



Workplace bullying, sick leave, and the additional harm caused by gaps ‘within and between’, workplace resources.

All workplace resources will now be required to revise their processes, train their staff, and align with the changes to the new Alberta Occupational Health and Safety Act. I invite you to read this article and develop a deeper understanding of an employee diagnosed with a psychological injury due to workplace bullying and requiring a period of sick leave. This is also an invitation to analyse the gaps that exists in between the employee’s workplace resource systems and provide solutions to this problem. We need to collaborate on solutions which will benefit all parties. This document will offer insight to the additional struggles experienced by employees who are either applying for medical leave, denied, appealing, or approved for short term or long-term disability.

First, it is important to understand the OHS Act/Code.

OHS Code - Harassment is considered a hazard.

SEC 27 OHS CODE

Section 390.4 OHS Code - An employer must

Develop a harassment prevention plan, policy and procedures

Sec 391 OHS Code – An employer must

Train employees in the recognition, policies, procedures, and controls of the hazard (harassment)

Sec 3(1) OHS Act

Every employer shall ensure

(c) That none of the employer’s workers are subjected to or participate in harassment or violence at the work site

(f) That health and safety concerns raised... are resolved in a timely manner

4 Every Supervisor Shall:

a) **as far as it is reasonably practicable** for the supervisor to do so,

b) ensure that none of the workers under the supervisor’s supervision are



- subjected to or participate in **harassment or violence at the work site**
- c) **report to the employer a concern about an unsafe or harmful work site**

act that occurs or has occurred or an unsafe or harmful work site condition that exists or has existed,

- d) **cooperate with any person exercising a duty imposed by this Act, the**

regulations and the OHS code, and

- e) **comply with this Act, the regulations and the OHS code.**

Having experienced these gaps as a professional with 22 years of work experience, and I was highly trained to navigate these very systems, I realized that this process was very flawed. In fact, it is delaying recovery time, adding to the injury, and ineffective. We need our medical teams, insurance companies, and unions trained to address psychological injuries caused by workplace bullying so that they manage these complex cases more effectively.

In 2011, I began developing a resource to assist employers, employees, and workplace resources, regarding the impact of workplace psychological injuries. Over the past 9 years as a workplace trainer, speaker, and trauma therapist, I have observed these same gaps in our current workplace resource systems. This needs to be addressed and urgent changes need to be made. These gaps and errors are costing employers, our health system, and taxpayers, millions of dollars each year.

This article is about prevention, early intervention, and resolutions.

Having worked with hundreds of employers, thousands of employees, and numerous medical and insurance teams, I am often wearing different hats to assist each service i.e.: training, assessing, consulting and coaching. In my private practise I offer workers private short-term counselling or longer-term clinical therapy sessions. With my personal experience as a worker targeted by a group of employees, combined with my extensive professional experience as a workplace bullying expert, I can offer you insight and solutions to improve services for employees on sick leave. Especially for those who feel isolated and stressed while recovering from psychological harassment or violence.

With knowledge we do better.

Employee: "Applying for sick leave feels like I am walking a tight rope over a mind field".



Life Before Bullying

Before the abuse begins, targets of bullying report feeling:

- Safe, secure, content, confident, eager to do good work.
- Successful and with no prior concerns on their professional file.
- Financially secure, relying on health benefits, and investing in their futures.
- Goal-oriented and motivated.
- Proud of their hard-earned reputation.
- Enjoyment of their work, relationships, and programs.

Life After Bullying Begins

Out of nowhere the employee is blindsided by unexpected and unfamiliar negative behaviours. These actions are coming from someone they believed to be well respected, skilled, and a successful leader or colleague. In many cases this will be someone they have trusted and respected. Week after week these unexpected shocks continue, and additional negative behaviours begin. The impact of these negative behaviours is often humiliating and degrading. The targeted employee experiences confusion. They also feel threatened by the unexpected. If you can't make sense of what is happening, you will function in a state of disbelief. With that, how can you take steps to resolve it? These employees will need help. This is where the targeted employee's experience with 'loss of psychological safety and security' begins. Thus, the need to ensure that the process to recovery does not contain gaps in the system, which would add to this loss of safety and security.

Workplace bullying is about the abuse of power. People who bullying attempt to take another person's power away from them. As helping professionals, we must find ways to empower employees recovering from bullying in the workplace.

Long Term Impact



When an employee experiences a variety of negative behaviours directed towards them over a period of three months or more, sometimes years, they will begin to experience signs and symptoms of i.e. insomnia, anxiety/nervousness, panic, loss of trust, loss of confidence and self esteem. This is what employees mean when they say they suffer a loss of psychological safety. They begin to become hypervigilant and brace themselves for fear of being blindsided once again. When confused and disoriented by these attacks, bracing for the next insult seems for them to be a rational act of self protection. This is a natural coping mechanism to help people under duress survive. Most people do not realize the impact that hypervigilance has on their nervous system. Over time symptoms will begin i.e.: mind and body fatigue.

