, nor does the same specific behaviour have to be repeated; however, the pattern of behaviour must demonstrate a persistent nature.</p> <p>Unreasonable behaviour means behaviour that a reasonable person, having considered the circumstances, would see as unreasonable, including victimising, humiliating, intimidating, or threatening behaviour.</p> <p>Examples: repeated incidents of practical jokes or initiation, spreading misinformation or malicious rumours, belittling or humiliating comments, and being verbally denigrated or threatened.</p> <p>Note: Reasonable management action taken reasonably is not work-related bullying. In relation to work-related bullying, 'reasonable management action' (e.g., performance management or administrative actions) when carried out lawfully and reasonably, while potentially uncomfortable or distressing to some, is a legitimate way for managers and supervisors to:</p> <ul style="list-style-type: none"> <li>• lead, direct, and control how work is done</li> <li>• give feedback and manage performance, including around inappropriate or harmful workplace behaviours</li> <li>• deal with differences of opinion and disagreements or</li> <li>• recruit, assign, transfer, and or terminate employment.</li> </ul>

Harassment, including sexual harassment	<p>Harassment about personal characteristics such as age, disability, race, sex, relationship status, family responsibilities, sexual orientation, gender identity, or intersex status.</p> <p>Sexual harassment - any unwelcome conduct of a sexual nature that is done either to offend, humiliate, or intimidate another person or where it is reasonable to expect the person to feel that way. It includes uninvited physical intimacy, such as touching sexually, uninvited sexual propositions, and remarks with sexual connotations. This includes sexual harassment by workers, clients, patients, visitors, or others.</p> <p>Examples: telling insulting jokes about particular racial groups; making derogatory comments or taunts about someone's disability; asking intrusive questions about a person's body; staring, leering, or unwelcome touching; sexual or suggestive comments, jokes, or innuendo; unnecessary familiarity, such as deliberately brushing up against a person.</p>
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Reference: Managing the risk of psychosocial hazards at work Code of Practice 2022

## How can psychosocial hazards be identified?

(17) The first step in identifying psychosocial hazards is to review meaningful data and patterns. Examples of the types of data that can be examined to inform the identification of psychosocial hazards include the following:

- a. Surveys
- b. Observations of work and behaviours
- c. Human Resources data such as absenteeism rates
- d. Exit interviews (e.g., the reasons for leaving a job and overall experiences in the team)
- e. Identified information and trends from the employee assistance provider regarding service usage (e.g., presenting issues, demographic characteristics, and frequency of use over time)
- f. WHS incident reports
- g. Existing or historical surveys and other employee consultation sources, especially open-ended comments around engagement and retention
- h. Regulatory standards, guidelines, and codes of practice
- i. Meeting minutes or issue registers from committees
- j. Rostering and workforce planning data
- k. Position descriptions
- l. Existing WHS risk registers.

## Step 2: Assess the risks

(18) To assess the risk of one or more psychosocial hazards, consider the following questions:

- a. How serious are the consequences if an employee is exposed, including severity, frequency, and duration of harm exposure?
- b. What is the combination of reasonably foreseeable consequences and likelihood, and what risk level (before and after controls are in place) applies?

(19) Where possible, consultation with employees will occur as part of the risk assessment process.

## Step 3: Control the risks

(20) SCU will seek to eliminate psychosocial risks where reasonably practicable. Where elimination is not possible, appropriate control measures will be implemented to minimise health and safety risks. Control strategies will focus on

improving the way work is designed and managed. This may include adjustments to workload, clarification of roles and responsibilities, strengthening supervisory support, and addressing workplace interactions that may give rise to risk.

(21) Physical conditions or environmental factors may contribute to psychosocial risk in some circumstances. For example, poor ergonomics, noise, or inadequate lighting may exacerbate feelings of isolation or strain. Physical risk factors will be addressed where this occurs using suitable control measures, including adjustments to the work environment or equipment.

(22) Administrative measures, such as modifying work schedules, introducing clearer procedures, or providing additional training and support, may also form part of the control strategy. These measures should not be relied upon in isolation where more effective or systemic controls are available. Additional oversight or supervision may be required to ensure the controls remain effective over time.

#### **Step 4: Proactively implement, maintain, monitor, and review the effectiveness of controls**

(23) Once controls have been put in place, SCU will ensure they are understood and supported by those responsible for their use. Controls should be checked from time to time to ensure they are still working as intended. Controls will also be reviewed if there are major changes to the work, new risks are identified, or a health and safety incident occurs. If a health and safety representative requests a review, it will be carried out as soon as reasonably practicable. If a control is found not to be effective, it must be adjusted or replaced.

## **Section 3 - Roles & Responsibilities**

Refer to WHSMP13: Responsibility and Accountability Statement

## **Section 4 - Records of Documentation**

(24) All relevant documentation will be recorded and kept per WHS Legislation and other legislative obligations.

## **Section 5 - Revision and approval history**

(25) This procedure will be reviewed as per nominated review dates or because of other events, such as:

- a. Internal and external audit outcomes
- b. Legislative changes
- c. Outcomes from management reviews
- d. Incidents.

## **Section 6 - References**

Work Health and Safety Act (in the applicable jurisdiction that SCU operates)

Work Health and Safety Regulation (in the applicable jurisdiction that SCU operates)

[Australian Standards AS/NZS ISO 45003:2021 - Psychological health and safety at work](#)

## Section 7 - Related Documents

[WHSMP07: Consultation, Communication and Participation](#)

SCU Psychosocial identification and control framework

[WHSMP13: WHS Responsibility and Accountability Statement](#)

## Status and Details

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<b>Responsible Executive</b>	Kim Franks Vice President (People and Culture)
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