The following material contains reference to difficult topics, including mental health, bullying, harassment and suicide.
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Mental health, suicide and workplace culture issues in policing are difficult subjects without easy answers. These issues are deeply personal and often painful realities for individual Ontario Provincial Police (OPP) members and their families. Organizational responses, albeit well-intentioned, consistently fall short. We acknowledge the significance and complexity of these issues.

As we have conducted our work, we have appreciated the support and cooperation of leadership within the OPP and its member associations. We wish to acknowledge Commissioner Thomas Carrique who gave generously of his time and insight throughout our appointment and who impressed us with his thoughtful dedication to improving the wellness of members.

We are thankful for the trust extended by current and former members of the OPP who shared their personal experiences and insights, through the survey, interviews, roundtables and our confidential email address. We have taken this collected wisdom to heart and are committed to respecting member input in our observations and recommendations.

We acknowledge those members who are no longer with us, and their survivors. We have had the opportunity to hear directly from families of OPP members who died by suicide and we are grateful for their perspectives and contribution to our review.

We know that there is no easy solution to the challenges confronting the OPP with respect to the health and wellness of its members. These challenges are consistent and pervasive across the policing community and other similar environments. It is our hope that the recommendations contained in this Report will reflect member voices, support the efforts of the Solicitor General and provide practical guidance to the Commissioner on his challenging mandate. We continue to be impressed by the commitment, bravery and humanity of the members of the OPP.

Finally, as a Panel, we were supported in our work by the expertise and insight of Dr. Katy Kamkar, Karen Noakes and Meredith Brown. We are appreciative of the support provided by Amanda Miller, Project Manager, and her colleagues at Treasury Board Secretariat, Ministry of the Solicitor General and the Ontario Provincial Police.

December 9, 2019

Douglas Cunningham  Murray Segal  Dave Cooke
Executive Summary

The Panel’s mandate

The Ontario Provincial Police Independent Review Panel ("the Panel") was established by Order in Council 643/2019 and 644/2019 on May 2, 2019, and further to section 3 of the Police Services Act, R.S.O. 1990, chapter P.15, section 3.

The Panel's mandate is to undertake an independent review of the workplace culture of the Ontario Provincial Police (OPP) in light of recent suicide deaths and mental health concerns of OPP members, as well as complaints about the workplace culture by current and former OPP staff.

The Panel is tasked with making recommendations on:

- The root causes and potential remedial actions to address the alarming rate of suicides, bullying and workplace harassment
- Concerns identified by frontline officers and other OPP staff that contribute to a negative workplace culture, and how those concerns have been or are being addressed
- How to improve the way complaints and concerns by frontline officers, civilians and the bargaining agent of the OPP are addressed by all levels of the organization

Overview of the issues

The Ontario Provincial Police (OPP) is at an important juncture with respect to the wellness and resilience of its members. There is an ever-present tension between the operational reality of sustaining the public safety mandate across Ontario in an environment of increasing demands on limited resources and organizational capacity and the physical and psychological health, wellness, resilience and workplace experience of the individuals who serve that mandate.

Wellness issues, including those stemming from dangerous and difficult work, staff shortages and work-related stress, have resulted in unprecedented numbers of officers off-duty or away from the frontlines. Tragically, since January 2012, 17 members are known to have died by suicide, including three this year.

In the workplace, members report concerning incidents related to workplace bullying, harassment, conflict and disharmony. Members report a diminished confidence in the support of management.

It is clear to us that OPP leadership faces an immediate and significant challenge with respect to the workplace culture and health of the organization. In particular, the lack of credible, accessible and meaningful support for members with mental health issues is approaching crisis. Some members’ lack of faith in the processes provided for members who have workplace conflicts is a serious concern. In some respects, there is a disconnect between regional/operational units and some services delivered through General Headquarters (GHQ). Wellness, in the multitude of ways it can be interpreted, is markedly challenged in the organization.

The issues facing the OPP with respect to wellness and workplace culture include:

- Leadership
- Trust and credibility
- Isolation
- The current wellness programs and services
- Identity and stigma
- Family relationships
- Administration and organizational pressures
- Recruitment and promotional policies and practices

However, there is also opportunity in this moment. A new Commissioner, Thomas Carrique, was appointed in April 2019, presenting an opportunity for the OPP to assess its challenges and to strengthen areas of success. Commissioner Carrique and his newly appointed Leadership team have clearly set wellness and resilience as key priorities.
Members of the OPP are justifiably proud of their critical role in Ontario’s communities and their service to the public. They are invested in ensuring that the organization provides a healthy and supportive workplace.

There have been a number of key studies, reports and discussions on these issues during 2019 that provide concrete and meaningful guidance for the path forward. More is known about the science behind the wellness challenges facing police, military and other first responders. Social dialogue on these issues is becoming more prevalent. These are positive signs.

Policing is a difficult job, both for the individual member of a police service, and organizationally. The members and the leadership of the OPP navigate difficult decisions and complex human experiences on a daily basis across the province.

The OPP is a large and multi-faceted organization – one of North America’s largest deployed police services – making administration across the variety of business and geographic lines a major undertaking. The scope and breadth of the OPP is massive and the task of fostering and sustaining a healthy workplace culture must be understood in that context.

Gaining the full trust of the membership and building a healthy and resilient workforce will require a series of concrete and meaningful actions by the Commissioner and his leadership team.

**The Panel’s process**

The Panel’s process has been one of respect, exploration and dialogue. Since commencing its review in May 2019, the Panel has engaged with OPP members representing a cross-section of the organization – senior members, members in specialized units, detachment constables, civilian members working in internal operations, administration and human resources. We have also spoken with leadership of the member associations, and former members and families of members who have died by suicide.

The Panel has been able to meet with Commissioner Carrique on a number of occasions and we have appreciated his wise contributions and clear dedication to addressing mental health and workplace culture issues.

Members of the OPP have welcomed the Panel and been supportive of the Review and its objectives, sharing their own experiences and recommendations for improvement. Our engagement with members was multi-dimensional and included:

- A survey answered by 5,192 current and former OPP members
- Over 250 email submissions
- A series of roundtable discussions across the province
- Individual conversations with current and former members
- Individual conversations with family members of officers who have died by suicide

In addition to the critical input from members and their families, the Panel benefitted from the information and input given to us by a wide array of important individuals, organizations and stakeholders, including the bargaining agents, the OPP leadership team at GHQ and in the regions, the teams that currently provide wellness services to members, the OPP Academy and the leaders of the Mental Health Review and the OPP Suicide Review.

Beyond the OPP, the Panel has had the benefit of input from the Ontario Police College, the Toronto Police Service, the Ontario Ombudsman, the RCMP, a number of chiefs of police of self-administered First Nations police services, municipal police services boards in several communities where the OPP provides service, and a group of health care leaders from Windsor, Ontario.

The Panel has also engaged in extensive review and study of reports including the Chief Coroner’s Expert Panel Report on Police Officer Deaths by Suicide, “Staying Visible, Staying Connected, For Life”, and wellness reports from police services
comparators along with best practices from other police services and the military in Ontario, across Canada, and internationally. As well, we conducted a jurisdictional scan of leading literature regarding police culture, operational stress injury (OSI), post-traumatic stress disorder (PTSD), mental health, and approaches to workplace complaints and conflict resolution.

Key themes

The Panel’s observations and recommendations are intended to provide guidance and support to the Commissioner and his team as he engages in the important work of fostering and sustaining the wellbeing and resilience of OPP members across the province.

Leadership and organizational responsibility for wellness and positive workplace culture is required [Recommendations 1 and 2]

Transformational change requires bold, courageous and visionary leadership. The Commissioner and his leadership team must be at the forefront leading, initiating the conversations, engaging, modelling and confronting throughout this long-term process. The Panel is much encouraged by the clear dedication and expertise of Commissioner Carrique and his leadership team in this regard. He and his leadership team bring a wealth of experience, compassion and understanding to the task.

In addition to the important work already done inside the OPP with the Mental Health Review and the OPP Suicide Review and externally in the policing community, the Commissioner and his team must have direct access to and dialogue with the diverse voices, expertise and lived experience of members, mental health clinicians, family members and other critical stakeholders both at the central level and across the regions.

A holistic approach to wellness – bringing the biological, psychological, social and spiritual elements of health together – must be combined with organizational restructuring to support the Commissioner’s mandate. A dedicated Healthy Workplace Bureau with expertise, regional presence and appropriate resourcing will allow for greater coordination in support services, regional access to programming and ongoing analysis of the challenges related to wellbeing in policing.

Leadership is a critical element in workplace culture [Recommendations 3 and 4]

A healthy and resilient workplace requires effective and engaged leadership, at every level of the organization. Members shared many experiences, positive and negative, of the impact of leaders on their wellbeing and that of their colleagues. In the survey, leadership was cited as a top recommendation for improvement to the workplace culture of the OPP.

The traditional model of police leadership – top down/paramilitary – may require innovation and culture change in order to better respond to the crisis in wellbeing. Leadership must support a climate of wellbeing – a positive team environment where leader role modelling validates early help-seeking behaviour and support becomes a shared function with team members also looking out for one another.

The Panel strongly endorses a focus on leadership that supports a healthy and more resilient workforce, including ongoing development and support for current and future leaders, through training, mentoring and coaching, clear communication and positive role modelling by the leadership team.

The Panel heard repeated, vehement skepticism with respect to the OPP’s promotional process. It was clear to us that this process plays a major role in perpetuating a credibility issue with leadership, a culture of silence and stigma and a reduction in access to wellness services and supports. The Panel heard about common incidents of nepotism and cronyism in management hiring that sustained the ‘old’ boys’ network. The Panel heard about both real and perceived bias in the process.

The Panel strongly endorses efforts to reintroduce transparency and accountability
into the promotions process, including the participation of a neutral member of management in the hiring process, the alignment of the process and the definition of merit with the organizational expectations of leadership and more rigorous use of tools such as the existing talent pools.

Mental health services should be accessible and credible [Recommendations 5-10]

The OPP’s response to members in crisis has a significant impact on the likelihood of improvement. In other words, how the organization responds to individuals – through the credibility and expertise of services and through the support or stigmatization by peers and supervisors – can either help or cause further trauma.

The Panel is encouraged that OPP leadership attention is focused on the urgent need for change in this area both in terms of organizational language and attitudes about mental health and the supports and services offered to members and families dealing with mental health issues.

The Panel encourages the OPP to evaluate its current services and programs, to consider opportunities to develop a common language around mental health, wellness and resilience among members and to immediately provide resources to members and supervisors to assist them in navigating the complex array of options and obligations members face when seeking mental health supports.

The Panel recommends a number of priority actions with respect to mental health services including:

- A proactive approach to mental health literacy
- Family supports including a peer network
- A robust set of retirement supports
- More mental health clinicians available across the province to provide support to members
- Enhanced peer support programs and a wider application of the principles of the Safeguard program
- A pilot project for ‘off-site’ mental health services for first responders
- Partnerships with Indigenous organizations and First Nations police services for culturally relevant supports
- A reorientation of the return to work process that highlights meaningful work, increases collaboration and reduces stigma
- An organizational communication and support strategy with respect to member death by suicide

Positive workplace culture requires trusted oversight and dialogue [Recommendations 11-13]

The Panel heard repeatedly and accepts the views of members that there is a negative workplace culture within the OPP that, in some locations, tolerates bullying and harassment, and that overall the OPP does not have the necessary tools to respond appropriately to conflict.

The Panel has concluded that an approach to this issue that combines dialogue and organizational restructuring is necessary. Ongoing dialogue, discussions using a common and positive language across the organization, the practice of conflict resolution and modelling of constructive approaches at all levels of leadership are necessary to communicate expectations to members.

An organizational restructuring should occur that creates a separate unit for workplace conflict resolution (separate from matters that involve the Professional Standards Bureau) and that this unit should be responsible for a ‘repatriation’ of the Respectful Workplace Policy, bringing it under the umbrella of the OPP and adapting it to better suit the context and desired outcomes.

In support of this revitalized approach to conflict resolution, the Panel is also recommending the short-term appointment of an independent Dispute Resolution Advisor to address current unresolved complaints and support the refinement of conflict resolution inside the OPP.
The administration of the operation and its people should support wellness and positive workplace culture [Recommendations 14 and 15]

There is no shortage of evidence that operational staffing issues have an impact on the wellness of members. Across the province, the Panel heard about staffing shortages, long shifts, challenging shift cycles and pressures related to working overtime. These stressors are taking their toll on members. At the time of this Report, about 875 or 21% of frontline members were off on an approved leave, including sick leave, parental leave and other forms of authorized absence. This is a high cost to taxpayers, to public safety and to the wellness of members.

The Panel encourages the Government and the OPP to accept that budgeting and operational decisions must be made in support of the wellness of members and in recognition that adequate staffing has long-term fiscal and functional benefits.

Staffing decisions must be made to ensure adequate time for rest and recovery between challenging shifts and after critical incidents and with a view to reducing the isolation of members at work.

There are areas of the province and specific detachments and units where the staffing levels are in crisis. The Panel encourages the OPP and the Government to pay specific and immediate attention to staffing in the North, with a view to increasing the number of Northern-based members and the available supports to members in Northern detachments.

Staffing in the OPP does not currently reflect the diverse nature of Ontario’s population in terms of gender, ethnicity or identity. Diversity in staffing and meaningful inclusion inside the organization are critical elements of a healthy workplace. The leadership team is encouraged to lead a collaborative campaign to increase efforts to strengthen diverse groups of members.

Conclusion

Mental health, suicide and workplace culture are difficult topics for discussion. We appreciate the candor and personal effort made by current and former members in sharing their experiences, their wisdom and their hope for the future. We appreciate the expertise of the wide array of individuals and organizations who contributed to our knowledge and the development of this Report.

We acknowledge the loss of those members who have died by suicide and we extend our condolences to their families and colleagues.

While there is significant work ahead, the Panel is encouraged by the open dialogue and acknowledgement of the challenge. We look forward to the increased wellness and resilience of OPP members.
Summary of Recommendations

Recommendation 1: The Commissioner's wellness priority requires expert support and collaboration

a. Constitute a Provincial Wellness Advisory Table chaired by the Commissioner with membership that includes uniform and civilian members, bargaining agents, retirees, families, mental health clinicians and a representative from each Regional Wellness Advisory Table (see 1b) to provide guidance and advice on policies and programming related to mental health.

b. Constitute a Regional Wellness Advisory Table in each region to address mental health and wellness in the region, chaired by the Regional Commander and reporting to the provincial table. Membership at this table should include local/regional representatives of uniform and civilian members, bargaining agents, retirees, families and mental health clinicians.

c. Along with the discussion of these recommendations and those contained in the OPP Suicide Review and the Mental Health Review, the following are priority topics for the Wellness Tables:
   • Reducing stigma surrounding mental health
   • Exploring the role that use of force plays in self-identification as police
   • Developing a successful Return to Work model, including meaningful accommodation
   • Partnering with the Ontario Provincial Police Association (OPPA) on how best to collaboratively deliver 'wrap-around' support services

d. The Panel endorses the concept of the member roundtables conducted as part of the Mental Health Review and urges the Commissioner to continue and repeat the roundtables on a regular basis, perhaps every three years.

e. The Panel encourages the leadership team to build on the recommendations in the Mental Health Review, the OPP Suicide Review and the Chief Coroner’s Expert Panel Report.

f. The Commissioner and the OPP should continue to build dialogue and best practices with other community, Indigenous, provincial, national and global leaders focused on wellness and resilience in policing.

