

# Managing Psychosocial Risk in the Workplace:

Case Study: Commonwealth Bank of Australia

### **Context**

This case study explores the establishment and implementation of a psychosocial risk framework and risk assessment process within Commonwealth Bank Australia (CBA). CBA is a large employer, with more than 40,000 employees across Australia, and with a highly diverse workforce – culturally, geographically, and demographically. CBA employs customer-facing as well as corporate and support staff, and therefore also feature a diverse array of job and role types. Our customer facing staff support people across many different mediums and for varying purposes and life stages; from the individual, to investors, small business and large corporates. Our corporate and support staff cover a range of functions, including technology and products, HR, risk, legal, among others.

Our approach to psychosocial risk assessment therefore aimed to engage a Group-wide approach that enabled risk identification and management across our diverse workforce. The approach needed to be scalable and replicable across our disparate business units, and also needed to provide a framework and infrastructure that the entire Group could utilise.

# Why is it important?

CBA recognised the opportunity and need to better assess and manage psychosocial risk; particularly in recognising that with a workforce almost wholly consistent of knowledge workers, the most likely risk is to our workforce psychological health and safety. With a strong benchmark in (more traditional) workplace health and safety, as well as a Group-wide focus on people risk, the opportunity to integrate a holistic approach to managing psychosocial risk was well-supported. As a large employer, CBA has a strong focus on providing a safe and healthy working environment for our people, and recognises the need for both physical and psychological health and safety.

In the "post"-COVID landscape, the risk of mental ill-health on the rise was also recognised, alongside increasing reports of customer distress and increasing numbers of vulnerable customers. With these key people hazards identified, CBA has undertaken steps to implement targeted prevention and support plans, underpinned by regular and integrated psychosocial risk assessment to ensure the root cause issues and potential controls are appropriately identified.

# How did you plan your assessment?

The implementation of our risk framework and assessment process was integrated within a broader Group-wide risk improvement plan that allowed us to engage directly with our different Business and Support units. This allowed us to conduct education across CBA on psychosocial risk, introduce the psychosocial risk framework, and explain the risk assessment process. This Group-wide risk improvement plan requires an annual review of the risk assessment and control plans, with the first 18 months dedicated to educating the business on the new process and embedding their risk register and accompanying control plans within their specific Business/Support unit. The Business and Support units were given control over when to conduct their first assessment within these 18 months, to ensure they could avoid peak demand periods or avoid other inconvenient times. However, they were also provided guidance on other events or matters that might trigger a re-assessment earlier than the annual anniversary date.

As this was a relatively new process, the psychosocial risk assessment utilised a broad set of psychosocial hazards in order to capture data and inform future assessments. Additionally, due this assessment including our customer-facing employees, hazards that assessed exposure to workplace violence and trauma were specifically included.



# What tools did you use and how?

Our psychosocial risk assessment procedure followed standard practice, involving four key stages: Conduct education and insights session with the Business/ Support unit to provide understanding of health and safety risks with a focus on psychosocial risk; gather data on key risks through a survey assessment and combine with other forms of existing data (including incident reports, culture data, and key metrics); consult with employees; update the risk register informing the key risks and updated control plans for identified risks.

We developed our own survey assessment to assess psychosocial hazards informed by existing resources (including the ISO 45003:2021 Occupational health and safety management — Psychological health and safety at work — Guidelines for managing psychosocial risks, SafeWork NSW Code of Practice: Managing psychosocial hazards at work, Copenhagen Psychosocial Questionnaire). Managed by our Chief Mental Health Officer, the decision to use an in-house tool allowed us to use CBA-specific language easily understood by our workforce, and to assess hazards key to our workforce, as well as to ensure that the data-gathering component of the overall hazard assessment was replicable and integrated into our broader Workplace Health and Safety risk infrastructure. Likewise, embedding psychological and psychosocial hazards within our broader HSW framework allows us to take an integrated and consistent approach to assessing and managing risk across our workforce.

# Initiation and implementation process

Each Business and Support unit undertook a slightly different approach to initiation and engagement in and around the psychosocial risk assessment, depending on the nature of their workforce and job roles. Some Business Units engaged their whole workforce to complete the risk assessment survey, while others leveraged a representative sample of their workforce. Many Business and Support units also utilised a representative sample for the employee consultation component – utilising existing networks, such as our Culture Committees and Health and Safety Representatives. The decision on how to approach the assessment depended on feasibility from the Business Unit, other demands on the workforce, and with guidance by the Chief Mental Health Officer to ensure an appropriate representative sample was selected. Communication about the assessment and its purpose was included in pre-briefings led by our Chief Mental Health Officer and reinforced through leader communications issuing the invitation to complete they survey assessment or consultation sessions.

Results of the risk assessment process are documented within each Business/Support unit risk register and also recorded in our internal risk management program which allows for tracking progress against key controls. As the risk assessment included both qualitative and quantitative data, the latter was captured within the risk register in order to provide a benchmark metric against which future assessments could be compared. Control plans were developed in consultation with Business and Support unit key leads, and practical Action Plans developed which identified key activities for the teams to improve their psychosocial factors at work. These action plans varied enormously across units, depending again on the key hazards identified, the root causal factors, the nature of the roles, and other key implementation strategies that were able to be leveraged.

Each Business and Support Unit is required to reassess risk on an annual basis with control plans reviewed in consultation with our HSW team and Chief Mental Health Officer to ensure they are fit for purpose. As mentioned above, other trigger events are also documented so that the Business and Support units can identify other work-related events that may indicate the need to reassess key people risks and inform improved controls.

Our approach attempts to provide an integrated framework and approach that is embedded across CBA and provides a continuous improvement approach to managing psychosocial hazards across our organisation.





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