



PFI


# Psychological Fitness Index

Case study: The Impact of Psychological Fitness Promotion  
on Safety Outcomes in a Corporate Environment

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## Case study: The Impact of Psychological Fitness Promotion on Safety Outcomes in a Corporate Environment

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### Background on Psychological Fitness

The term psychological fitness was first introduced in South Africa by the Construction Regulations, 2003, 15(12) (a), a section included in the Occupational Health and Safety Act (Act No. 85 of 1993) and referred to work-related psychological wellbeing as “psychological fitness”. By including psychological fitness, the purpose of this act was to regulate a particularly hazardous industry and to create a legal framework to ensure higher levels of health and safety (Deacon & Kew, 2006).

Van der Heijden, Demerouti and Bakker, (2008) as well as van der Linden, Keijsers, Eling and van Schaijk, (2005), provide evidence from the work-home interface that suggests that psychological aspects are equally important to safety although it appears to be less defined due to the difficulty in operationalising and measuring relevant aspects. In the South African safety context, past emphasis has been on the physical wellbeing and safety structures in the workplace. However, if one accepts that competence (knowledge and skill) and physical health and ability are important factors driving safety behaviour and compliance then one should also consider that **psychological factors** contributing to human failure or success are equally important and should also be addressed in order to promote due diligence in terms of Zero Harm.

Brand-Labuschagne (2010) defines psychological fitness as a “state, not a trait, in which employees display high levels of emotional and mental energy (psychological energy) together with high levels of psychological motivation to be able to work safely”. Based on this definition, Afriforte (Pty) Ltd., the commercial arm of the WorkWell Research Unit of North-West University has developed and standardized a scientific measuring instrument to assess psychological fitness: *The Psychological Fitness Index® (PFI®)*. The instrument not only measures the psychological energy (energetic fitness) and psychological desire (motivational fitness) of employees to work and act safely but also measures the work-related wellbeing of employees (e.g. burnout risks, work engagement levels, etc.). Therefore, the PFI® is a screening instrument that screens and monitors the psychological fitness of employees in order to promote safety behaviour, work performance and work-related wellbeing. *Energetic fitness* comprises of work-related exhaustion levels (emotional and cognitive exhaustion), mental distance levels, as well as the incidence of stress-related psychological and physical ill-health symptoms; while *motivational fitness* comprises of work-related enthusiasm, meaning, and significance and organisational commitment levels.

The PFI instrument predicts safety risks, psychological contract risks, turnover risks, impaired presenteeism risks and work-related wellbeing risks at an individual and group level, based on the

psychological fitness levels of employees. A real-time computerised dashboard that displays group results as well as generates real-time individual reports supports the instrument. Professionals are trained and certified to implement and use the PFI© instrument and system.

### Case Study over 12 months

The following is a case study to that indicates the impact of psychological fitness management on safety outcomes in a corporate environment. A longitudinal analysis was performed utilising a common sample of employees over 12 months. The methodology can be depicted as follows:



Context in which the case study was performed

|   |   |
|---|---|
| <b>Industry:</b>                              | Engineering   |
| <b>Instrument</b>                             | The Afriforte Psychological Fitness Index© (PFI©)   |
| <b>Individual feedback and focus</b>          | Industrial Psychologists from <b><i>Business Dynamics Consultants (BDC)</i></b>   |
| <b>Group facilitators:</b>                    |   |
| <b>Dates of assessment</b>                    | 1 <sup>st</sup> assessment: January 2015<br>2 <sup>nd</sup> assessment: January 2016  |
| <b>Common sample over the 12-month period</b> | 146 employees (participated on both assessment events)  |
| <b>Methodology:</b>                           | <ul style="list-style-type: none"> <li>• Employees were assessed in their home languages with the PFI (electronically) during January 2015.</li> <li>• Immediate individual feedback reports that indicate psychological fitness and safety risks were generated by the PFI system.</li> <li>• Employees at immediate and high potential risk were immediately identified and counselled by BDC professionals. Follow-up sessions with affected employees were scheduled.</li> <li>• Immediate group result reports were generated by the PFI system. High-risk groups were identified and focus groups were scheduled by BDC to ascertain the workplace factors that affect safety behaviour. The STOP-START-CONTINUE facilitation method was used.</li> <li>• Group results were presented to management and an intervention action plan was compiled.</li> <li>• Interventions were implemented over 12 months.</li> <li>• Psychological fitness re-assessment of the common sample of employees during January 2016 was implemented.</li> </ul> |

## The Safety and Psychological Fitness Risk Profile January 2015 (1st Assessment)

| SAFETY OUTCOMES FOR THE AREA                      |                      |
|---|----------------------|
|   | January 2015 (n=146) |
| Average LWDC (Jan 2014-Dec 2014)                  | 1.79                 |
| Average RCR (Jan 2014-Dec 2014)                   | 3.09                 |
| PSYCHOLOGICAL FITNESS ASSESSMENT RESULTS          |                      |
|   | January 2015 (n=146) |
| Overall Safety Behaviour risk:                    | 62%                  |
| <i>Immediate psychological fitness risk:</i>      | 32%                  |
| <i>High potential psychological fitness risk:</i> | 30%                  |
| High Energetic Fitness risk:                      | 44%                  |
| High Motivational Fitness risk:                   | 56%                  |
| Serious Turnover risk:                            | 33%                  |
| WORK-RELATED WELLBEING RISKS                      |                      |
|   | January 2015 (n=146) |
| Burnout risk                                      | 52%                  |
| Disengagement risk                                | 42%                  |
| High Work Engagement                              | 21%                  |