Recommendation 2: Wellness as an organizational priority requires dedicated resources

a. Health and wellness should be viewed as an integrated and holistic portfolio, encompassing the physical, psychological, social and spiritual health of members. The Panel endorses the establishment of a new Healthy Workplace Bureau (HWB), containing the responsibility for the wellness and resilience of the organization and its members. All health and wellness services, chaplaincy, diversity and inclusion initiatives should be included in the mandate of the Healthy Workplace Bureau. While the decision for the reporting relationship of the HWB rests with the Commissioner, it should be separate from Human Resources.

b. The HWB should include credible and expert leadership, headed by a member of the Commissioner’s leadership team and a significant number of uniform and civilian staff with ‘lived experience’ on the frontline of policing, mental health clinicians to provide direct support to members and guidance for programming, sufficient trained staff to support members and managers as they navigate the various
wellness services available to members, and manage important relationships such as the Workplace Safety and Insurance Board (WSIB) and Long-Term Income Protection (LTIP) carriers.

c. The current Wellness Unit should be moved to the HWB and its mandate and resourcing model realigned to respond to the recommendations made in this Report, the OPP Suicide Review and the Mental Health Review, along with other best practices.

d. The HWB must have direct ties into each region through embedded employees located in an HWB Hub in the region to provide support, guidance and early intervention/resolution to members and to managers.

e. The HWB must have an active communication strategy that works closely with the Commissioner’s office and includes information sharing direct to members, ongoing outreach to off-work members and retirees, regular communication with frontline managers and an active family engagement program that is locally implemented.

f. Sufficient resources should be allocated to the HWB to achieve effective central administration and regional/local implementation. The Ministry of the Solicitor General and Treasury Board Secretariat should work directly with the Commissioner to develop a responsive business case with new permanent funding for wellness and resilience.

g. In conjunction with the analysis stemming from the Chief Coroner’s Expert Panel Report and other best practices, the HWB should develop a model of data analytics and meaningful data collection, with both quantitative and qualitative inputs, to support the Commissioner and the HWB in fulfilling their mandates and commitments. An Annual Report on the health and wellness of the organization and its members should be produced and shared across the OPP.

Recommendation 3: Culture change requires prioritization of leadership skills throughout the organization

a. The development of curriculum and culture change activities related to leadership skills should extend beyond the current training and requirements. New approaches that support a change in mindset and behaviour must be introduced.

b. Leadership skills, including ‘people’ skills, empathy, interpersonal skills, conflict resolution, communication, and resiliency should be prioritized as essential skills for promotions at every level.

c. Mentoring and training programs for current, new and future leaders should focus on people including resilience and leadership skills.

d. Leaders at every level should take part in regular and ongoing leadership skills training that is people-centred and includes empathy, interpersonal skills, conflict resolution, decision-making and guiding a team, coaching, resiliency and supporting staff.

e. Leadership training should include specific training on supporting employees with mental health challenges and building and maintaining a psychologically healthy organizational culture, including self-care and support for managers.

f. Management performance plans should include expectations that align with the leadership responsibilities outlined in this Report.
The organizational expectations for all staff with respect to leadership should be modelled and regularly communicated by the Commissioner and his leadership team.

**Recommendation 4: The promotional process should be transparent and support people-focused leadership**

a. To ensure real and perceived fairness, the promotional process should include:
   - participation in promotional decisions by neutral members of management such as those stationed outside the local area;
   - seeking the input of members into key promotional decisions through the use of tools such as an appropriate 360 assessment; and
   - clear and transparent decision-making with feedback for those not chosen.

b. A review of the promotional policies and process should be conducted with insight from members across the province to ensure that the process is aligned with the organizational expectations of leadership and supports choosing individuals who demonstrate leadership capacity.

**Recommendation 5: A holistic approach to mental health programming is required**

a. The approach to mental health literacy and programming should encompass a varied set of options, including in-person dialogues with trained peers and clinicians, online resources and group discussion. These options should be flexible and easily adapted to the various and disparate needs of members across the province. These options should be readily accessible and locally available.

b. As a part of the enhanced focus on mental health and wellness in the HWB, a program review and evaluation of the efficacy of current mental health services should be conducted, with input from the Provincial Wellness Advisory Table. However, this review should not delay or prevent immediate action to enhance the accessibility and quality of mental health supports to members including the recommendations for action in this Report.

c. The approach given to all recruits through the Road to Mental Readiness (R2MR) program and other widely applied programs on mental health literacy should be regularly reinforced and applied throughout the work life of members in order to ensure that a common language for mental health is available and used by all members.

d. Support for members seeking wellness services must include immediate access to an individual who can assist the member in navigating the available options. This support should be made broadly available as quickly as possible in order to assist members while the organization shifts some elements of its service delivery in response to this and other reports.

**Recommendation 6: Regular engagement with members and families is required to support wellness**

a. Mental health literacy training for all members should be ongoing, regular and mandatory. Members should be required to engage in regular ‘resilience recertification’ akin to other operational training, such as use of force. It should include modules on recognizing the signs of strain, talking about mental health, providing support for peers and managing crisis.
b. Regular psychological assessments should be considered for all members, regardless of whether they have experienced a critical incident, as well as members upon their retirement.

c. An outreach program for families should be implemented, in collaboration with the OPPA, that stays connected to families throughout member employment, providing information on the challenges of police work, mental health literacy and opportunities for dialogue, community and peer engagement.

d. A collaboration between OPP, OPPA and OPP Veterans’ Association (OPPVA) should result in robust retirement supports including a pre-retirement psychological assessment, meetings and information about available services, a peer network for retirees and a set of pre-determined check-ins with recently retired members.

e. Continue efforts at the OPP Academy and Ontario Police College to socialize new recruits and their families to the realities of police work and to build a foundation of mental health literacy. Peer support and in-person dialogues, including peer support programs for families, should be incorporated at this stage.

f. Recruitment of new members should include early dialogue on resilience and the realities of police work. Greater information on mental health and the potential to reactivate existing trauma, a psychological interview and a two-person interview panel should be considered as potential enhancements to the recruitment process.

g. Members with lived experience should be encouraged and supported to speak openly with other members about their experiences. This dialogue, while critical as a part of peer support for individuals, should also form part of ongoing mental wellness activities across the OPP.

**Recommendation 7:** The number of clinicians and service models available to provide mental health services to members should be increased and new options explored

a. The Ministry of the Solicitor General and the OPP should allocate funding in the OPP budget for at least one specialized clinician per region, working with the regional HWB, available to support members in the region.

b. Work with the appropriate medical and educational bodies to consider a wider group of professions, including nurses and social workers, able to provide different mental health services to police and other first responders across the province:
   - The HWB should partner with the training bodies in those professions to increase the number of individuals with training in police-specific trauma response;
   - The Ministry of the Solicitor General and the Ministry of Colleges and Universities should explore targeted partnerships with universities and colleges in underserved areas, such as Lakehead and Laurentian in the North, to build regional and local capacity for mental health services;
   - The Ministry of the Solicitor General and the Ministry of Colleges and Universities should explore the potential for mental health professionals to obtain specialized certification in the treatment of police, military and first responders.

c. The Ministry of the Solicitor General and the Ministry of Health should allocate funding for service models that increase the availability of clinicians to members and the public, including embedding clinicians in detachments. These models could include regularized partnerships with service providers.
such as the Canadian Mental Health Association (CMHA) to provide embedded clinician services.

d. The use of digital services including telemedicine or video conferencing for psychological support, should be considered as a means of supplementing in-person services and optimizing access to services and resources.

e. The role of the Employee and Family Assistance Program (EFAP) in the suite of available services should be reviewed in light of the recommendations in this Report, the OPP Suicide Review and the Mental Health Review to ensure that members receive services commensurate to their needs.

**Recommendation 8: Targeted mental health programs should be supported and enhanced**

a. Peer support programs, including Critical Incident Stress Response (CISR), should be evaluated and enhanced so that there is a greater number of trained peer leaders available to members. Peer support should continue to target debriefs and/or immediate support at the time of critical incidents and should be expanded to provide support beyond critical incidents, including following the death of a colleague and when a member is being suspended or investigated.

b. Recognizing that mental health stressors are not limited to certain types of police work or certain kinds of experiences, the principles of the Safeguard program should be taken into account in refocusing and expanding wellness efforts across the OPP.

c. The HWB in partnership with other first responder organizations should explore a pilot project to offer support services for members and families at an ‘off-site’ location.

d. The HWB should explore partnerships with First Nations policing services in Ontario with respect to mental health and member resilience. Partnerships at the program development, design and delivery stages will increase the availability of culturally appropriate mental health and wellness supports for Indigenous members of OPP and First Nations policing services working with the OPP.

**Recommendation 9: Accommodation and Return to Work must be de-stigmatized and meaningful**

a. The HWB should immediately undertake a review and revision of the Return to Work protocol in accordance with best practices and with a clear aim to support the wellness of members. This work should be guided by the discussions of the Provincial Wellness Advisory Table.

b. Clear communications should be prepared and disseminated to all members with respect to the contents of the Return to Work protocol. Managers must be provided with training on the return to work process to help members return to the workplace without fear of stigma, ostracization or reprisal. Managers must clearly communicate the value of the work of accommodated members.

c. Managers and staff must be supported to find meaningful and valued work for members as part of a Return to Work protocol to support mental wellness and to reduce stigma. This must include developing options in collaboration with the impacted member and manager.

d. Regular outreach to members off work should be a mandatory part of the case management approach. Frontline and other operational managers should be provided with training and support to ensure their engagement with members is appropriate, meaningful and supportive.
Recommendation 10: An organization-wide approach to member death by suicide should be developed and communicated

a. Service-wide, regional and local responses to member death by suicide should include clear internal and external communication that supports the reduction of stigma and reinforces the support for members and families.

b. An immediate and long-term support plan for families and colleagues should be easily activated and coordinated to include active, on-site engagement by clinicians and trained peer support as an immediate response, as well as regular dialogue with families and colleagues as a long-term commitment.

c. A collaborative dialogue, including members and families, on how best to recognize and pay tribute to members who die by suicide is an immediate priority.

Recommendation 11: Communication and discussion with respect to positive workplace culture and conflict resolution must occur across the organization

a. Ongoing, regular and mandatory training should be provided to all members with respect to the elements of a positive workplace culture, conflict resolution, responding to bullying and harassment in the workplace, and the impact of bullying and harassment on mental health. This training should be combined with other wellness training and as a part of regular ‘resilience recertification’ through the HWB.

b. Ongoing and regular communications from the Commissioner and others in leadership positions supporting a positive work environment and modelling conflict resolution, should form part of the Commissioner’s wellness communication strategy.

Recommendation 12: The OPP should include a Resolutions Unit focused on workplace conflict resolution

a. A Resolutions Unit should be established with a mandate separate and distinct from the Professional Standards Bureau and outside the Human Resources/Career Development Bureau.

b. The mandate and staffing of the office should include knowledgeable representatives for providing support, confidentiality, and accurate and impartial navigation of workplace issues and resolution options. The Resolutions Unit should have representation in each of the regions.

c. Responsibility for the oversight and administration of the Respectful Workplace Policy should be transferred from the Ontario Public Service (OPS) to the OPP and housed in the Resolutions Unit. While continuing to align with OPS principles, the OPP Respectful Workplace Policy should be remodelled to correspond more directly with the recommendations of this Report, the OPP Suicide Review and the Mental Health Review, the experiences and realities of OPP members, and to enhance the credibility of the process and the positive impact of the outcomes.

Recommendation 13: A new complaints resolution process is required to support workplace culture improvements

a. A Dispute Resolution Advisor, appointed by the Commissioner and the Deputy Solicitor General,
Community Safety, for a five-year duration, should be empowered to:

- Receive and make recommendations to the Commissioner about member complaints that have not been resolved through any other formal mechanism, including current complaints;
- Give advice to the Commissioner with respect to material changes to existing programs/policies or new programs/policies that may impact the wellbeing of members;
- Collect and analyze data related to complaints with a view to identifying long-term solutions for complaint resolution;
- Assist in the development of a framework for effective complaint resolution and provide advice to the leadership team as they address the Respectful Workplace Policy; and
- Provide advice or recommendations to the Commissioner on other matters that may impact the wellbeing of members as requested.

b. The individual shall not be an employee of the government and shall be independent, ethical and credible. Support for the individual should be provided to ensure timely and comprehensive responses.

c. At the end of the five-year term, the Commissioner and the Deputy Solicitor General, Community Safety, will assess the recommendations and progress made by the Dispute Resolution Advisor in enhancing the complaints resolution process and positively impacting workplace culture. They may opt to renew the position or to adopt an alternate model to respond to the needs of the organization.

**Recommendation 14:** The leadership priority on wellness must extend to budgetary and operational staffing decisions

a. The Government, including the Ministry of the Solicitor General and Treasury Board Secretariat should apply a wellness lens to all budget decisions related to operational staffing in the OPP.

b. The OPP should apply a wellness lens to all operational decisions related to staffing across the Province.

c. The wellness lens should include the recognition that adequate staffing has long-term fiscal and functional benefits through the maintenance of a healthy and resilient workforce.

**Recommendation 15:** Staffing and scheduling require a wellness lens and strategic approaches to ensuring the membership reflects and supports the population of Ontario

a. The approach to scheduling should apply a wellness lens to recommendations, including:
   - reducing reliance on overtime,
   - ensuring adequate time in shifts for debriefs (formal and informal) at the end of busy shifts,
   - reducing the isolation of members while on shifts,
   - introducing the potential for time off the day after a critical incident; and
   - introducing added shift flexibility to account for work and personal responsibilities, including court appearances.

b. In addition to the recommendations made in this Report, the OPP Suicide Review and the Mental Health Review with respect to increasing the wellness and resilience of members, the OPP should
continue to work collaboratively with members and bargaining agents to find ways to increase the number of members available for operational positions, with attention to the most critical shortages.

c. An urgent strategic approach to staffing shortages is required to support detachments in the North. This support should be comprised of:
   • targeted spending increases on staffing,
   • an enhanced hiring campaign for potential new recruits in Northern and Indigenous communities, and
   • a strategic approach to deployment that supports mental wellness for members deployed in the North, including increasing access to support services and proactive member health check-ins.

d. In conjunction with the results of the current review of the Inclusion Councils, priority efforts should be directed at ensuring authentic inclusion in the OPP, including communications from all levels of leadership that diversity and inclusion lead to a healthy workplace, and creating empowered communities of members inside the service at a central, regional and local level.

e. A more aggressive mandate to increase the inclusivity of the OPP is required to recruit members that more accurately reflect the diverse makeup of Ontario. Direct outreach to diverse and/or under-represented communities should be part of a larger recruitment campaign.
Introduction

The Ontario Provincial Police (OPP) is at an important juncture with respect to the wellness and resilience of its members. There is an ever-present tension between the operational reality of sustaining the public safety mandate across Ontario in an environment of increasing demands on limited resources and organizational capacity and the physical and psychological health, wellness, resilience and workplace experience of the individuals who serve that mandate.

Wellness issues, including those stemming from dangerous and difficult work, staff shortages and work-related stress, have resulted in unprecedented numbers of officers off-duty or away from the frontlines. Tragically, since January 2012, 17 members are known to have died by suicide, including three this year.

In the workplace, members report concerning incidents related to workplace bullying, harassment, conflict and disharmony. Members report a diminished confidence in the support of management.

It is clear to us that OPP leadership faces an immediate and significant challenge with respect to the workplace culture and health of the organization. In particular, the lack of credible, accessible and meaningful support for members with mental health issues is approaching crisis. Some members’ lack of faith in the processes provided for members who have workplace conflicts is a serious concern. In some respects, there is a disconnect between regional/operational units and some services delivered through General Headquarters (GHQ). Wellness, in the multitude of ways it can be interpreted, is markedly challenged in the organization.

However, there is also opportunity in this moment. A new Commissioner, Thomas Carrique, was appointed in April 2019, presenting an opportunity for the OPP to assess its challenges and to strengthen areas of success. Commissioner Carrique and his newly appointed Leadership team have clearly set wellness and resilience as key priorities.

“Greatest strength: the current openness to accepting that perhaps the current state of affairs isn’t working and that something needs to change.” OPP Member

Members of the OPP are justifiably proud of their critical role in Ontario’s communities and their service to the public. They are invested in ensuring that the organization provides a healthy and supportive workplace.

There have been a number of key studies, reports and discussions on these issues during 2019 that provide concrete and meaningful guidance for the path forward. More is known about the science behind the wellness challenges facing police, military and other first responders. Social dialogue on these issues is becoming more prevalent. These are positive signs.

Gaining the full trust of the membership and building a healthy and resilient workforce will require a series of concrete and meaningful actions by the Commissioner and his leadership team, including:

• Prioritizing wellness and a healthy workplace culture across the leadership of the organization;
• Ensuring that leadership at all levels of the organization is people-centred, empathetic and trained to support the members;
• Refocusing and strengthening mental health supports for members;
• Restructuring the process for managing workplace conflicts; and
• Tackling the challenging organizational pressures that cause stress at the frontline.

