



Psychological Injuries in the Healthcare Sector: Survey Use and Challenges

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May 10, 2023

Who is ONA

ONA is a trade union representing more than 68,000 registered nurses and health-care professionals, and more than 18,000 nursing student affiliates, providing care in

- hospitals
- Long-term care facilities
- Public health
- Community
- Industry
- Clinics

1. ONAs history with the COPSQQ study
2. What is the situation today
3. Why we decided to deal with this topic in your annual H&S Caucus
4. 2023 results and how do they compare to the 2012 results
5. Where do we go from here?





ONA and the COPSQQ Survey

2012 H&S Caucus Survey Results

Better than the reference population average in

- Work Organization (Meaning of work, commitment to the workplace)
- Self-rated health

Worse than the reference population average in

- Work demands (work pace, emotional demands)
- Relationship (predictability, recognition, role clarity, quality of leadership, trust of management)
- Job attributes (job satisfaction, work-life balance)
- Symptoms (somatic symptoms, cognitive syndrome)

More than 68% worse than the reference population average in

- Symptoms (burnout, stress, sleep troubles)

**More than 95% worse than the reference population average in
Offensive behaviours**

OFFENSIVE BEHAVIOURS	ONA all	Danish Reference data
undesired sexual attention	15.5%	2.9%
threats of violence	52.7%	7.8%
physical violence	46.1%	3.9%
bullying	61.1%	8.3%



What is the Situation Today

Nurses experiencing more burnout, stress as 3rd wave takes toll



CANADA

'This is not about funding or money': Closing of this Ontario ER is another symptom of crisis in nurse staffing

People in their 20s intubated, whole families ill

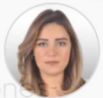
Kimberly

'We are absolutely destroyed': Health workers face burnout, even as COVID levels begin to decline

Ontario

The Minden emergency department of Haliburton Highlands Health Services (HHHS) will be closed on June 1, and emergency services will be consolidated at Haliburton Hospital, 25 minutes away from the Minden location, also operated by the HHHS.

through the summer



By **Irem Koca** Staff Reporter

Sat., April 29, 2023 | 4 min. read

Allison Jones

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[Contact](#)

Published Thursday, July 7, 2022 1:59PM EDT

Canadian Federation of Nurses Unions (CFNU)

- Between May 15 and September 30, 2019, prior to the COVID-19 pandemic, the Canadian Federation of Nurses Unions (CFNU) collected data using a web-based self-report survey of nurses
- 7,358 regulated nurses (RNs, RPNs, LPNs, NPs) from across Canada participated in the survey
- Two reports were published in 2020:
 - Mental Disorder Symptoms Among Nurses in Canada
 - Outlook on Nursing

Mental Disorder Symptoms Among Nurses in Canada

Canadian Federation of Nurses Unions (CFNU)

The study was published in August of 2020 and the results showed that:

- 1 in 3 screened positive for major depressive disorder
- 1 in 4 screened positive for generalized anxiety disorder
- 29.3% screened positive for clinical burnout
- 23% screened positive for posttraumatic stress disorder

Registered Nurses Association of Ontario (RNAO)

- Between May and July 2021, during Ontario's third wave, RNAO distributed a detailed survey about the impact of the pandemic on nurses across the country
- 5,200 nurses from across Canada – primarily RNs from Ontario - completed the survey
- The report was called *Nursing Through Crisis* was published in May 2022

Nursing Through Crisis

Registered Nurses Association of Ontario (RNAO)

- Over 75% of Canadian nurse respondents were classified as burnt out, with higher percentages among hospital nurses and front-line workers compared to other sectors or domains.
- Burnout is highest amongst workers between the ages of 26 & 30
- In Ontario, WSIB claims for mental disorders or syndromes have increased amongst all 3 healthcare related sectors and account for significant amounts of lost-time
- Violence from patients, family members, colleagues and physicians is on the rise and is a contributing factor in the mental health wellbeing of nurses & healthcare professionals

Nursing Shortage

In the January 2022 document by CFNU called Canada's Nursing Shortage at a Glance, it showed that

- In 2018, it was predicted that Canada would have a shortage of 117,600 nurses in by 2030
- In 2021, Statistics Canada estimated over 32,000 regulated nursing positions were vacant with nearly half of vacancies for RNs/RPNs staying open for 90 days or more
- The 2021 RNAO survey revealed that 4.5 per cent of nurses in Ontario planned to retire now or immediately after the pandemic.
- At least 13 per cent of nurses aged 26-35 reported being “very likely to leave the profession” once the pandemic dies down.