Fact

When we feel overwhelmed by long term stressed, our sympathetic nervous system will help us survive by using one or more coping mechanisms: fight, flight or freeze. Teach leaders and staff about the impact of stress so that signs and symptoms of fight, flight, freeze can become recognized indicators. Early interventions can save lives.

Tip: learn to recognize the behaviours that show up with fight, flight freeze, and prevent misinterpretations, false accusations, or judgements. These errors cause more harm.

If psychological hazards i.e. humiliation, embarrassment, degrading behaviours, and the resulting high level of stress continues, many targeted employees eventually become ill. This impacts their ability to focus, concentrate, and function in the workplace. They are now at risk of developing an illness. This state of overwhelmed, fatigue, and stressed also places them and others at risk of making errors and having accidents. We certainly don't want them to carry this added burden. We must take the prevention and early intervention of psychological injuries seriously.

Targeted Employees suffer various symptoms of;

- fatigue, insomnia, feeling drained,
- depression,
- anxiety and panic attacks,
- symptoms similar those of post-traumatic stress disorder (PTSD),



- symptoms similar to grief and loss,
- headaches, body pain,
- insomnia,
- loss of appetite,
- gastrointestinal disorder (IBS, Ulcer, Gerd etc.),
- heart condition,
- frequently ill with colds, flus, etc.

Due to the insidious nature of workplace psychological harassment or bullying, many are fully entrenched in the cycle of abuse, and becoming physically and psychologically unwell, before seeking help from a workplace psychological injury therapist. Please advise your client to seek a professional - trained in workplace psychological injuries. I recommend someone who can coach, guide, teach, offer short term counselling or clinical therapy. One professional rather than several. The professional will also offer the employee relevant education, guidance, resources, advocacy, and much needed safety and support. This type of service helps prevent further psychological harm and expedites recovery.

Bullying and Sick Leave

With medical support in the form of a letter from the family doctor, the process of applying for sick leave begins. Depending on the employer, HR, OHS, Regulatory Body, and Unions involvement, the policies and procedures for applying and decision making, will vary.

1. Employees complete numerous documents. Many questions are of a personal nature.
2. Receive regular phone calls from insurance case managers asking more personal questions.
3. Depending on the insurance company, some will experience home visits from another insurance representative, asking personal questions.
4. Depending on the insurance company, another representative may come to the home to do treatment assessments i.e.: ASEBP use Kinesthetic Practitioners

Employees report that this feels overwhelming, intimidating and confusing. For those who are advised by an insurance case manager that a representative will be coming to their home, many feel this to be intrusive. In fact, this impacts the 'well needed sense of safety' of their home. They feel fearful, powerless, and without a voice. If they say no to this, it could impact their monthly income and health benefits. This is supposed to help them and yet they feel voiceless.



To improve on this process, insurance case managers need training to develop a deeper understanding of the impact of psychological injuries. With this knowledge they can adjust their processes to enhance trust, empower their clients by giving them a voice, and a choice. This experience of support and safety will enhance their recovery significantly.

Employees on sick leave may begin to feel isolated and cut off from their supportive colleagues. Some employees on sick leave have described this process as “living in the unknown” or “a loss of control” over their lives. Offering training to insurance companies, medical teams and unions, with the focus of removing the stigma of sick leave, understanding the psychological injury of workplace bullying, including the resulting shame, will offer more empathy, better treatment planning, and return to work planning. This will also offer employees on sick leave more hope, increased support, build their strengths and motivation, and improve their recovery time.

As an example, case managers need to be mindful about the questions they are asking their clients. Wording and timing mean everything. We need to avoid ill time questions and comments. We need to enhance the case managers communication skills adding emotional intelligence skills, to reduce their client’s anxiety. As a therapist I am constantly supporting my clients through the aftermath of these phone calls i.e.: flood of fears and tears, panic attacks, and relapses. These employees are depressed and anxious due to the injury caused by psychological harassment. We want to prevent them from ruminating about:

Will the insurance company believe me? Support me?
What if they do not? What if they judge me?
Do I appeal? How? This scares me.
Do I apply for unemployment insurance? Welfare?
This is so overwhelming! I can’t focus.
I’m so tired and confused, what if I say something wrong and make a mistake?
What about my job? My home?
How will I pay for my children's school supplies?
What about my spouse’s cancer medications?
The worrying is endless, and the stress is heightened.

This is counterproductive. Case managers need this specialized training.