While our recommendations are largely focused on action by the government and the leadership of the OPP, the observations and conclusions of this Report apply broadly. The challenges facing the membership of the OPP at this time are
not a failing or a success of any one individual, group or faction. Likewise, the responsibility for improvement, action and success cannot fall to one individual or group. These concerning issues require a collaborative and collective response. We encourage all readers of this Report to consider their own role in growing and improving a culture of wellness and resilience within the OPP. We are also hopeful that the insights and ideas in this Report may be of assistance to other organizations facing similar challenges.
The Panel’s Mandate and Process

The Ontario Provincial Police Independent Review Panel ("the Panel") was established by Orders in Council 643/2019 and 644/2019 on May 2, 2019 and further to section 3 of the Police Services Act, R.S.O. 1990, chapter P.15, section 3.¹

The Panel’s mandate is to undertake an independent review of the workplace culture of the Ontario Provincial Police (OPP) in light of recent suicide deaths and mental health concerns of OPP members, as well as complaints about the workplace culture by current and former OPP staff.

The Panel is tasked with making recommendations on:

• The root causes and potential remedial actions to address the alarming rate of suicides, bullying and workplace harassment

• Concerns identified by frontline officers and other OPP staff that contribute to a negative workplace culture, and how those concerns have been or are being addressed

• How to improve the way complaints and concerns by frontline officers, civilians and the bargaining agent of the OPP are addressed by all levels of the organization

The Panel appreciates that the Government of Ontario, through the Ministry of the Solicitor General, has acknowledged the significance of these issues at the OPP and across policing in Ontario.

Our approach to this mandate has been to a) acknowledge that, while we bring a depth of experience to the table, we are not mental health or policing experts; b) listen to the experiences of individuals across the organization as well as to the guidance of experts; and c) respect that the impact of this Report is in both the clear framing of the urgency of the situation and in making recommendations that are practical and resonate across the organization.

To this end, the Panel’s process has been one of exploration and dialogue. Since commencing its review in May 2019, the Panel has engaged with OPP members representing a cross-section of the organization – senior members, members in specialized units, detachment constables, civilian members working in internal operations, administration and human resources. We have also spoken with leadership of the member associations, and former members and families of members who died by suicide.

The Panel has been able to meet with Commissioner Carrique on a number of occasions and we have appreciated his wise contributions and clear dedication to addressing mental health and workplace culture issues.

Members have welcomed the Panel and been supportive of the Review and its objectives, sharing their own experiences and recommendations for improvement. Our engagement with members was multi-dimensional and included:

• A confidential and anonymous survey from July 2-July 23, 2019 open to all current and retired members of the OPP with 5,192 responses. Of total survey respondents, there were 4,750 current member respondents, representing approximately 52% of the overall OPP membership and 412 retiree respondents. [see Malatest Survey Executive Summary at Appendix C]²

• An email address (inquiries@opp-irp.ca) launched on July 1, 2019 received over 250 substantive emails from OPP members and former members, sharing personal experiences and insights for improvement and a number of submissions from members of the public.

• A dedicated web page (www.ontario.ca/page/independent-review-ontario-provincial-police-workplace-culture) launched on July 1, 2019 which attracted more than 4,800 pageviews.

• A series of roundtables open to members across the five geographic regions, attended by more than 55 uniform and civilian members reflecting a range of positions including frontline constables, sergeants, communications operators, information analysts and administration.
Individual conversations with 18 current and former members to better understand their own personal experiences.

Individual conversations with four family members of OPP members who have died by suicide.

The survey provided options for respondents to answer questions and submit comments. We are grateful for the hundreds of comments we received and we have shared some of these anonymous and de-identified responses in this Report to highlight key themes.

In addition to the critical input from members and their families, the Panel benefitted from the information and input given to us by a wide array of important individuals, organizations and stakeholders, including the bargaining agents. The Panel was impressed with the personal dedication of the President of the Ontario Provincial Police Association (OPPA), who actively shares his own lived experience in support of stigma reduction and encouragement to members. The Panel was also deeply appreciative of the thoughtful contributions from and dialogue with the Commissioned Officers Association (COA) and the Civilian Association of Managers and Specialists (CAMS).

We met with members of the OPP leadership team at GHQ and in the regions, the teams and divisions who currently provide wellness services to members, including pilot projects in detachments, the OPP Academy and Recruitment, and the leaders of the Mental Health Review3 and the OPP Suicide Review4.

Beyond the OPP, the Panel has had the benefit of input from many sources including the Ontario Police College, the Toronto Police Service, the Ontario Ombudsman, the RCMP, a number of chiefs of police of self-administered First Nations police services, municipal police services boards in several communities where the OPP provides service, and a group of health care leaders from Windsor, Ontario.

The Panel has also engaged in extensive review and study of reports including the Chief Coroner’s Expert Panel Report on Police Officer Deaths by Suicide, “Staying Visible, Staying Connected, For Life”,5 and wellness reports from police services comparators along with best practices from other police services and the military in Ontario, across Canada, and internationally. As well, we conducted a jurisdictional scan of leading literature regarding police culture, operational stress injury (OSI), post-traumatic stress disorder (PTSD), mental health, and approaches to workplace complaints and conflict resolution.

For a complete list of the Panel’s activities, see Appendix D. For a list of the material reviewed by the Panel, see Appendix E.

This broad review connects the workplace impacts felt by members, the challenging realities of operating a complex police service and the increasing scientific and societal understanding of trauma, mental health, conflict resolution, and policing.

Significant work has already been done inside the OPP by the teams that authored the recent OPP Suicide Review and the Mental Health Review. The findings contained in these reports, driven by input from members and families, contributed greatly to the Panel’s analysis.

This Report contains the observations, findings and recommendations of the Panel. It is not an assignment of guilt or wrongdoing on the part of any individual or organization. Rather, it is our intention to provide the Government and the Solicitor General, Commissioner Carrique, and the members of the OPP and their families with a perspective on the current state of wellness within the OPP and make practical, achievable and meaningful recommendations for improvement.
OPP Member Engagement with the Panel

July 2-23, 2019

confidential and anonymous survey open to current and former members of OPP

5192 responses 4750 current members (52% of OPP membership) 412 retiree respondents

July 1, 2019

Email address inquiries@opp-irp.ca launched

>250 substantive emails received sharing personal experiences/insights for improvement + submissions from members of the public

Dedicated webpage launched ontario.ca/page/independent-review-ontario-provincial-police-workplace-culture

4800 pageviews

July - August 2019

Roundtables across 5 geographic regions

reflecting a range of positions (frontline constables, sergeants, communication operators, information analyst, administrators)

>55 uniform + civilian attendees

July - October 2019

Individual conversations with 18 current + former members

better understand their own personal experiences

September - October 2019

Individual conversations with 4 family members of OPP members who died by suicide
Workplace Culture and The Ontario Provincial Police

Overview of the Ontario Provincial Police

Policing is a difficult job, both for the individual member of a police service, and organizationally. The members and the leadership of the OPP navigate difficult decisions and complex human experiences on a daily basis across the province.

The OPP is a large and multi-faceted organization – one of North America’s largest deployed police services – making administration across the variety of business and geographic lines a major undertaking. The scope and breadth of the OPP is massive and the task of fostering and sustaining a healthy workplace culture must be understood in that context.

While the numbers alone do not tell the whole story, they illuminate the enormity of the operation:

- More than 5,700 uniformed officers, 2,600 civilian employees and 700 auxiliary officers
- Over 1 million square kilometres of land and water under its jurisdiction
- Frontline policing services to 324 Ontario municipalities
- Patrolling over 127,000 kilometres of provincial roadways
- Responding to over 2 million calls in 2018 within 12 seconds or less, with over 1 million requiring police presence
- Over 525,000 charges laid in 2018

The OPP’s mandate in Ontario is very broad, encompassing:

- patrolling all provincial highways and numerous provincial waterways,
- investigating province-wide and cross-jurisdictional major crimes and major cases,
- providing front-line municipal police services under contract to 324 communities,
- providing air support for search and rescue, offender transport and investigation,
- providing administrative support to several First Nations Policing programs,
- providing specialized response services including for terrorism, organized crime and security,
- and providing provincial offender transport services.

In order to fulfill this mandate, the OPP’s leadership team is made up of the Commissioner, three Deputy Commissioners who oversee Traffic and Operational Support, Investigations and Organized Crime, and Field Operations, as well as a Provincial Commander in charge of Corporate Services. The OPP is a division of the Ministry of the Solicitor General at the provincial government level in Ontario.

The workforce of the OPP is very large. At the time of this Report, it comprises 4,520 constables, 478 frontline managers (sergeants and staff sergeants), 3,553 civilians in non-supervisory roles and 204 members at the Commissioned Officer level and above.

The majority of the OPP’s programs and services that presently respond to mental health, bullying, harassment and workplace culture issues are administered by Corporate Services, through the Career Development Bureau, located in GHQ in Orillia.
Identifying the Challenges

The Issues

Ensuring a resilient workforce able to meet society’s needs and safeguard the health of its members is the goal of every police service. This is a complex undertaking, impacted by evolving scientific and social understanding of health and wellness, budgetary constraints, administrative hurdles, geography, workplace relationships, and human frailty.

There is no police service the Panel has been able to identify that has successfully navigated all these issues with the ability to provide a perfect workplace to its members. Internationally and across Canada, police services are grappling with myriad issues surrounding mental health, workplace conflict and the nature of police work.9

The OPP struggles with these common issues – inadequate provision of support and services to members with mental health concerns, inability to successfully respond to workplace conflict bullying and harassment and, overall, the erosion of confidence in the organization’s capacity to provide a healthy workplace with resilient employees. These issues are multifaceted, without a singular cause or solution. Members experiencing trauma or workplace conflict may have multiple and exacerbating injuries as they work through the system. The organization must manage its workload, managerial needs, geographic diversity and fiscal constraints.

These issues have been raised before. The report by André Marin, the Ontario Ombudsman in 2012, “In the Line of Duty”,10 was an important call to action. While the OPP was responsive to the Ombudsman’s report, the OPP’s activities had limited success. Significant advances in understanding and dialogue with respect to mental health have occurred in the intervening years.

The challenge for this Panel was to identify workplace culture issues facing the OPP with a specific focus on mental health, bullying and harassment. Through our inquiry we have identified a number of key themes that constitute the culture of the OPP.

Leadership: Significant weight has been placed by members on the impact, positive or negative, that leadership can have on the health and resilience of both the organization and its individual members. Members indicated that while they are hopeful the new Commissioner will bring positive change, there is much work to be done to drive a people-focused leadership mentality throughout the organization. Leadership is viewed by members as both organizational – from the Commissioner down – and personal – at the detachment or unit level and among peers. Only 45% of the survey respondents answered that they would feel supported by their supervisor or manager if they raised a mental health concern.11

Trust and Credibility: Trust and credibility are, unsurprisingly, prominent principles in police culture and neither is given lightly. The Panel heard repeatedly that there are deeply ingrained trust and credibility issues between and among members and particularly with respect to management and headquarters. As a result, members are unwilling to appear vulnerable or fully engage the available supports or services.

Isolation: Members identified isolation as a critical challenge to wellness and to feeling supported in the workplace. Isolation occurs in a number of forms for members, including:

- Physical isolation – in a remote region, when working alone or when there are a limited number of other members working nearby.
- Isolation arising out of workplace conflict – when a member does not get along with other members of the unit or the supervisor.
- Isolation arising out of difference – when a member is ‘different’ than the majority of their colleagues due to gender, ethnicity, Indigeneity, or identity.
- Isolation due to stigma – when a member has struggled with mental health or has returned to
work with accommodated duties.

- Self-isolation – when a member isolates themselves for fear of reprisal, stigmatization, bullying or harassment, they may isolate themselves from the workplace, colleagues, supports, family or friends.
- Isolation when out of the workplace – when a member is on leave or retires and finds themselves ‘out of the loop’ and out of contact with colleagues.

**Current Wellness Services and Pilots:** It appears there is a significant gap between members in the field and the internal teams at GHQ with respect to the knowledge, understanding, availability and utility of the wellness services offered to support mental health and workplace culture issues. The services that seem to resonate most deeply with members are those involving direct contact with local and credible supports. These include the Critical Incident Stress Response (CISR) peer support program and pilot projects that bring mental health professionals to the frontline of policing, supporting a better response to mental health-related calls in the community and opening a safer dialogue about personal mental health referrals with officers.

There a number of service options available to members, including those within the OPP, through the Workplace Safety and Insurance Board (WSIB), through the associations that represent OPP members, and through workplace insured benefits. Ensuring that members access the appropriate service for their needs often falls to the member in crisis and their immediate supervisor. The Panel has heard repeatedly that support for members and supervisors in navigating the services and managing the paperwork is insufficient. This often causes confusion, error and member alienation. When members are suffering, these tasks become even more challenging.

**Identity and Stigma:** The Panel has heard extensively from members and former members about the value of a police officer’s identity. There are real and perceived impacts to that identity when one acknowledges a mental health issue or a workplace concern, which might result in the removal of use of force (i.e. access to tools including a firearm), alienation from other members, assignment to less satisfying duties, and the loss of promotional or other job-related opportunities such as access to in-career training.

**Family Relationships:** Members have described how their workplace experiences impact their family and other relationships. 64% of survey respondents indicated that all or most of the time, they feel significant stress as a result of the pressure their work puts on their relationships with family and friends. 12

Families are ill-equipped to support members when they experience workplace trauma and members are often reluctant to engage their families in a dialogue about their mental health or workplace experiences. In some cases, members cannot share details of their work with their family for reasons of confidentiality and public safety. The family relationship further compounds the mental health challenges and the isolation members experience. Conversely, the Panel also heard from some members that the support of their spouse, partner and family was a critical element in resilience and recovery from trauma.

**Administration/Organizational Pressures:** Budget constraints, staffing shortages, recruitment, deployment and retention in remote communities, scheduling and overtime and the promotional process have all been identified as contributors to and compounding factors in workplace culture issues in the OPP. These issues are felt by members and by supervisors alike who struggle with the additional burden these issues introduce into the workplace.

“The stress of the job gets too much sometimes and sometimes you just need a break. It’s hard to get that when you feel you can’t take a break due to lack of members working and then you feel like you are letting your shift down. So you just keep pushing through when truly you need some time to refuel.” OPP Member
The Panel heard that these issues may deter individual members seeking to access health supports. Members may be concerned that their own absence will further compound the pressure felt by their colleagues.

**Recruitment and Promotional Policies:** Member confidence in the integrity and fairness of the recruitment and, in particular, the promotional process appears low. The Panel heard repeatedly that the promotional process, including a lack of transparency and the appearance of conscious and unconscious bias, is perceived as a means of perpetuating and reinforcing workplace culture issues. Members directly raised concerns about cronyism, an ‘old boys’ network, and a limited value placed on merit.

**The Consequences**

The issues facing the OPP and its members have consequences for the health of members and to the functioning of the organization.

At the time of this Report, about 875 or 21% of frontline members were off on some form of approved leave, including parental leave and short- or long-term sick leave. In the majority of cases, these positions are not backfilled, causing increased reliance on overtime and/or reduced availability of frontline officers, increasing the stress experienced by members who are working.

Over half of the survey respondents said they have experienced bullying, harassment, discrimination and/or rejection in the workplace in the past year. Less than 30% of those reported it citing concerns that “nothing would be done”, “fear of reprisal” “impact advancement opportunities”.

Survey respondents reported missing 7.7 days on average due to work stressors, with uniform members reported missing on average 8.5 days, constables with a mean of 10 days.

People who reported a constant experience of harassment or discrimination reported missing over 38 days on average due to stressors.

66% of survey respondents experienced stress related to staff shortages and resource pressures constantly/very often/often, with 47% of constables and members in investigations and organized crime feeling ‘constant’ stress as a result of staff shortages and resource pressures.

Survey respondents who said they would not feel supported by managers for mental health concerns reported missing a mean of **24 days** compared to 5 days for those who would feel supported.