But let's be clear ...

the COVID-19 pandemic only exacerbated a nursing shortage that was already in the works for decades.

Myth: The pandemic is responsible for the nursing shortage.

Truth: The nursing shortage pre-dates the pandemic. The additional pressures, workload and stress stemming from the pandemic have exacerbated the situation. Many nurses are leaving the profession, spurred by worsening working conditions and an increased psychological burden.



Topic for 2023 H&S Caucus

Why did we choose psychological health as the topic for our 2023 H&S Caucus?

- Our members have long experienced psychological injury in their workplaces but perhaps it has never been so broadly recognized or its impact been so pronounced than during this pandemic.
- The top three most frequent trauma exposures are physical assault, death of an individual after extraordinary efforts were made to save their life and the death of someone who reminded you of friends or family. Unfortunately, these workplace hazards are frequent in healthcare.
- Members are reporting burn out, nurses are leaving the profession, and Emergency Departments are closing across the province due to a shortage of nurses.

The Canadian Journal of Psychiatry. (2020). The association between the perceived adequacy of workplace infection control procedures and personal protective equipment with mental health symptoms: A cross-sectional survey of Canadian health-care workers during the COVID-19 pandemic. September.

2023 Caucus - Preventing and Responding to Psychological Injuries in the Workplace

To help support our ONA H&S leaders to prevent and/or respond to psychological injuries by helping them to:

- identify psychological injuries
- recognizing the workplace conditions - or injuring mechanisms - that give rise to them
- outlining the tools and organizations that can support them in their prevention efforts
- supporting their members when injury occurs.