LWDC = Lost Work Day Case

RCR = Recordable Case Rate

### Themes from focus groups and individual counselling

#### Work-related themes

- High job demands
- Inadequate physical resources
- Inadequate supervisory support
- Poor communication, poor job information and work planning as well as unclear responsibility frameworks (receive conflicting instructions and experience ambiguous team roles)
- Experiences of dysfunctional behaviour at work (e.g. discrimination, bullying behaviour)
- Job insecurity
- Inadequate growth and development opportunities
- Blame shifting in the company and poor leadership commitment to employees

#### Personal-related themes

- Marital and relationship issues
- Personal financial problems
- Socio-economic issues contributing to fatigue at work
- Health issues

## Interventions

The following interventions were implemented over the 12-month period

### At a SHEQ level

- Fatigue management was intensified across the site.
- SHE worked closely with HR, Talent Management, and Management to add structure to the workplace, i.e. clear reporting lines and clear role and responsibility frameworks to prevent conflicting instructions and demands.
- A drive to optimise physical resources was phased in, utilizing data gathered from an in-house developed physical resource survey.
- Daily toolbox discussions on the importance of safety, work engagement and psychological fitness were implemented. Employees were granted the opportunity to voice issues and these issues were immediately addressed by SHE staff. Trust between employees, management and SHE was developed by this intervention.
- Following further assessment by the EAP and Psychologists as well as individuals at high risk of psychological unfitness were placed on restrictive duty.

### At a workplace level

- The General Manager resigned and a new General Manager took over. The management of people and the workplace was a crucial KPI of the new GM's performance agreement.
- Feedback regarding the psychological fitness results was provided to all managers and supervisors on the site. Managers and supervisors were made aware of the constructs of psychological fitness, the impact on safety behaviour and work performance as well as the effect of workplace management (e.g. unclear structures, conflicting instructions, experiences of dysfunctional behaviour) on the psychological fitness and work-related wellbeing of employees. Supervisors were informed that a re-assessment of psychological fitness and workplace aspects will be performed within 12 months and that the company expects better results from the Site. The company also informed supervisors that people and workplace management would become a KPI of all line functions in future (the latter is scheduled for 2016).
- Reporting lines and roles and responsibilities of employees were clarified across the site.
- The policy pertaining to dysfunctional behaviour in the workplace was emphasised to all employees and a ZERO tolerance approach was confirmed.
- The company is in the process of performing a skills gap analysis in order to compile personal development plans for employees.

### At an employee level

- The Employee Assistance Programme (EAP) implemented Physical Health Risk Assessments and Lifestyle interventions across the Site.
- A professional counsellor via the EAP was made available on site on a fortnightly basis.
- Employees with socio-economic, marital, and personal financial wellbeing problems as well as possible depression risks were referred to the EAP for further assistance and intervention.
- Individuals at high risk were followed up by BDC and the EAP

## Change in Safety and Psychological Fitness Risk Profile January 2016

| SAFETY OUTCOMES FOR THE AREA                      |                         |                         |                                  |
|---|-------------------------|-------------------------|----------------------------------|
|   | January 2015<br>(n=146) | January 2016<br>(n=146) | Change in risk over<br>12 months |
| Average LWDC (Jan 2015-Dec 2015)                  | 1.79                    | 0.72                    | -1.07                            |
| Average RCR (Jan 2015-Dec 2015)                   | 3.09                    | 1.62                    | -1.45                            |
| PSYCHOLOGICAL FITNESS ASSESSMENT RESULTS          |                         |                         |                                  |
|   | January 2015<br>(n=146) | January 2016<br>(n=146) | Change in risk over<br>12 months |
| Overall Safety Behaviour risk:                    | 62%                     | 29%                     | -33%                             |
| <i>Immediate psychological fitness risk:</i>      | 32%                     | 14%                     | -18%                             |
| <i>High potential psychological fitness risk:</i> | 30%                     | 15%                     | -15%                             |
| High Energetic Fitness risk:                      | 44%                     | 21%                     | -23%                             |
| High Motivational Fitness risk:                   | 56%                     | 26%                     | -30%                             |
| Serious Turnover risk:                            | 33%                     | 12%                     | -21%                             |
| WORK-RELATED WELLBEING RISKS                      |                         |                         |                                  |
|   | January 2015<br>(n=146) | January 2016<br>(n=146) | Change in risk over<br>12 months |
| Burnout risk                                      | 52%                     | 21%                     | -31%                             |
| Disengagement Risk                                | 42%                     | 15%                     | -27%                             |
| High Work Engagement<br>(positive dimension)      | 21%                     | 48%                     | +27%                             |

LWDC = Lost Work Day Case

RCR = Recordable Case Rate

### Conclusion

The results of this case study present the importance of psychological fitness assessment and monitoring for organisations. The use of a valid and reliable assessment tool (PFI©) to identify risks and implement interventions is specifically indicated here, as well as the meaningful and positive influencing of safety outcomes.

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