Finally, and most upsetting, there have been **17** known deaths by suicide among current members and retirees since 2012. The impact of these tragedies has a ripple effect, as colleagues and families wrestle with the trauma of losing a loved one. The survey results suggested that over half of the organization experiences emotional impact at the death by suicide of a member.

**Reason for Hope**

In the face of these real issues and their consequences, the Panel feels there is much to be hopeful about.

“The frontline officers are excellent, hard working people that day in and day out work extremely hard to make the lives of the people we serve better. I am proud to work with these people…” OPP Member

Members of the OPP feel evident and justifiable pride in their work and their service to the community. Many members expressed their view of policing as a ‘calling’ rather than a ‘job’ enabling them to balance the stress against the value of the result. There is a strong sense of team/family among colleagues fulfilling this important mandate.

The work of the OPP and its members is highly appreciated by Ontarians. In 2018, 97.5% of respondents to the OPP Provincial Community Satisfaction Survey indicated that they felt “very safe” or “safe” in their community.

There is an increased dialogue inside the policing community and in the general public about mental
health, the impacts of harassment and bullying, and the particular challenges facing police, the military and other first responders. A common language is developing that acknowledges the real impacts of policing on mental health and wellness and there are communities of support for members to join.

“We have a great group of employees who are family. We need everyone to start truly believing in that and looking after one another everyday.” OPP Member

There is also renewed vigour and dedication to improvement at the most senior levels of the OPP. There is a new Commissioner and a leadership team with a demonstrated commitment to bolstering mental health, workplace culture and people-focused programs and leadership.

The OPP Suicide Review and the Mental Health Review are important examples of the increased dialogue and the leadership focus on improvement. The honest discussion at the Roundtables conducted as part of the Mental Health Review and the concrete nature of the recommendations may not have been possible some years ago. We are hopeful that real change will come as a result of these reports.

We are convinced that this is an important moment for the OPP and its members and partners to make meaningful gains in building a healthy and resilient workplace. The findings and recommendations that follow are intended to spur practical and responsive actions and to build on the current positive momentum.

The consequences - numbers

875 (21%) frontline members were off on some form of APPROVED LEAVE including parental leave and short- or long-term sick leave.

over 50% of the survey respondents said they have experienced BULLYING HARASSMENT DISCRIMINATION

17 known deaths by SUICIDE among current members and retirees since 2012

66% of the survey respondents experienced stress related to staff shortages and resource pressures constantly/very often/often
Findings and Recommendations
Section A: Leadership and organizational responsibility for wellness and positive workplace culture is required

Our vision

• Leadership drives organizational change and models desired behaviour
• The diverse perspectives and experiences of members, families and experts contribute to best practices
• The organization is structured to promote a healthy workplace and wellness resources are allocated to serve members where they are
• Member confidence in management’s support is increased

Culture change through leadership

This is a critical moment in the OPP’s workplace culture. There are significant issues that demand immediate attention – and that attention, from the government and the public, is at an all-time high. This is the moment to effect transformational culture change inside the OPP, for the good of its members and the public they serve.

However, police organizational culture is rigid, rank-based and hierarchical. Communications tend to flow as information up and orders down. Police organizations do not change easily or quickly.20

The power of culture can be seen following the 2012 Ombudsman’s Report. While the OPP was diligent in implementing the recommendations laid out in that Report, the impact of those efforts was diminished by the prevalent culture of silence, stigma and lack of trust between the frontline members in the regions and General Headquarters.

Consequently, it comes as no surprise that the Panel heard from members, leaders, experts and partners alike that, until this prevalent culture is meaningfully addressed, no other efforts at wellness will be truly impactful.

Leadership must play the main role in this change. A culture change at the top is necessary to reduce deeply held stereotypes and encourage access to help.21 Leaders model behaviour, communicate expectations and provide reward or consequence for the behaviour of others.22 The roles and responsibilities of leaders across the organization will be addressed in numerous ways throughout this Report.

Modelling change from the top

The first place to focus leadership attention is at the top of the organization. Transformational change requires bold, courageous, visionary leadership. The Commissioner and his leadership team must be at the forefront leading, initiating the conversations, engaging, modelling and confronting throughout this long-term process.

“It comes from the top down and if actions don’t speak as loud as words there is going to be continued issues!” OPP Member

“The only way to change the culture in a local detachment is to have headquarters change their culture.” OPP Member

Key in this success is that the Commissioner and his team acknowledge the problems and make the case for change, use new language and model the behaviour expected of all members, allocate resources in a fashion that can be appreciated and accessed by frontline members, and engage in direct and ongoing dialogue and collaboration with a cross-section of individual members, families, organizations and experts. New language by the leadership may indicate to members that old-school behaviour is no longer the key to success.23

The Panel is much encouraged by the clear dedication and expertise of Commissioner Carrique and the members of his leadership team. It is evident that the Commissioner is committed to the wellness and resilience of members. He and his leadership team bring a wealth of experience, compassion and understanding to the task.
**Supporting the Leadership Team**

In order to enhance the realization of the Commissioner’s vision for a healthy workforce, it is critical to ensure that the leadership team has access to the tools required to bring about culture change. The Mental Health Review and the OPP Suicide Review contain valuable insight into the challenges facing the organization’s culture, especially with respect to the stigma surrounding mental health. The leadership team must also continue to avail themselves of the ongoing work in other police organizations, the military, through the Chief Coroner’s Office, emerging research and beyond the policing community to strengthen their efforts inside the OPP.

One critical tool required to increase the credibility and timeliness of the Commissioner’s efforts is direct access to expert support and the diverse voices of members and families across the province. The Panel recommends a collaborative resource table to generate dialogue and guidance on difficult issues related to wellness and resilience.

In other words, while it is incumbent upon the Commissioner and his leadership team to lead the organization through urgently needed culture change, it is the Panel’s view that the most effective approach is collaborative, engaging and accountable.

**Recommendation 1: The Commissioner’s wellness priority requires expert support and collaboration**

a. Constitute a Provincial Wellness Advisory Table chaired by the Commissioner with membership that includes uniform and civilian members, bargaining agents, retirees, families, mental health clinicians and a representative from each Regional Wellness Advisory Table (see 1b) to provide guidance and advice on policies and programming related to mental health.

b. Constitute a Regional Wellness Advisory Table in each region to address mental health and wellness in the region, chaired by the Regional Commander and reporting to the provincial table. Membership at this table should include local/regional representatives of uniform and civilian members, bargaining agents, retirees, families and mental health clinicians.

c. Along with the discussion of these recommendations and those contained in the OPP Suicide Review and the Mental Health Review, the following are priority topics for the Wellness Tables:

   - Reducing stigma surrounding mental health
   - Exploring the role that use of force plays in self-identification as police
   - Developing a successful Return to Work model, including meaningful accommodation
   - Partnering with the Ontario Provincial Police Association (OPPA) on how best to collaboratively deliver ‘wrap-around’ support services

d. The Panel endorses the concept of the member roundtables conducted as part of the Mental Health Review and urges the Commissioner to continue and repeat the roundtables on a regular basis, perhaps every three years.

e. The Panel encourages the leadership team to build on the recommendations in the Mental Health Review, the OPP Suicide Review and the Chief Coroner’s Expert Panel Report.

f. The Commissioner and the OPP should continue to build dialogue and best practices with other community, Indigenous, provincial, national and global leaders focused on wellness and resilience in policing.

**Incorporating bold change**

Cultural change, particularly in an organization such as the OPP, requires innovative approaches to emphasize new priorities and disrupt conventional thinking. Wellness requires an approach that creates a new and more inclusive, supportive culture.

A priority on wellness requires that the organization is structured to act on the instructions and expectations of the Commissioner and the
leadership team. The current OPP structure supporting wellness does not have the appropriate resources or sufficient relationships, expertise or access to the regions to maintain member credibility and trust.

The Panel’s view is that there are two primary elements to a revitalized approach to the organizational structure supporting wellness: a holistic, integrated definition of wellness and a dedicated, decentralized organizational entity to support service provision.

A holistic approach to wellness

Wellness requires a definition that is more expansive than simply physical or mental health. The York Regional Police Wellness Project is built on the premise that overall well-being is made up of four elements:24

- Biological – physical health, fitness, diet, sleep, medical.
- Psychological – resilience, mood, concentration, alertness.
- Social – family, friends, coworkers, neighbours, community.
- Spiritual – meaning, purpose, “the why”, religion.

“Some members had specifically indicated to others that they felt overwhelmed, they felt ‘full’, and they could not cope with anything additional; these comments sometimes included reference to trauma events and also included the totality of events in their lives (e.g., relationship, organizational concerns, physical and mental health).” OPP Suicide Review, p22

The Panel supports this perspective on wellness as a best practice. Integration of all four aspects of wellness promotes dialogue, reduces the stigma surrounding mental health, is responsive to the intersectionality of life events and health issues for members and respects that members may have needs that involve all four elements.25

A dedicated bureau

The Panel heard repeatedly, across the province, that the current wellness model, despite its origins in the Ombudsman’s Report and its good intentions, is insufficient. The majority of members in our discussions advised that they are either not aware of the services or do not trust the services offered because they are GHQ-centric, not available in the region, limited in scope, not specific to the lived experience of police, not expert, and/or are associated with Human Resources. The Panel heard about a lack of trust and a strong belief that the current model is designed to support the needs of the organization rather than the best interests of the members.

The survey provided a similar picture. Approximately half of the respondents were not aware of many of the available wellness programs, including the Chaplaincy Program, the Trauma Clinician, the Community Referral List, the Peer Assistance and Resource Team (PART) and the Safeguard Program. Other programs were not widely rated as useful, including those to which members are often directed as programs of first resort.26

The Panel has concluded that a significant organizational restructuring is required to align wellness service delivery with the Commissioner’s mandate and member needs. A Bureau dedicated to the holistic and integrated wellness of the organization must be created with permanent funding. While increased or reallocated funding may not be required as a response to all of the wellness and culture issues facing the OPP, there are key areas in which a specific resource allocation can have a meaningful and long-term impact. An organizational priority on wellness is necessary and requires dedicated funding to achieve long-term effectiveness and program and service stability.

It is evident to the Panel that this Bureau must be clearly separated from Human Resources and the other functions of the Career Development Bureau and Corporate Services. The value and benefit in this separation is echoed in other reviews and studies of wellness in policing.27
It is the Panel’s view that reducing stigma and disconnect, while increasing access to support requires a decentralized ‘hub’ model. This model would combine a common strategic approach at GHQ with regional service delivery hubs to allow information and resources to flow more directly to members. Communication on wellness from the leadership at the top can be shared and reinforced by leaders at all levels.

This new model would support a coordinated and centralized approach, reducing the ‘patchwork’ approach to services and strengthening relationships with important external entities such as the WSIB. The Panel acknowledges the gains made by the WSIB through its presumptive recognition of post-traumatic stress disorder (PTSD) and encourages the OPP and the WSIB to continue to find improved ways to support members with workplace physical and/or psychological injuries.

At the same time, work at the regional hubs could focus on access to local and regional expert supports, engagement with health clinicians, supporting member navigation through options, and regular dialogue about health that resonates with members in the region.

The Panel’s recommendation is in alignment with those made in the Mental Health Review, as a best practice responsive to member input.

Collecting, analyzing and sharing data on wellness

The recent Chief Coroner’s Expert Panel Report makes excellent recommendations with respect to the need for sector-wide data collection and analysis. The Panel supports the OPP’s participation in this collaboration and, indeed, a more strategic approach to data collection inside the organization. The Panel notes that this may not mean that more data should be collected. Rather, the Panel is urging a strategic approach to data collection that creates a better picture of the needs of members and the value/impact of services offered.

The Panel urges the OPP to consider the production of an annual ‘Wellness Report’, taking into consideration the Panel’s recommendations, sharing the results of data collection, program evaluation and commitments, as well as information sharing and mental health literacy.

Recommendation 2: Wellness as an organizational priority requires dedicated resources

a. Health and wellness should be viewed as an integrated and holistic portfolio, encompassing the physical, psychological, social and spiritual health of members. The Panel endorses the establishment of a new Healthy Workplace Bureau (HWB), containing the responsibility for the wellness and resilience of the organization and its members. All health and wellness services, chaplaincy, diversity and inclusion initiatives, and should be included in the mandate of the Healthy Workplace Bureau. While the decision for the reporting relationship of the HWB rests with the Commissioner, it should be separate from Human Resources.

b. The HWB should include credible and expert leadership, headed by a member of the Commissioner’s leadership team and a significant number of uniform and civilian staff with ‘lived experience’ on the frontline of policing, mental health clinicians to provide direct support to members and guidance for programming, sufficient trained staff to support members and managers as they navigate the various wellness services available to members, and manage important relationships such as the Workplace Safety and Insurance Board (WSIB) and Long-Term Income Protection (LTIP) carriers.

c. The current Wellness Unit should be moved to the HWB and its mandate and resourcing model realigned to respond to the recommendations made in this Report, the OPP Suicide Review and the Mental Health Review, along with other best practices.
d. The HWB must have direct ties into each region through embedded employees located in an HWB Hub in the region to provide support, guidance and early intervention/resolution to members and to managers.

e. The HWB must have an active communication strategy that works closely with the Commissioner’s office and includes information sharing direct to members, ongoing outreach to off-work members and retirees, regular communication with frontline managers and an active family engagement program that is locally implemented.

f. Sufficient resources should be allocated to the HWB to achieve effective central administration and regional/local implementation. The Ministry of the Solicitor General and Treasury Board Secretariat should work directly with the Commissioner to develop a responsive business case with new permanent funding for wellness and resilience.

g. In conjunction with the analysis stemming from the Chief Coroner’s Expert Panel Report and other best practices, the HWB should develop a model of data analytics and meaningful data collection, with both quantitative and qualitative inputs, to support the Commissioner and the HWB in fulfilling their mandates and commitments. An Annual Report on the health and wellness of the organization and its members should be produced and shared across the OPP.

Section B: Leadership is a critical element in workplace culture

Our vision
- People-focused leadership is a valued, trained and practiced skill across the OPP
- Leaders are identified and supported to sustain a healthy workplace
- Leadership skills are given priority in the promotional process
- Member confidence in the promotional process is increased through the application of transparent best practices

Leadership impacts wellness
As referenced above, a healthy and resilient workplace requires effective and engaged leadership. In this context, ‘leadership’ must refer to every member of management as well as those senior members of the organization who, regardless of their rank, exert influence over the workplace culture and the experience of their peers. The power of a leader to impact the workplace – both at an individual member level and culturally across the workplace – is not always understood by those who hold the power. Coach officers, senior constables and well-respected team members may play an informal but influential role in the culture of the workplace.

The Panel heard consistent calls for a push to ensure that leaders are capable and engaged in supporting the wellness of members. The role of leaders was cited during roundtables, individual interviews and the survey as a reason that members had a positive experience in managing a wellness-related issue. Unfortunately, more often, leadership was cited as a reason that members had a negative experience with wellness, including an increase in the severity of the issue, an inability to return to work successfully, or an escalation of workplace conflict.

In the survey, members were asked to provide suggestions to improve their local bureau/detachment workplace culture as well as the workplace culture within the OPP organization-wide. The top comments for improving the workplace culture related to 1)
more professionalism, accountability, respect, leadership from all and 2) better promotional and hiring processes.\textsuperscript{29}

Members of the OPP, and indeed within police services across Canada and internationally, are anxious for a leadership model that develops and supports a ‘climate for wellbeing’—a positive team environment where leader role modelling validates early help-seeking behaviour and support becomes a shared function with team members also looking out for one another.\textsuperscript{30} In other words, members want to move past a top-down style/traditional paramilitary style of leadership when it comes to wellness and resilience. While this represents a significant shift in policing culture, the Panel is confident that the OPP leadership can incorporate this innovative approach.

### People-focused leadership

The Panel strongly endorses a focus on leadership that is supportive of a healthy and more resilient workforce. The Panel is encouraged that this form of leadership, while more prevalent outside of the policing sector, is already endorsed in other police organizations.