Employee on sick leave: “It is a whole new stress and often gets in the way of my recovery, this is just wrong! I am on sick! I left my work to heal. “



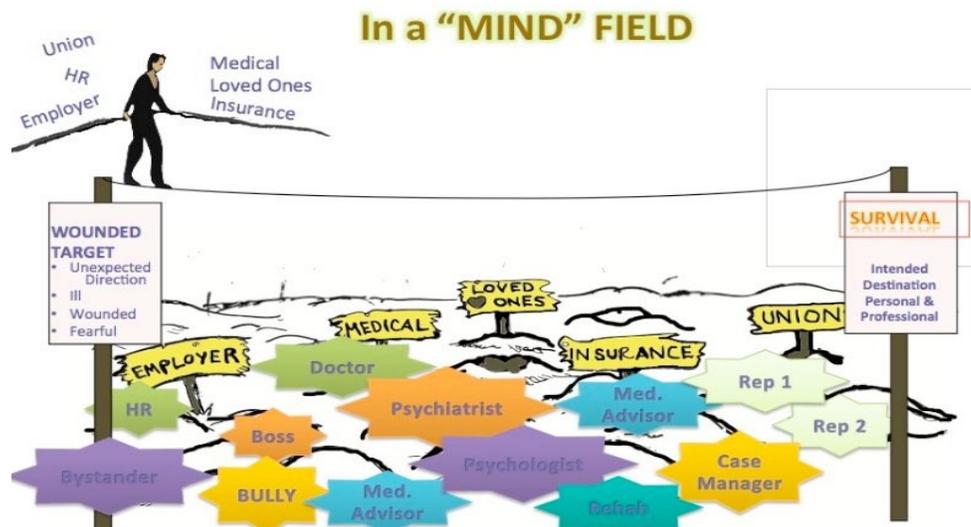
We need to improve our policies, procedures and training, in order to prevent long term sick leave. We need to improve the process and fully support recovery so employees can return to work and be successful, thus, the need to ensure that the process is fluent and continuous without gaps and proceeds smoothly. First, we must be willing to suspend judgement, assumptions, or bias, and open our minds to fully understand the problem.

Use the following model to gain insight into the real experience for employees on sick leave. Imagine feeling depressed, anxious, exhausted, and with little confidence. Now walk this line so you can continue to pay your bills and feed your family. Once you empathize, we can problem solve.

The “Mind Field” Experience

Employees with psychological injuries on sick leave often feel like they are walking a tightrope over a “mind field” when navigating the processes of their health insurance, medical systems, human resources, and unions. They have learned that “one wrong move can negatively impact their sensitive status”. Their very life support is the insurance payments. Gaps in between these processes create extreme and often delayed recovery times.

NAVIGATING THE SYSTEM IS LIKE WALKING A TIGHTROPE.....





Examples

- 1) It is stressful to complete these documents. Their ability to focus, remember, and manage the fatigue, as well as the memory triggers (emotions are draining), and combined fear of being judged, shamed, vulnerable, denied, or not believed.
- 2) When completing numerous documents and/or requirements for sick leave and/or short- or long-term disability, they will speak to many different professionals (strangers). They have learned that one wrong answer could cost them their income, mortgage payment (home), food on the table, much needed medications, basic treatment, and more. With this ongoing worry their stress levels increase as this process unfolds. And it takes time for their cases to be evaluated. Waiting can be an excruciating experience.
- 3) Depending on the employer, there may be more forms from occupational health to complete. If the employee contacts their union, which they should, there will be yet more forms to fill out.
- 4) Each of these systems will have their own set of policies and guidelines for workplace bullying. Each system will have different restrictions about i.e.: what information they can share with each other system. Navigating between them is left to the employee on sick leave. This can lead to a process that is not fluent or continuous and from the employees' point of view, results in gaps in the system that prevent recovery.

Case Example

One employee diagnosed with PTSD related to workplace bullying had no choice but to tell her story to 38 different people (insurance, union, medical, employer) addressing her file within an 18-month period. Her recovery was delayed as she suffered flashbacks, ongoing triggers, heightened stress, fear, loss of trust, and anxiety. This flawed process added further torture for her. We can call this a 'secondary harm' due to the betrayal of internal and external systems.

Bullying in the workplace is a 'Trauma of Betrayal'. Pat Ferris



To prevent any mistakes and delayed payments, the task of navigating these systems is left to the recovering employee. After all, this is their livelihood and represents any hope for recovery. The person on sick leave who is still symptomatic (fatigue, loss of focus, depression, anxiety, adjustment disorder, memory loss and isolation), knows that one error made by a new or covering case manager, new union rep, acting supervisor, can start a domino effect of chaos and delays. To protect their financial stability, the employee will attempt to maintain communications and paper flow between these systems. They will attempt to learn and retain information about each of their policies and guidelines. Anyone suffering a psychological injury from workplace bullying would naturally prefer to 'avoid' this type of stress - at all cost. But this is their livelihood. Is there a choice? They are left to navigate these systems and prevent mistakes. Imagine if employees do not speak English as a first language? What if they are not familiar with these systems and processes? All aforementioned items result in a process that is not fluent or continuous and can be seen as gaps in the system by the employee. How will this process support long-term sustainable recovery and a successful return to work?

We see this added injury due to gaps in systems far too often which negatively impacts the return to work process. Thus, the need to brainstorm and problem solve in order to narrow the gaps in these systems. Our goal must always be to prevent further harm, costs, and to make improvements for the health and welfare of all staff.

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Contact ABRC for Workplace Psychological Safety Resources

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