Engaging our H&S representatives

1. Psychological Hazards Checklist
2. Sample recommendations
3. Online mental health resources
4. RTW checklist

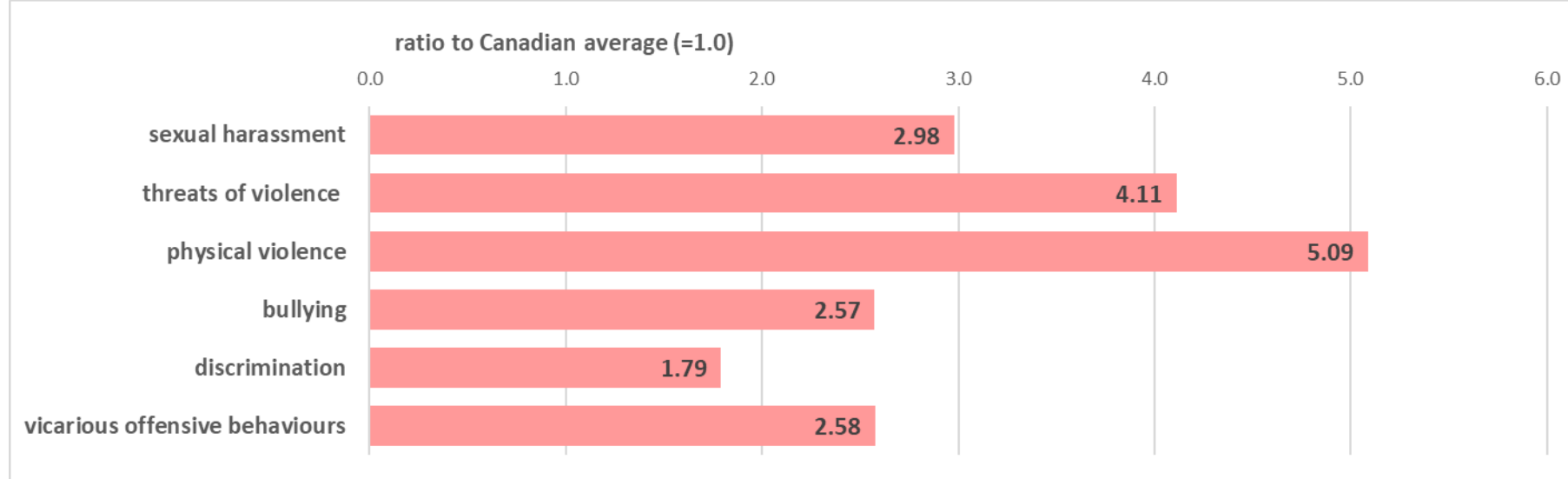


2023 Results and How They Compare to 2012

Comparison with Canadian Reference Population (2023)

	Better	Same	Worse	Much Worse
Demands at Work		Role clarity	Quantitative demands	Work pace Emotional Demands
Work Organization	Meaning of work	Possibilities for development	Influence Commitment to workplace	
Interpersonal Relationships & Leadership		Role clarity Social support from colleagues	Predictability Role Conflicts Social support from supervisor	Rewards/recognition Quality of leadership
Work – Individual Interface	Job security	Job satisfaction		Work-life imbalance
Social Capital				Vertical trust Justice & respect
General Health Symptoms		Self-rated health	Sleep troubles Somatic symptoms Cognitive symptoms All symptoms	BURNOUT

Offensive behaviours



The following table provides the total symptoms scores for those respondents who experience offensive behaviours from a specified source in the past year. These are presented in contrast with the total symptoms scores for those who did NOT experience such offensive behaviours. The higher the number in the cell the higher the symptoms score.

	no experience (past year)	colleagues	physicians	manager/supervis or	sub-ordinates	clients/ residents/ patients	relatives/ acquaintances of those cared for	all sources
sexual harassment	50	50	65	n/a	46	55	59	55
threats of violence	47	47	53	n/a	n/a	55	60	55
physical violence	48	none	n/a	none	none	55	64	55
bullying	46	56	59	59	51	57	63	56
discrimination	49	58	62	57	58	61	61	59
vicarious offensive behaviours	44	57	57	59	56	53	57	54

2012 vs 2023

Comparison with 2012 results:

	EKOS wtd 2023 results	ONA H&S reps 2012	ONA H&S reps 2023	difference
n=	4050	174	354	
quantitative demands	45	50	52	+2.3
work pace	59	75	73	-2.2
emotional demands	43	63	65	+1.8
demands_sum	49	63	63	+0.5
influence	49	36	39	+3.5
possibilities for development	70	63	66	+2.6
meaning of work	70	83	81	-1.8
commitment to the workplace	61	62	56	-6.3
workorg_sum	63	55	51	-4.2
predictability	55	43	43	+0.6
rewards (recognition)	65	47	46	-0.8
role clarity	71	66	67	+1.4
quality of leadership	58	40	44	+4.5
social support from supervisor	69	50	59	+9.2
relationship_sum	63	49	52	+3.0



Comparison with 2012 results:

	EKOS wtd 2023 results	ONA H&S reps 2012	ONA H&S reps 2023	difference
n=	4050	174	354	
job satisfaction	70	72	68	-4.1
work-life conflict	44	55	62	+7.4
trust of mgmt	66	47	50	+2.0
justice & respect	60	42	45	+3.3
workvalues_sum (social capital)	63	45	47	+2.6
self-rated health	60	65	55	-10.2
burnout	51	54	64	+9.5
sleep troubles	44	44	53	+9.0
somatic symptoms	28	29	36	+7.3
cognitive symptoms	36	33	43	+9.6
symp_sum	42	43	52	+8.7
sexual harassment	9.6%	15.1%	28.6%	+13.5%
threats of violence	14.3%	52.7%	58.6%	+5.9%
physical violence	10.1%	46.1%	51.3%	+5.2%
bullying	22.9%	61.1%	59.0%	+2.1%





Where do we go from here?

Challenges and Goals

- In 2012, challenges with being able to communicate with members about conducting a study
- JHSC members using the tools developed to identify and support the need for measures to reduce the risk of psychological
- H&S Team as well as Membership Engagement team able to support those interested in doing a survey within the workplace



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***Thank
you!***



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