The Victoria Police Mental Health Review contains an important treatment of the concepts of people-focused leadership and the use of this tool in creating a more engaged and healthier workforce. Their review of leadership best practices describes people-focused leadership as qualities and behaviours including:\textsuperscript{31}

- integrity (i.e., values-grounded behaviours and congruence between actions and words);
- role modelling expected behaviours and values;
- empathy;
- effective communication;
- self-awareness;
- demonstrating understanding of the issues employees face;
- respectful interactions e.g., listening well and talking to anyone (regardless of rank or level) in the same way;
- transparent decision-making;
- building clarity and accountability for results and behaviours; and
- proactively initiating supportive conversations with at-risk individuals.

Both the OPP Mental Health Review\textsuperscript{31} and the OPP Suicide Review\textsuperscript{33} make findings and recommendations that support the adoption of people-focused leadership as a means to supporting the mental wellness of members and creating a healthy organizational culture.

**The OPP should continue to strengthen its commitment to identifying, developing and supporting new leaders**

“[Put] leaders in place who believe, develop and promote their people. We need to emphasize the importance of identifying future leaders who clearly understand a culture of trust and transparency as opposed to managers who are more interested in promoting and looking after themselves and feeding a negative workplace culture.” OPP Member

It is critical that current and future leaders receive the training they require to understand and act on the elements of people-centred leadership. It is insufficient to expect that individuals, regardless of their personality, are able to innately develop all of the skills and tools of an effective leader. The Panel found that training for leaders which focuses on people and empathy is lacking. Leadership training should be regular and recurrent, supporting continuous learning and ongoing maintenance of skills.

However, leadership training is only one tool in the larger toolkit that the OPP should be using to develop and sustain people-centred leadership. In addition to training, the OPP should take an active role in identifying and developing future leaders, as well as supporting new leaders through mentoring and coaching programs. Positive role models, regardless of rank, should be engaged to champion the principles of leadership and model expected behaviours. Expected behaviours should
be clearly communicated by the Commissioner and leadership team and should form the basis for performance discussions.

Clear communication and transparency of expectations from leaders creates an opportunity for team members to be aware of management direction and to foster connection and feel valued even when not at work.34

The Panel strongly encourages the adoption of training, communication of expectations, modelling behaviours and performance management for leaders at all levels that incorporates the values of people-focused leadership.

**Recommendation 3: Culture change requires prioritization of leadership skills throughout the organization**

a. The development of curriculum and culture change activities related to leadership skills should extend beyond the current training and requirements. New approaches that support a change in mindset and behaviour must be introduced.

b. Leadership skills, including ‘people’ skills, empathy, interpersonal skills, conflict resolution, communication, and resiliency should be prioritized as essential skills for promotions at every level.

c. Mentoring and training programs for current, new and future leaders should focus on people including resilience and leadership skills.

d. Leaders at every level should take part in regular and ongoing leadership skills training that is people-centred and includes empathy, interpersonal skills, conflict resolution, decision-making and guiding a team, coaching, resiliency and supporting staff.

e. Leadership training should include specific training on supporting employees with mental health challenges and building and maintaining a psychologically healthy organizational culture, including self-care and support for managers.

f. Management performance plans should include expectations that align with the leadership responsibilities outlined in this Report.

g. The organizational expectations for all staff with respect to leadership should be modelled and regularly communicated by the Commissioner and his leadership team.

The promotional process does not have member confidence

The Panel heard repeated, vehement skepticism with respect to the OPP’s promotional process. It was clear to us that this process plays a major role in perpetuating a credibility issue with leadership, a culture of silence and stigma, and a reduction in access of wellness services and supports.

“Nepotism in promotion has caused a huge credibility and experience gap leading to ineffective supervision, poor decision making.” OPP Member

“I would hope the OPP would identify leaders within our organization and attempt to put them into leadership positions. The current system of promotion has facilitated the situation the OPP is in.” OPP Member

Many good leaders have been promoted in the OPP and are active and effective supporters of their staff. However, the process is highly flawed and understandably suspect. These issues have very real consequences for the wellness of members and for the resilience of the workforce.

Promotional processes that support strong leadership skills and provide supervisors with the tools and strategies to support their employees, as well as identify and address the causes of organizational dissatisfaction can help to improve the employees’ chances of recovery and return to work.35

The promotional process must be credible and trusted, and a response should be an immediate priority for the OPP.
The solution is readily available

While the Panel is concerned about the failings of the promotional process, it is equally confident that the course can be reversed. There is no shortage of literature, study and best practices on transparent, accountable and merit-based selection processes, including many elements of the OPP’s current policy.36 The requirements of a proper promotional process are obvious and the Panel encourages the OPP to focus on increased accountability for decision-making, strengthening the merit-based nature of the process and prioritizing leadership qualities as desirable skills. The principles are sound but the process needs oversight and accountability.

It is evident to the Panel that the current process is susceptible to cronyism and nepotism in hiring selection. Increased accountability for decision-making based on merit could include the participation of a ‘neutral’ member of management in the hiring process, seeking some input from the candidate’s colleagues and supervisors, and the more rigorous use of tools such as existing talent pools. The definition of merit should be clarified to align with the organizational expectations of leadership. Leadership skills should be valued at least as much as demonstration of competency at policing and length of time in the organization.

“Recommendation 19: Review the OPP promotional process to ensure that it is transparent, equitable and fair for all members. Transparent, equitable and fair processes support morale and decrease mistrust in leadership. Assess methods used to evaluate and determine leadership suitability.” OPP Suicide Review, p50

The Panel also urges a review of the criteria for promotion, including the questions asked of prospective candidates. These criteria and questions should be aligned with the organization’s values on wellness and designed to understand the candidate’s suitability as a people-focused leader. For example, the Panel understands that there is currently a promotional question that asks when and how the candidate has held someone ‘accountable’ for their actions. The Panel is advised by members and accepts that this question is not commonly interpreted to support people-focused leadership and has a negative effect on candidates’ behaviour with other members pending a competition.

Both the Mental Health Review37 and the OPP Suicide Review38 provide excellent guidance for ensuring that the promotional process supports the wellness of members and the resilience of the organization. The Panel views the promotional process as a key element in ensuring the development and sustainability of a resilient organization in which members can manage wellness and conflict issues.

**Recommendation 4: The promotional process should be transparent and support people-focused leadership**

a. To ensure real and perceived fairness, the promotional process should include:
   - participation in promotional decisions by neutral members of management such as those stationed outside the local area;
   - seeking the input of members into key promotional decisions through the use of tools such as an appropriate 360 assessment; and
   - clear and transparent decision-making with feedback for those not chosen.

b. A review of the promotional policies and process should be conducted with insight from members across the province to ensure that the process is aligned with the organizational expectations of leadership and supports choosing individuals who demonstrate leadership capacity.
Section C: Mental Health Services should be accessible and credible

Our vision

- Mental health literacy and dialogue are increased
- The stigma associated with mental health is reduced
- The availability and ease of access of credible, meaningful and responsive services to support mental wellness is increased

A complex problem requires a holistic approach

Mental health is a difficult topic for the general public, riddled with stigma, lack of understanding and opaque treatment options. This difficulty is amplified in policing, where the workplace experiences can be more intense and the workplace structure is often not well designed for response.

Mental health is difficult to understand – it does not necessarily have a clear cause and effect pattern, like a broken leg. It a complex causal web of personal attributes and life experiences and it looks different in every individual. As a society, we are only part way towards understanding mental health. As a result, we do not always have useful language or attitudes towards mental health.

“I get sick of receiving pamphlets every time there is an incident, it is the same old pamphlet every time and is like lip service, handing it out to simply say we offered.” OPP Member

Likewise, as a society, our services for people with mental health issues are complex, inadequate and patchwork. The OPP mirrors society in this regard – it does not have a perfect set of responses and supports for its members with mental health issues.

It is clear from both our discussions with OPP members and from the literature in this area, that the organization’s response to members in crisis has a significant impact on the likelihood of improvement. In other words, how the organization responds to individuals – through the credibility and expertise of services and through the support or stigmatization by peers – can either help or cause further trauma.39

Studies have shown that the costs associated with mental health disabilities are higher than those of physical disabilities and seven times more likely to reoccur. The reasons given for these costs include:

- the chronicity of mental illnesses;
- the high rate of relapse;
- greater focus on symptoms rather than level of functioning;
- difficulties with work accommodations;
- cognitive difficulties impacting functioning and return to work initiatives;
- stigma;
- difficulties accessing evidence-based treatment;
- delays in receiving treatment; and
- limited support upon return to work.40

The Panel is encouraged that leadership attention is focused on the urgent need for change in this area both in terms of organizational language and attitudes about mental health and the supports and services offered to members and families dealing with mental health issues.

Organizational awareness, support and service offerings must all be priorities and must be provided to members as part of a holistic approach to mental health. It is incumbent on all leaders and members to increase their own mental health literacy and to support their colleagues.

Evaluating services

The Panel was advised that evidence-based program review and evaluation of the mental health programs and services provided by the OPP has not been conducted. It is our view that this should commence as soon as possible, as a part of the mandate of the HWB.
We note that sometimes organizations use the process of program review as a reason to delay change. In this instance we encourage the OPP to resist this tendency and to make the immediate changes called for in this Report, the Mental Health Review, the OPP Suicide Report and the Chief Coroner’s Expert Panel Review, while the overarching review is ongoing.

Developing a common language

As discussed, there is a need for increased dialogue about mental health, to reduce stigma and encourage members to seek help. A dialogue requires a common language among participants in order to be successful. Indeed, a common language on mental health would be useful to the implementation of many of the strategies in this Report, including leadership, behaviour modelling and stigma reduction.

The Panel observed that the Ontario Police College training for all police recruits across Ontario relies on the common language developed through the Road to Mental Readiness program (R2MR). This program, originally designed by the federal Department of National Defence, is used by the Canadian military, a frequent source of new recruits for the OPP. R2MR has been adapted by the Mental Health Commission of Canada into training programs for police employees and leadership, to help reduce stigma and increase resiliency.

While R2MR is part of the service offerings in the current Wellness Unit, it does not appear to have prominence as a driver of common language among members. Many members expressed that they are seldom exposed to the R2MR language on the job and that R2MR in-service training does not effectively assist them in continuing the training they received at Ontario Police College and OPP Academy, and effectively integrating the practice into their working lives.

The Panel encourages the HWB, in conjunction with the Provincial and Regional Wellness Tables, to explore the value of a common language in mental health discussions and to consider the tools already given to recruits as a valuable starting point.

Navigating the options

The Panel observed the complex and confusing maze of options and obligations that members face when seeking mental health supports. Members repeatedly described the maze as a barrier to accessing services. This is exacerbated when members are in a mental health crisis or are off work and isolated from supports. This has a chilling effect on members coming forward to seek help or accessing adequate supports.

Supervisors and managers also expressed understandable frustration with the complex and bureaucratic processes. They feel unable to make useful recommendations to their members and express unhappiness that their interactions with members off work are limited to discussions about paperwork, rather than genuine and humane support.

The need for navigation to help members and supervisors access support and increase the credibility of services is already recognized. The Panel is encouraged by the Government and the OPPA’s efforts to provide ‘wrap-around’ services to members, including navigation. When it is in place, it will be a valuable service.

It is the Panel’s view that the OPP, through the HWB, must provide its own navigation services to members as part of its responsibilities for wellness. This support should encompass all the options that are available to all members, including those under the existing insured benefits plans, the above-mentioned forthcoming enhanced services and many others. All members and managers need a ‘one-door’ approach to health services to help them understand the options and navigate the complexity. It is critical that the HWB provide more navigational resources.

At the appropriate time, the OPP and the OPPA will need to come together to ensure that their respective navigational services are
complementary and provide the best possible support for members. Given the positive intentions of both parties and the nature of the current dialogue, the Panel has confidence in the outcome of these efforts.

Given the current flux in service delivery as a result of this Report and other efforts by the OPP, a navigation service should be an immediate priority.

**Recommendation 5: A holistic approach to mental health programming is required**

a. The approach to mental health literacy and programming should encompass a varied set of options, including in-person dialogues with trained peers and clinicians, online resources and group discussion. These options should be flexible and easily adapted to the various and disparate needs of members across the province. These options should be readily accessible and locally available.

b. As a part of the enhanced focus on mental health and wellness in the HWB, a program review and evaluation of the efficacy of current mental health services should be conducted, with input from the Provincial Wellness Advisory Table. However, this review should not delay or prevent immediate action to enhance the accessibility and quality of mental health supports to members including the recommendations for action in this Report.

c. The approach given to all recruits through the Road to Mental Readiness (R2MR) program and other widely applied programs on mental health literacy should be regularly reinforced and applied throughout the work life of members in order to ensure that a common language for mental health is available and used by all members.

d. Support for members seeking wellness services must include immediate access to an individual who can assist the member in navigating the available options. This support should be made broadly available as quickly as possible in order to assist members while the organization shifts some elements of its service delivery in response to this and other reports.

**Mental health literacy and check-ups**

Much of the focus of mental health is responsive, providing supports and services to members in crisis. However, a proactive and preventative approach to mental health is recommended. Members should be encouraged to treat their mental health the way they would treat their physical and dental health – with knowledge, regular and proactive care, and check-ups and discussion with professionals.

A critical element in prevention is literacy. Significant work has been done in the general population to ensure that people have a high degree of literacy about, for example, the prevention, signs, symptoms and treatment of heart disease. In policing, there is regular and repeated training on aspects of the job for which literacy and capacity is required, such as the use of force.

> “Ultimately, we need to erase the stigma of asking for help, which is never a sign of weakness. In fact, it is a sign of great strength. And, more importantly: It’s human.” NYPD Commissioner James P. O’Neill, PERF Report, p10

It is the Panel’s view that the OPP must place a premium on mental health literacy – wellness and resilience – for its members. The Panel recommends that members undergo regular, recurring and mandatory ‘in-service’ training on mental health with a recertification component, akin to use of force recertification. The Panel urges the OPP to ensure that this training is active and engaging – prioritizing in-person delivery methods and not simply online training or distance learning.

As an additional step in mental health proactivity, the Panel urges the OPP and the Provincial and Regional Wellness tables to introduce regular psychological check-ups for all members. The Panel would also urge members to consider a psychological check-up upon retirement.
In making this recommendation, the Panel considered other potential options, including recommending mandatory mental health assessments, a recommendation made in some other police services and favoured by some members in our group discussions. While this approach has some merit, the Panel’s view is that, at this time, the environment is not conducive to this recommendation, including that it is costly, there is a lack of trained clinicians and the exact value of the approach is debated. On the other hand, the Panel considered the approach taken in the Safeguard program, that targets particular high-stress positions. However, the Panel felt that this approach does not respond to the reality that no work in the OPP is immune from the potential psychological impacts, including traffic accidents, forensics and dispatch.

In urging a routine of regular psychological check-ups, the Panel is recommending that the OPP create an atmosphere in which members are comfortable with self-identification, managers and supervisors are trained to observe and recommend, and there are more services and opportunities such as embedded clinicians. The Panel hopes that the OPP will build on the Safeguard principles so that there is more acceptance of mandatory debriefs after critical incidents and expand its efforts so that all members seek regular psychological check-ups.

Support for families
The valuable role in wellness that families play has been emphasized by members and experts. In order to foster and maintain that role, and to support the collective wellness of families, an increased focus on supports for families is required. Family support should begin at the time of recruitment and be ongoing throughout the employment and retirement of members.

Mental health literacy is as critical for families as it is for members. The OPP, through the Wellness Tables, could explore community partnership options to provide this service to families of first responders and ensure that more online and other resources are readily available to families.

The Panel urges the OPP, in partnership with the OPPA and the OPP Veterans’ Association (OPPVA) to develop a family peer support network. The Panel is encouraged by stories of impacted employees and their families having opportunities to speak in public forums and to share their experiences. This concept should be part of the discussions at the Provincial and Regional Wellness tables.

Support for retirees
Retirement from policing presents a new set of challenges for members. Mental health issues do not simply disappear once a member retires and may indeed emerge for the first time or be exacerbated by the feelings of loss of identity and isolation.

In the survey, retired respondents indicated that they feel more isolated and unsupported than current members. They also indicated that in their last year of work they missed more work as a result of work stressors – an average of 16.4 days compared to the average of 7.7 for current members.

Sadly, of the 17 members that have died by suicide since 2012, four of them were retirees.

It is the Panel’s view that the OPP should partner with the OPPA and the OPPVA to develop a robust set of retirement supports that includes information, consultation, peer support and active engagement with retirees in their first year of retirement. The Panel believes that there is a wealth of experience and expertise among retired members that could be of value in the development and implementation of this program.

Building awareness and resilience from the start
Both the Ontario Police College and the OPP Academy and Recruitment work with new recruits to socialize them to the realities of policing and to build their resilience. The Panel heard from a number of sources that an effort to assess and socialize potential recruits at an earlier stage would be beneficial.
Dialogue with and more rigorous assessment of candidates as a part of the selection process, including discussion about trauma and resilience, should be considered. The Panel supports the recommendation of the Mental Health Review that the selection process have a two-person panel to better gauge a candidate’s psychological suitability for the work.51

The Panel also encourages the OPP to explore the early career wellness programs at Toronto Police Service and York Regional Police, both of which introduce psychological assessment and follow up at the time of recruitment and throughout the first year.

**Storytelling has value**

A critical aspect of stigma reduction and the creation of credibility and open dialogue is storytelling by members with lived experience.52 It is important for members to hear about the experiences of their colleagues as a means of building empathy and compassion, combatting stereotypes and strengthening their own resilience.

The Panel urges the OPP to incorporate storytelling across all aspects of its mental health engagement strategy.

**Recommendation 6: Regular engagement with members and families is required to support wellness**

a. Mental health literacy training for all members should be ongoing, regular and mandatory. Members should be required to engage in regular ‘resilience recertification’ akin to other operational training, such as use of force. It should include modules on recognizing the signs of strain, talking about mental health, providing support for peers and managing crisis.

b. Regular psychological assessments should be considered for all members, regardless of whether they have experienced a critical incident, as well as members upon their retirement.

c. An outreach program for families should be implemented, in collaboration with the OPPA, that stays connected to families throughout member employment, providing information on the challenges of police work, mental health literacy and opportunities for dialogue, community and peer engagement.

d. A collaboration between the OPP, OPPA and OPP Veterans’ Association (OPPVA) should result in robust retirement supports including a pre-retirement psychological assessment, meetings and information about available services, a peer network for retirees and a set of pre-determined check-ins with recently retired members.

e. Continue efforts at the OPP Academy and Ontario Police College to socialize new recruits and their families to the realities of police work and to build a foundation of mental health literacy. Peer support and in-person dialogues, including peer support programs for families, should be incorporated at this stage.

f. Recruitment of new members should include early dialogue on resilience and the realities of police work. Greater information on mental health and the potential to reactivate existing trauma, a psychological interview and a two-person interview panel should be considered as potential enhancements to the recruitment process.

g. Members with lived experience should be encouraged and supported to speak openly with other members about their experiences. This dialogue, while critical as a part of peer support for individuals, should also form part of ongoing mental wellness activities across the OPP.
There are insufficient mental health professionals available to support members

There is currently one staff psychologist working within the OPP. In an organization that is grappling with a mental health crisis across thousands of employees and the geography of Ontario, that is patently insufficient.

The Panel recognizes the complexity associated with increasing the number of on-staff mental health professionals, including the availability/interest of experts, attraction and retention challenges that vary by geography, the cost associated with employment and, even with an expanded number, the difficulty of serving such a vast area.

“I think that the OPP finally focusing on the importance of Mental Health is a very positive thing. I hope that they continue to build on strategies that encourage people to come forward and begin to employ psychiatrists, psychologists, social workers, etc who specialize in mental health. Although I do think it’s great that our employees be educated, it’s going to be hugely beneficial to have trained professionals to go to if needed.” OPP Member

Expanding the options

These hurdles are not insurmountable and should be dealt with in a creative and proactive manner. The Panel urges the Ministry of the Solicitor General and the OPP to immediately allocate funding for at least one specialized clinician in each region. The role of this individual should be to provide support for members in the region through the HWB and to develop additional regional and local support networks that expand the availability of quality services for members, expanding on the current community referral lists.

There is a paucity of mental health clinicians across the province with specialized skills able to provide services to police, military and first responders. The Panel encourages the OPP and the Government to explore new educational opportunities and partnerships to expand the pool of service providers.

This exploration should also include partnerships with regional and local mental health providers and organizations. In this regard, the Panel has been encouraged by pilots in some municipal police services and OPP detachments partnering mental health clinicians with frontline officers to respond to mental health related service calls in the community. These partnerships have demonstrated a strong secondary benefit of increasing dialogue and referral opportunities for members experiencing mental health issues.

As a means of increasing access to timely and credible mental health supports across the province, the OPP should explore opportunities to provide care through technology, including videoconferencing meetings between members and clinicians. While technology is not a perfect substitute for in-person meetings, it is far preferable to more limited or no access for members. Options could combine in-person and remote access meetings.

The role of EFAP in providing access to mental health clinicians

The OPP, along with the rest of the public service, relies heavily on the Employee and Family Assistance Program (EFAP), an external service that offers timely but limited access to mental health professionals and other expert supports, usually delivered over the telephone. Members consistently reported a lack of satisfaction with the nature of the service, citing service providers who did not appear to understand the particular challenges of policing or offered suggestions that did not engender credibility. As well, the service has a very limited offering, running out after as few as three sessions.

According to the survey responses, EFAP was the service that most respondents used (at 38% of current member respondents) but was also the service that most users found unhelpful (at 65%).

The Panel raises these concerns about the EFAP not because we question the quality of the services but because we question the prominence given
to it by the organization as a response for mental health. EFAP has proven to be useful across the Ontario Public Service as a first point of contact and support for people struggling with addiction, family issues and other challenges.

However, given the complexity of mental health challenges associated with policing and the longer-term nature of the required response, EFAP may not offer the most effective service.

Consequently, as a part of the OPP’s overall efforts to increase member access to mental health professionals, the Panel urges the OPP to evaluate and potentially recast the role played by EFAP.

**Recommendation 7:** The number of clinicians and service models available to provide mental health services to members should be increased and new options explored

a. The Ministry of the Solicitor General and the OPP should allocate funding in the OPP budget for at least one specialized clinician per region, working with the regional HWB, and available to support members in the region.

b. Work with the appropriate medical and educational bodies to consider a wider group of professions, including nurses and social workers, able to provide different mental health services to police and other first responders across the province:
   - The HWB should partner with the training bodies in those professions to increase the number of individuals with training in police-specific trauma response;
   - The Ministry of the Solicitor General and the Ministry of Colleges and Universities should explore targeted partnerships with universities and colleges in underserved areas, such as Lakehead and Laurentian in the North, to build regional and local capacity for mental health services;
   - The Ministry of the Solicitor General and the Ministry of Colleges and Universities should explore the potential for mental health professionals to obtain specialized certification in the treatment of police, military and first responders.

c. The Ministry of the Solicitor General and the Ministry of Health should allocate funding for service models that increase the availability of clinicians to members and the public, including embedding clinicians in detachments. These models could include regularized partnerships with service providers such as the Canadian Mental Health Association (CMHA) to provide embedded clinician services.

d. The use of digital services including telemedicine or video conferencing for psychological support, should be considered as a means of supplementing in-person services and optimizing access to services and resources.

e. The role of the Employee and Family Assistance Program (EFAP) in the suite of available services should be reviewed in light of the recommendations in this Report, the OPP Suicide Review and the Mental Health Review to ensure that members receive services commensurate to their needs.

The value of peer support and enhancing access beyond critical incidents

The Panel heard from members across the province that peer support programs play an important role in mental wellness. Members place a high premium on the value of ‘lived experience’ and they frequently prefer the support of peers to that of mental health professionals, whom they generally do not view as being sufficiently able to understand the police experience.

The Panel agrees with the members that peer support is vital – and not just at the moment of a critical incident. Many members told the Panel about a delayed emotional response, potentially as long as months after an incident occurred and by which time they felt uncomfortable reaching out within the organization for support. The Panel encourages the expansion of peer support in a
manner that recognizes that there are other high stress moments when peer support may be of value, such as following the death of a colleague or during a Professional Standards Bureau (PSB) investigation. Further, the Panel would encourage the expansion of peer support availability for those members whose experience is cumulative, rather than just at a moment of critical incident.

The Panel recognizes that improvements may be required to the current peer support program – the Critical Incident Stress Response (CISR) – and supports the recommendations in the Mental Health Review\(^{58}\) and the OPP Suicide Review.\(^{59}\)

This same principle, that mental health stressors may happen outside of the most critical or dramatic incidents, should apply to the application of the OPP Safeguard Program. While the Panel acknowledges that this program is currently under review, it encourages the OPP to retain the supportive principles that underpin the program and to expand those beyond the original application.

A pilot project to increase access to programs

The Panel heard from many members and understands the challenges with respect to privacy and stigma that members experience in seeking personal help either at the detachment or at the local health unit in the community. This is a challenge that has been experienced across the policing and first responder community.

The Panel is interested in efforts made by York Regional Police to respond to this concern by moving wellness services to a building away from the headquarters and separated from any other health services – a “Member House”. The Panel understands anecdotally that this move has increased the number of members and families who access support services.

While a single “member house” would not work given the geography of the OPP, the Panel encourages the OPP, through the HWB, to work with other first responders to explore a pilot program for an off-site service hub for members and families in one region.

Partnerships with Indigenous organizations for culturally relevant support services

There is a clear benefit to members in receiving culturally relevant support services. To this end, the Panel strongly encourages the OPP, through the HWB provincially and regionally, to explore partnerships with First Nations police services and Indigenous health services organizations to increase the availability of culturally relevant mental health support services for both Indigenous OPP members and Indigenous members of First Nations police services working with the OPP. The Panel is appreciative of the positive feedback from chiefs and deputies of First Nations police services with respect to the possibility of partnerships in this regard.

Recommendation 8: Targeted mental health programs should be supported and enhanced

a. Peer support programs, including CISR, should be evaluated and enhanced so that there is a greater number of trained peer leaders available to members. Peer support should continue to target debriefs and/or immediate support at the time of critical incidents and should be expanded to provide support beyond critical incidents, including following the death of a colleague and when a member is being suspended or investigated.

b. Recognizing that mental health stressors are not limited to certain types of police work or certain kinds of experiences, the principles of the Safeguard program should be taken into account in refocusing and expanding wellness efforts across the OPP.

c. The HWB in partnership with other first responder organizations should explore a pilot project to offer support services for members and families at an ‘off-site’ location.

d. The HWB should explore partnerships with First Nations policing services in Ontario with respect to mental health and member resilience.
Partnerships at the program development, design and delivery stages will increase the availability of culturally appropriate mental health and wellness supports for Indigenous members of OPP and First Nations policing services working closely with the OPP.

The Return to Work process is flawed

The Panel heard extensively about the challenges with the current return to work (RTW) and accommodation processes. Many members indicated to the Panel and as a part of the Mental Health Review process that the difficulties in returning to work kept them away from the workplace longer than necessary and exacerbated their injuries.

The RTW process is an important part of the healing process for members. It is a time of extreme vulnerability, in which members who have been off work must exercise the courage to face their peers and to return to a stressful and potentially triggering environment. For many members, the process fails.

There was extensive discussion about meaningful work options for those who are unable to return to full duties immediately following a leave of absence, both among members and in reports and studies on police work. Members report that the options for modified work often fail to promote greater mental health nor do they promote the best use of the member’s skills to support their unit. Members find themselves underutilized at work, increasing their own feelings of isolation and worthlessness. These feelings are often compounded by the sense that a member’s accommodation also fails to reduce the operational strain on the other members of their unit.

“Management is by the book but the book is sometimes wrong, all mental illnesses are not covered in a book anywhere.” OPP Member

Frequently, the expectations related to readiness to assume full duties are a barrier to returning to the workplace. While the objectives of evaluating functional abilities and limitations are sound – helping an employee perform their work activities safely and minimizing the risk of harm to the employee and others in the workplace – this task is particularly complex in a policing environment. Determining a member’s ability to return to operational police work may involve assessing the nature of potential triggers, the member’s access to use of force, the gap in understanding between mental health professionals and the requirements of policing, stigma and stereotypes about the capabilities of members with mental health issues, and a process that does not support caring and collaborative dialogue.

Members spoke about assignment to the OPP’s “Frontline Support Unit”, a unit that has a reputation of being a place to house accommodated members, further stigmatizing those who work there. Members also shared experiences in which they had to make up their own duties in the detachment and some spoke of not being able to return to work because there was no work for them to do. In contrast, the Panel also heard about detachments that had taken a creative and collaborative approach to exploring modified duties and accommodation options, resulting in more positive outcomes for the accommodated members and their colleagues.

As mentioned above, the RTW process is particularly fraught with stigma in the workplace. Members shared their experiences regarding comments and criticisms from their peers about the perceived value of their accommodated duties and their worth as a police officer. Members felt diminished, isolated, and struggled with the loss of their identity as a member of a team. These feelings were exacerbated by the removal of their use of force. Members also spoke about feelings of guilt and shame in not being able to support their team members.

Members, including managers, spoke to the Panel about an adversarial relationship with Human Resources and the WSIB during the RTW process. Many members feel diminished or antagonized when Human Resources questions the sufficiency
of information provided by their doctor or therapist and they expressed the sentiment that Human Resources prioritizes the bureaucratic process over members’ individual circumstances. Members are not able to appreciate validity in the actions of HR. Managers as well echoed the concerns, finding themselves caught in the middle as they attempt genuine support for members while delivering messages from Human Resources.

Opportunities for improvement

The Panel is encouraged by extensive ongoing work in the policing sector, including by the RCMP and the Canadian Association of Chiefs of Police (CACP), to create useful guidelines and develop best practices for the RTW process. The Panel was also heartened by sentiments shared during its five regional roundtables, where participants consistently reinforced the value of accommodated roles. What will be critical to improvement for the OPP is ensuring that the practical application of the RTW process is people-centred, collaborative, and inclusive. The clear priority must be on the best outcomes for the individual and the workplace.

The Panel supports the recommendation made by the Mental Health Review that complex RTW cases be considered by an interdisciplinary team supporting the member and the manager. In every case, the inputs of the member, the manager and the health professional should be considered.

Specific attention should be paid to the use of force removal/return policy. The Panel encourages the OPP to engage in greater dialogue with experts, other police services and the Provincial and Regional Wellness Tables to refine the approach to the removal and return of the use of force. The policy must carefully balance the stigmatization and shame associated with the removal of the use of force (and therefore the chance that members will not seek help) with minimizing the risk of death by suicide. Greater dialogue with mental health professionals both on a case by case basis and as a part of the development of the policy will assist in strengthening understanding.

The Panel encourages the OPP to develop clear messaging for members about the RTW process that highlights collaboration and respect and outlines clear pathways for returning with understandable roles and responsibilities. This resource should be readily available to members so that they are able to understand and prepare for a return to the workplace. Ongoing communication with members who are off work is critical to supporting members and reducing isolation.

The leadership of the OPP needs to communicate the value of different kinds of police work and encourage managers and members to be practical, creative and compassionate in planning return to work for its uniform and civilian members. Managers must model support and respect for members in the return to work process, communicating with both the member and their colleagues about the value of the member’s contribution while respecting privacy and confidentiality with respect to the member’s personal health information.

Recommendation 9: Accommodation and Return to Work must be de-stigmatized and meaningful

a. The HWB should immediately undertake a review and revision of the Return to Work protocol in accordance with best practices and with a clear aim to support the wellness of members. This work should be guided by the discussions of the Provincial Wellness Advisory Table.

b. Clear communications should be prepared and disseminated to all members with respect to the contents of the Return to Work protocol. Managers must be provided with training on the return to work process to help members return to the workplace without fear of stigma, ostracization or reprisal. Managers must clearly communicate the value of the work of accommodated members.

c. Managers and staff must be supported to find meaningful and valued work for members as
part of a Return to Work protocol to support mental wellness and to reduce stigma. This must include developing options in collaboration with the impacted member and manager.

d. Regular outreach to members off work should be a mandatory part of the case management approach. Frontline and other operational managers should be provided with training and support to ensure their engagement with members is appropriate, meaningful and supportive.

Member death by suicide requires communication and support

The Panel has focused its attention and recommendations on increasing the dialogue, availability and access to support for members struggling with mental health issues and their families. In alignment with the OPP Suicide Review, the Panel is hopeful that recommendations for strengthening the quality of the workplace culture and the services offered to members while reducing stigma around mental health, will reduce the instances of member death by suicide.

However, it remains a tragic and ongoing reality for the OPP and all police organizations.

Across the organization, there is a significant impact on members when they learn of the death by suicide of one of their colleagues. 51% of respondents to the survey reported emotional impact as a result of the death by suicide of a member of the OPP, regardless of their personal knowledge of the individual.68

Colleagues of the individual experience even greater trauma, frequently accompanied by guilt as they question whether there was more they could have done to help. In communities where the OPP provides policing services, its members may be called upon to attend the scene of a colleague’s death. The emotional impact of this work cannot be understated.

Consistent and supportive communication about member death by suicide is required from the leadership both internally to members and externally to the public. The Panel heard from members about the negative impact of non-supportive public communications from leadership following a member death by suicide.

There are conflicting views about how a police organization acknowledges member death by suicide. In discussing death by suicide, some experts advise communication that honours the member’s service to the public, in an effort to reduce stigma associated with mental health. Others caution against communication that may have a ‘contagion effect’ through exposure to the discussion. Privacy concerns must also be considered.69

The Panel urges the leadership of the OPP to continue to refine respectful messaging to support members and families and reduce stigma associated with death by suicide.

The Panel also encourages the leadership to continue to refine their approach to honouring the memory of members who die by suicide, in collaboration with colleagues and families. Consideration could be given to a focus on the lives and contributions of the members, rather than solely on the cause of their death.70

Support for families and colleagues of members must be immediate and long-term, with a combination of peer support, expert psychological support, and immediate practical help to ensure families are financially stable following the death. Regular dialogue with families and colleagues should be part of the long-term commitment of the organization.71

The Panel supports the recommendation made by the OPP Suicide Review to create an ongoing suicide review process. This review process can collect and consider commonalities, themes and gaps in service in pursuit of improved prevention and support services. Continued understanding of the opportunities for greater intervention and support is critical.72
Recommendation 10: An organization-wide approach to member death by suicide should be developed and communicated

a. Service-wide, regional and local responses to member death by suicide should include clear internal and external communication that supports the reduction of stigma and reinforces the support for members and families.

b. An immediate and long-term support plan for families and colleagues should be easily activated and coordinated to include active, on-site engagement by clinicians and trained peer support as an immediate response, as well as regular dialogue with families and colleagues as a long-term commitment.

c. A collaborative dialogue, including members and families, on how best to recognize and pay tribute to members who die by suicide is an immediate priority.
Section D: Positive workplace culture requires trusted oversight and ongoing dialogue

Our vision

- Positive workplace behaviour and dialogue are modelled across the OPP
- Workplace conflict is resolved effectively and respectfully
- Long term OPP-centred solutions for positive workplaces and conflict resolution are developed

“We need to ensure our workplace is respectful, professional, accountable. Being in a manager position it is difficult at times to do so and some feel the organization doesn’t support them, the programs have little teeth and those who do follow the policies are perceived as being unreasonable and harsh managers.” OPP Members

Workplace culture issues

Differences of opinion and personality will always occur in workplaces. Particularly in organizations in which members perform highly stressful functions, conflicts will occur. Power imbalances, including between senior and junior staff, between staff and management, between genders and between members of the visible majority and members of the visible minority, may heighten the impact of these conflicts.

The mark of a healthy and resilient workplace is that members are able to disagree without disrespect, bullying or harassment, that members do not rely on power imbalances to exert their will and that when conflicts arise, there are effective and rapid mechanisms for resolution.

The Panel heard repeatedly, through group discussions, individual conversations and through the survey, that there are very real issues with respect to bullying, harassment and conflict resolution in the OPP.

According to the survey, approximately half of member respondents indicated that they experienced bullying, harassment, discrimination and/or rejection at least sometimes in the past year. Less than 30% of those who experienced these challenges reported them, citing their expectation that nothing would be done, fear of reprisal and fear that reporting would negatively impact their advancement opportunities.73

The Panel accepts the views of the members that there is a negative workplace culture within the OPP that, in some locations tolerates bullying and harassment, and that overall the OPP does not have the necessary tools to respond appropriately to conflict. The current conflict resolution approach, using the Ontario Public Service (OPS) Respectful Workplace Policy, lacks credibility with members at all levels and is not effective in resolving workplace disputes.

The Panel also accepts that the challenges expressed by members are felt across the province and by both management and staff. This negatively impacts the wellness and resilience of the organization. In the Panel’s roundtable discussions, members repeatedly expressed the view that stress related to workplace conflict made their work life difficult and that they had real or perceived threats to their career advancement as a result of conflict. These concerns meant that they either did not access support to resolve their conflict or viewed the outcome of accessing support as a mark against career progression.

In discussions, managers and supervisors repeatedly expressed a sense of frustration and lack of support in managing conflict or addressing harassment.

The Panel’s view is that the best practices for addressing bullying, harassment and negative workplace cultures are those aimed at eliminating such behaviour from the organization. This requires culture and attitude changes at both organizational and individual levels. Until these goals are achieved,
organizations must be able to address complaints with practices that are timely, fair and consistent. Members need to experience a sense of justice through an opportunity to be heard and a view that the range of outcomes is suitable.

Addressing a negative culture of bullying and harassment requires more than just policy changes or training. Ongoing dialogue, discussions using a common language across the organization, the practice of conflict resolution and modelling of constructive approaches at all levels of leadership are necessary to effect a course correction. This cannot be accomplished in one-time or online training. Rather, the principles of a positive workplace, appropriate behaviour and conflict resolution must be modelled by leadership and practiced and refreshed on a regular basis by all members of the OPP.

Recommendation 11: Communication and discussion with respect to positive workplace culture and conflict resolution must occur across the organization

a. Ongoing, regular and mandatory training should be provided to all members with respect to the elements of a positive workplace culture, conflict resolution, responding to bullying and harassment in the workplace, and the impact of bullying and harassment on mental health. This training should be combined with other wellness training and as a part of regular ‘resilience recertification’ through the HWB.

b. Ongoing and regular communications from the Commissioner and others in leadership positions supporting a positive work environment and modelling conflict resolution, should form part of the Commissioner’s wellness communication strategy.

Workplace culture is a key aspect of wellness and resilience

The management of conflicts in the workplace, and improvement of the workplace culture are important parts of the wellness and resilience of the organization. In order to prioritize these aspects of a healthy workforce, the Panel has concluded that management and oversight of workplace culture, including conflicts, belongs in a new unit dedicated to supporting positive conflict resolution and modelling positive behaviour.

The Panel notes that the Professional Standards Bureau (PSB), responsible for resolving issues under the Comprehensive Ontario Police Services Act, is exempt from the comments and recommendations in this section. The Panel appreciated its conversation with representatives from PSB, who advised that they have recently begun using alternate forms of dispute resolution, including a roundtable model, as well as applying a mental health lens to decision-making in their cases. The Panel agrees with the need for sensitivity to mental health issues in disciplinary matters and encourages these positive developments in PSB.

As a part of providing support to members, the new unit should include representatives who can provide confidential and knowledgeable guidance on options and processes for resolving conflict and addressing harassment. The Panel envisions these representatives as impartial supports for both staff and management in understanding what to expect and how to navigate the processes. They are not envisioned as partisan advocates or otherwise supplanting the roles played by bargaining agents or other employee representatives.

As noted above, the current model of workplace dispute resolution, primarily conducted through the Respectful Workplace Policy, lacks credibility with OPP staff and management. The program is considered bureaucratic, too close to Human Resources, tailored to the broader OPS rather than the OPP, lacking in police context, and unable to achieve meaningful outcomes. The Panel agrees.

The Panel is of the view that a successful dispute resolution mechanism for the OPP must be ‘home grown’, designed by and residing within the OPP. While there are important principles in the OPS Respectful Workplace Policy, the Panel
recommends that the OPP assume oversight of the policy for the OPP and adapt it to better suit the context and desired outcomes.

**Recommendation 12:** The OPP should create a Resolutions Unit focused on workplace conflict resolution

a. A Resolutions Unit should be established, with a mandate separate and distinct from the Professional Standards Bureau and outside the Human Resources/Career Development Bureau.

b. The mandate and staffing of the office should include knowledgeable representatives for providing support, confidentiality, and accurate and impartial navigation of workplace issues and resolution options. The Resolutions Unit should have representation in each region.

c. Responsibility for the oversight and administration of the Respectful Workplace Policy should be transferred from the Ontario Public Service (OPS) to the OPP and housed in the Resolutions Unit. While continuing to align with OPS principles, the OPP Respectful Workplace Policy should be remodelled to correspond more directly with the recommendations of this Report, the OPP Suicide Review and the Mental Health Review, the experiences and realities of OPP members, and to enhance the credibility of the process and the positive impact of the outcomes.

A new perspective on conflict resolution is required

The Panel has concluded that an additional short-term appointment is needed as a bridge between the current system of resolution and the anticipated improvements. This appointment will support the resolution of particularly difficult issues and work with the Commissioner and the leadership team to refine a long-term solution for complaints resolution in the OPP.

There are some existing disputes that have not been resolved through traditional channels, despite extensive efforts by all parties. The new appointee, the Panel believes, will bring a fresh perspective to working with the parties and making recommendations to the Commissioner for resolution.

This avenue of dispute resolution should be viewed as a short-term vehicle of last resort and not available for resolution of most matters, particularly in light of the refreshed mandate for the Respectful Workplace program and the greater emphasis on conflict resolution throughout the OPP.

The Panel envisions the appointee as a support to the Commissioner in his work to reform conflict resolution and increase the wellbeing of the workforce. To that end, the Panel recommends that the appointee consider current programming and best practices, collect and analyze data, and provide advice to the leadership team about conflict resolution in the OPP, including the Respectful Workplace Policy.

To ensure that the process is credible with members, the Panel recommends an independent appointment, made by the Commissioner and the Deputy Solicitor General, Community Safety.

Throughout the five-year duration of the position, the appointee will continue to work with the OPP to improve dispute resolution, bring closure to existing disputes and refine the current models. The outcome of this work and a determination about next steps will be made by the Commissioner and the Deputy Solicitor General at the end of the term.

**Recommendation 13:** A new complaints resolution process is required to support workplace culture improvements

a. A Dispute Resolution Advisor, appointed by the Commissioner and the Deputy Solicitor General, Community Safety for a five-year duration, should be empowered to:

- Receive and make recommendations to the Commissioner about member complaints that have not been resolved through any other formal mechanism, including current complaints;
• Give advice to the Commissioner with respect to material changes to existing programs/policies or new programs/policies that may impact the wellbeing of members;

• Collect and analyze data related to complaints with a view to identifying long-term solutions for complaint resolution;

• Assist in the development of a framework for effective complaint resolution and provide advice to the leadership team as they address the Respectful Workplace Policy; and

• Provide advice or recommendations to the Commissioner on other matters that may impact the wellbeing of members as requested.

b. The individual shall not be an employee of the government and shall be independent, ethical and credible. Support for the individual should be provided to ensure timely and comprehensive responses.

c. At the end of the five-year term, the Commissioner and the Deputy Solicitor General, Community Safety will assess the recommendations and progress made by the Dispute Resolution Advisor in enhancing the complaints resolution process and positively impacting workplace culture. They may opt to renew the position or to adopt an alternate model to respond to the needs of the organization.

Section E: The administration of the operation and its people should support wellness and positive workplace culture

Our vision

• Funding and operational decisions support wellness and resilience

• Administrative/operational pressures have a reduced impact on the mental health of frontline members

• Resilience is strengthened through a more inclusive membership

The high cost of operational vacancies

There is no shortage of evidence that operational staffing issues have an impact on member wellness. Across the province, the Panel heard about staffing shortages, long shifts, challenging shift cycles, and pressures related to working overtime hours. Members reported feelings of increased isolation as they frequently conducted calls alone, increased exhaustion as they attended a greater number of calls without a break, overtime hours, concerns about safety, and increased exposure to other work-related stressors.

Many members also reported feelings of guilt – that they did not feel they could take time off or other steps to manage their own physical and psychological health challenges because it would leave their units understaffed and their colleagues more exposed. Members wait until their health situations are ‘desperate’ before seeking assistance, requiring greater interventions, more time off and causing more damage to the individual member and their colleagues.

“Every office is short staffed. Members are constantly being asked to do more with less. It’s burning people out; supervisors have a difficult time filling overtime and it’s a safety issue. Officers are responding while exhausted and often with back up far away.” OPP Member

This vicious cycle of increased exposure due to staffing shortages leading to greater stress on those left to cover the shifts has been exacerbated by recent fiscal decisions that tolerate a greater reduction in frontline and other operational staffing numbers, meaning that positions vacated due to leaves are not all filled.

Obviously, there are consequences for individual members caught up in this staffing crunch. There
are also systemic consequences to the financial and operational functioning of the OPP.

At the time of this Report, about 875 or 21% of frontline members were off on approved leave. This means more than one-fifth of the frontline staff is unavailable for work.

There is a high price tag to having over 20% of frontline officers unavailable for duty. Overtime is more costly than regular time, short-term absences such as sick leave are seldom backfilled, and any positions that are backfilled mean that the OPP is paying both for the officer who is off and the backfill. The cost of benefits and health care for mental health and stress issues is high and these issues have a high rate of recurrence.\footnote{75}

**Applying a wellness lens**

It is the Panel’s view that the Government and the OPP must adopt a policy with respect to fiscal and operational decisions that support the positive mental and physical health of frontline officers. A clear business case can be made for the connection between adequate staffing, a healthy workforce and a more efficient and fiscally effective organization.

There may be many elements to such a case. The Panel strongly recommends that this include revisions to the minimum acceptable staffing levels. In addition, the Panel frequently heard about the stress associated with calls piling up for frontline officers when the shift is short-staffed. In other words, while members are responding to one call, a second call is directed to them, rather than the use of a queuing system. This creates a great deal of pressure and stress on the officer to appropriately manage the first call and also respond to any emergencies related to the second call.

The business case must be premised on the concept that ongoing and consistent staffing below acceptable levels is harmful to the health and wellness of OPP members, is more expensive to Ontario taxpayers and potentially impacts the safety of the public. This is the application of a ‘wellness lens’.

**Recommendation 14**: The leadership priority on wellness must extend to budgetary and operational staffing decisions

a. The Government, including the Ministry of the Solicitor General and Treasury Board Secretariat should apply a wellness lens to all budget decisions related to operational staffing in the OPP.

b. The OPP should apply a wellness lens to all operational decisions related to staffing across the Province.

c. The wellness lens should include the recognition that adequate staffing has long-term fiscal and functional benefits through the maintenance of a healthy and resilient workforce.

**The challenges of resource constraints**

Addressing the organizational pressures that contribute to work-related stress and enhancing the resilience of the workforce to manage the pressures is multi-faceted, going beyond funding commitments.

Along with low staffing levels, the Panel heard of other administrative/organizational resource pressures that increase stress for members, including the nature of the shift schedule, demands for overtime, isolation while on shifts and service calls stacking up.

In the Panel’s survey, 66% of responding members indicated that they experience the stress of staff shortages and resource pressures constantly or very often. That number increased to 72% for uniform members.\footnote{76}

Acknowledging the detrimental impact of these resource pressures on the resilience of the workforce is a critical first step. Implementing critical elements for success, including and beyond a funding commitment to staffing levels, is next.

The responsibility for reducing the burden experienced by members as a result of organizational and resource pressures rests
broadly with a number of entities, including the Government through the Ministry of the Solicitor General and the Treasury Board, the OPP leadership team, OPP management across the province, members who support one another and champion a healthy workforce, and the bargaining agents.

There are two important concepts that the Panel urges the parties to consider with respect to the implementation of staffing and scheduling policies that form part of the wellness lens:

a. Preserving time for rest and recovery; and
b. Reducing the isolation of members.

**Preserving time for rest and recovery**

Members identified the challenges they experience with fatigue as a result of overtime, calls that stack up without a break, court appearances on scheduled days off and no automatic/presumptive rest after a critical incident.

While some of these challenges may be inevitable or unavoidable at times, the nature of the resource pressures appears to increase the occurrence of fatiguing conditions for frontline members.

Adequate rest and recovery are critical to overall mental health, resilience and the impact of traumatic or critical incidents. The Panel urges the OPP to preserve time for rest and recovery in scheduling and staffing decisions.

**Reducing isolation**

**Addressing physical isolation**

It is largely outside the Panel’s mandate to make specific recommendations with respect to staffing and scheduling. However, the Panel is of the view that a commitment to reducing the physical isolation of members would support increased member wellness and resilience.

We encourage the OPP to consider ensuring adequate operational members on each shift, ensuring that patrol areas are drawn in a way that reduces time spent without available back-up, and building in time at the beginning and end of shifts for group debriefs and discussions.

The Panel is of the view that there are some areas of the province where staffing levels have reached crisis proportions. In particular, the North is woefully understaffed and members serving in Northern detachments report conditions that are detrimental to their health and wellness.

In the Panel’s survey, members who work in the Northwest:

- feel more anxious (41% compared to 36% in other regions);
- feel more isolated (36% compared to 30% in other regions); and
- report missing more work as a result of work stressors (average of 14.3 days of work over the past year compared to 6-13 in other regions).

The OPP struggles to recruit members from Northern and remote communities resulting in the use of ‘duration postings’ of members from other regions. This increases the isolation of those members and may also have a chilling effect on the OPP’s relationship with Northern communities. The Panel heard conflicting information about the educational and other requirements for recruitment to the OPP and conflicting information about the success rates of Northern recruitment efforts, including the perception that a university degree is required.

The challenges facing members working in Northern communities are compounded by isolation as a result of the remote nature of the communities and the distance between communities, and a lack of access to health and wellness support services.

While the Panel does not presume that these issues can be solved easily, the Panel urges an immediate and targeted approach to managing resource pressures in the North, including staffing increases, new approaches to recruiting from Northern communities and finding alternative ways to provide supports to members. It was
clear to the Panel that there are excellent people available as potential recruits in the North. It is incumbent on the OPP to make every effort to recruit them.

The Panel notes that, while we have referred to the North as both an area requiring immediate attention and an illustration, there are other regions and specific units or detachments that are acutely impacted by staffing crises. These other high need areas should also be considered immediate priorities for the OPP.

**Wellness and resilience require intentional inclusion**

The role that diversity and inclusion play in the health of an organization should be viewed as an operational requirement, as opposed to a ‘project’ or a unit inside Human Resources. Diversity of membership adds valuable dimension to issues of mental and social wellness, a sense of community, leadership and important perspectives on conflict resolution and engagement with the public. Inclusion ensures that the gains of a diverse membership are meaningful to all members.

“[W]e need to do more to promote [the] organization across the province, both urban vs rural but also to promote across a variety of cultures, backgrounds, races and faiths that live in Ontario.” OPP Member

The OPP’s current approach to diversity and inclusion is inadequate. Membership in the OPP does not reflect the population of Ontario in terms of gender, ethnicity or identity. The Panel understands that a review of the OPP Inclusion Councils is underway.

Inside the OPP, there are limited supports or communities for members who do not resemble the majority. It is noteworthy that June 2019 was the first year that GHQ has flown the Pride Flag, having previously displayed the flag only in its lobby.

There are no networks for women, people of colour, Indigenous, LGBTQ2+ or other groups. There are strong communities inside the Ontario Public Service that are available to OPP members, such as the BOPSers (Black Ontario Public Service Employee Network), OPS Pride, FrancoGO and others but these networks are not police-specific and are largely administered out of Toronto.

The isolation that members from non-majority groups feel is compounded by the disparate geography of the OPP. Members may be the sole ‘different’ person in a detachment or on their shift. There are very few members of these groups in the management or leadership ranks.

It is incumbent on senior leadership in the OPP to acknowledge the current lack of diversity or meaningful inclusion in the OPP and to address the issue as an operational threat to resilience and wellness. Frequently, organizations and leaders, even after they have acknowledged the need for and value of inclusion, view it as a job for the people seeking it. In other words, women should band together to seek equity. This is wrong and it does not work. Instead, it pits groups against one another, the majority and the leadership, while perpetuating the difference in power dynamics.

The Commissioner and the leadership team should lead a collaborative campaign to increase the diversity in the OPP and strengthen meaningful inclusion. Meaningful inclusion requires commitment and action by the leadership.

**Recommendation 15: Staffing and scheduling require a wellness lens and strategic approaches to ensuring the membership reflects and supports the population of Ontario**

a. The approach to scheduling should apply a wellness lens to recommendations, including:

- reducing reliance on overtime,
- ensuring adequate time in shifts for debriefs (formal and informal) at the end of busy shifts,
- reducing the isolation of members while on shifts,
- introducing the potential for time off the day after a critical incident; and
- introducing added shift flexibility to account for work and personal responsibilities, including court appearances.

b. In addition to the recommendations made in this Report, the OPP Suicide Review and the Mental Health Review with respect to increasing the wellness and resilience of members, the OPP should continue to work collaboratively with members and bargaining agents to find ways to increase the number of members available for operational positions, with attention to the most critical shortages.

c. An urgent strategic approach to staffing shortages is required to support detachments in the North. This support should be comprised of:

- targeted spending increases on staffing,
- an enhanced hiring campaign for potential new recruits in Northern and Indigenous communities, and
- a strategic approach to deployment that supports mental wellness for members deployed in the North, including increasing access to support services and proactive member health check-ins.

d. Priority efforts should be directed at ensuring authentic inclusion in the OPP. Along with the findings from the review of the OPP Inclusion Councils, these efforts should include communications from all levels of leadership that diversity and inclusion lead to a healthy workplace, and creating empowered communities of members inside the service at a central, regional and local level.

e. A more aggressive mandate to increase the inclusivity of the OPP is required to recruit members that more accurately reflect the diverse makeup of Ontario. Direct outreach to diverse and/or under-represented communities should be part of a larger recruitment campaign.
Appendices

A: Glossary of Acronyms
B: About the Panel
C: Malatest Inc. Survey Executive Summary
D: Independent Review Panel Activities
E: Bibliography
## Appendix A: Glossary of Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>CACP</td>
<td>Canadian Association of Chiefs of Police</td>
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<tr>
<td>CAMS</td>
<td>Civilian Association of Managers and Specialists</td>
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<tr>
<td>CISR</td>
<td>Critical Incident Stress Response</td>
</tr>
<tr>
<td>CMHA</td>
<td>Canadian Mental Health Association</td>
</tr>
<tr>
<td>COA</td>
<td>Commissioned Officers Association</td>
</tr>
<tr>
<td>EFAP</td>
<td>Employee and Family Assistance Program</td>
</tr>
<tr>
<td>GHQ</td>
<td>General Headquarters</td>
</tr>
<tr>
<td>HR</td>
<td>Human Resources</td>
</tr>
<tr>
<td>HWB</td>
<td>Healthy Workplace Bureau</td>
</tr>
<tr>
<td>IRP</td>
<td>Independent Review Panel, “the Panel”</td>
</tr>
<tr>
<td>LTIP</td>
<td>Long-Term Income Protection</td>
</tr>
<tr>
<td>MHCC</td>
<td>Mental Health Commission of Canada</td>
</tr>
<tr>
<td>OACP</td>
<td>Ontario Association of Chiefs of Police</td>
</tr>
<tr>
<td>OPP</td>
<td>Ontario Provincial Police</td>
</tr>
<tr>
<td>OPPA</td>
<td>Ontario Provincial Police Association</td>
</tr>
<tr>
<td>OPPVA</td>
<td>Ontario Provincial Police Veterans’ Association</td>
</tr>
<tr>
<td>OPS</td>
<td>Ontario Public Service</td>
</tr>
<tr>
<td>OSI</td>
<td>Operational stress injury</td>
</tr>
<tr>
<td>PART</td>
<td>Peer Assistance and Resource Team</td>
</tr>
<tr>
<td>PSB</td>
<td>Professional Standards Bureau</td>
</tr>
<tr>
<td>PTSD</td>
<td>Post-traumatic stress disorder</td>
</tr>
<tr>
<td>R2MR</td>
<td>Road to Mental Readiness</td>
</tr>
<tr>
<td>RCMP</td>
<td>Royal Canadian Mounted Police</td>
</tr>
<tr>
<td>RTW</td>
<td>Return to work</td>
</tr>
<tr>
<td>WSIB</td>
<td>Workplace Safety and Insurance Board</td>
</tr>
</tbody>
</table>
Appendix B: About the Panel

Douglas Cunningham - Former Associate Chief Justice of Ontario

The Honourable J. Douglas Cunningham, Q.C. was appointed to the Ontario Superior Court of Justice in 1991. During his more than two decades on the bench, Mr. Cunningham presided over hundreds of complex, high-stakes trials, first as Regional Senior Judge for the East Region (2000-2002) and then as Associate Chief Justice of the Superior Court of Justice (2002-2012). He also regularly sat on civil appeals as a Judge of the Ontario Divisional Court.

Mr. Cunningham was also a member of the executive committee of the Canadian Judicial Council, chaired the Administration of Justice Committee and served as a member of the Court of Martial Appeals and the Pension Appeals Board.

Retiring from the court in 2012, Mr. Cunningham founded Cunningham Dispute Resolution Services. Since then he has been a highly successful commercial arbitrator and mediator based in Toronto and Ottawa, serving clients across Canada and internationally. He has conducted independent reviews for both the federal and provincial governments, and served as a consultant to counsel in trial strategy, appeals and neutral evaluation.

Mr. Cunningham’s broad experience gained during his years on the bench and in private practice includes corporate and commercial matters, professional liability, construction, critical injury and insurance, securities, employment, product liability, entertainment and sports, class actions and estates.

A graduate of Huron College at Western University and Queen’s University Law School, he was called to the bar in 1969, appointed a Queen’s Counsel in 1980 and designated a specialist in civil litigation in 1990. In 2013, he received an honourary Doctor of Laws degree from the Law Society of Upper Canada.

Murray Segal - Former Deputy Attorney General of Ontario

Following a distinguished career with the Ontario government, including eight years as Deputy Attorney General of Ontario and former Deputy Minister Responsible for Aboriginal Affairs, Murray Segal now practices as independent legal counsel, consultant and mediator practicing as Murray D. Segal Professional Corporation.

Mr. Segal was the chief legal advisor to the Government of Ontario and advisor to Cabinet, the Attorney General, other ministers and deputy ministers. He oversaw all government litigation and is experienced in developing legislation. With a deep commitment to access to justice, he guided the modernization of Ontario’s justice architecture, with a keen eye to updating technology. Mr. Segal oversaw and implemented transformation of the human rights system, administrative law tribunals, police oversight, civil law reform and criminal justice improvements.

Prior to his time as the Deputy Attorney General, Mr. Segal was the Chief Prosecutor for the Province of Ontario, leading the largest prosecution service in Canada.

Today, drawing on his extensive legal and executive experience, he advises and represents clients in
both the public and private sectors. He has been asked by governments across Canada to look into challenging issues including reviewing the Nova Scotia justice response in relation to the late Rehtaeh Parsons. He sits on the Board of the Centre for Addiction and Mental Health (CAMH) and the Canadian Mental Health Association (CMHA)-Greater Toronto.

**David Cooke - Former Ontario MPP and Cabinet Minister**

Born in Windsor and graduated with Bachelor of Social Work in 1975, David Cooke was elected to the Windsor Board of Education in 1974. In 1977, Mr. Cooke was elected as a New Democrat MPP and served in the legislature until February 1997.

During his tenure in the legislature, Mr. Cooke was appointed Minister of Housing and Municipal Affairs, served as Government House leader, Chair of Management Board and was appointed Minister of Education and Training.

Mr. Cooke is the former chair of the Erie St. Clair Local Health Integration Network and the Seneca College board, and a former member of the Windsor-Essex Development Commission board. He also served as the chair of the board of governors of the University of Windsor. Mr. Cooke served 10 years on the Provincial Education Quality and Accountability Office (EQAO) Board of Directors—the last three as chair. During his tenure, he made important contributions to the agency’s growth and development, and helped set the vision for the organization’s modernization efforts.

Awarded an Honorary Diploma from St. Clair College in 1998, Mr. Cooke also received the Clark Award for outstanding service to the University of Windsor. In 2002, he was awarded the Queen’s Golden Jubilee Medal and in 2012 the Queen’s Diamond Jubilee Medal.

Mr. Cooke holds an honorary Doctor of Laws degree from the University of Windsor in 2014 and currently co-chairs the Steering Committee in Windsor Essex planning for a new hospital.
SECTION 1: Executive Summary

1.1 Introduction

1.2 Key findings

1.3 Considerations for the future

SECTION 2: Survey Instrument and Invitation

SECTION 1: EXECUTIVE SUMMARY

Introduction

In the spring of 2019, the Independent Review Panel (IRP) invited current and retired civilian, uniform and auxiliary members of the Ontario Provincial Police (OPP) to participate in an online survey that examined the workplace culture of the OPP. This anonymous and confidential survey was administered by R.A. Malatest & Associates Ltd. (Malatest) and attained a total of 5,192 valid survey completions. The goal of the survey was to help the IRP make informed recommendations on ways to improve the OPP workplace, including the mental health resources and supports that are available to members.

The data collected for this survey can be considered with confidence; however, it should be noted that the survey was created as an open link that did not require an access code to enter. This was done to reassure members that their survey responses were confidential and could in no way be linked back to them. To assess the likelihood that multiple surveys had been completed by the same person, Malatest compared the number of surveys completed by command/bureau to the actual headcount by command/bureau within the OPP. Results of this comparison suggested that the likelihood of respondents submitting duplicate entries in sufficient quantity to influence or skew the results was low; the proportion completing a survey within each command/bureau was closely aligned with the actual headcount proportions within the OPP.

The survey data were analyzed using summary and descriptive statistics as well as tests for means and proportions comparisons. Data were analyzed by numerous subgroups including status, member type, command/bureau, rank, level of management, tenure, and geographic region. Of the 5,192 surveys completed for this study, 91% were completed by current members and 8% by retired members (1% preferred not to
say to respond to the question asking about their status). A total of 68% of surveys were completed by members in uniform, 30% by civilian members, and 1% by auxiliary members (1% preferred not to answer the question asking about their member type) (See Figure 1).

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**Figure 1**

<table>
<thead>
<tr>
<th>Respondent member status</th>
<th>Total # participants</th>
<th>% of total participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current members</td>
<td>4,750</td>
<td>91%</td>
</tr>
<tr>
<td>Retired members</td>
<td>412</td>
<td>8%</td>
</tr>
<tr>
<td>Preferred not to answer</td>
<td>30</td>
<td>1%</td>
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<table>
<thead>
<tr>
<th>Respondent member type</th>
<th>Total # participants</th>
<th>% of total participants</th>
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</thead>
<tbody>
<tr>
<td>Uniform</td>
<td>3,552</td>
<td>68%</td>
</tr>
<tr>
<td>Civilian</td>
<td>1,558</td>
<td>30%</td>
</tr>
<tr>
<td>Auxiliary</td>
<td>42</td>
<td>1%</td>
</tr>
<tr>
<td>Preferred not to answer</td>
<td>40</td>
<td>1%</td>
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<table>
<thead>
<tr>
<th>Geographic Region</th>
<th>Total # participants</th>
<th>% of total participants</th>
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<tbody>
<tr>
<td>East</td>
<td>441</td>
<td>19%</td>
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<tr>
<td>Central</td>
<td>553</td>
<td>24%</td>
</tr>
<tr>
<td>Northeast</td>
<td>275</td>
<td>12%</td>
</tr>
<tr>
<td>Northwest</td>
<td>205</td>
<td>9%</td>
</tr>
<tr>
<td>West</td>
<td>575</td>
<td>25%</td>
</tr>
<tr>
<td>Community Safety Services</td>
<td>34</td>
<td>1%</td>
</tr>
<tr>
<td>Indigenous Policing Bureau</td>
<td>16</td>
<td>1%</td>
</tr>
<tr>
<td>Preferred not to answer</td>
<td>245</td>
<td>10%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Command/Bureau</th>
<th>Total # participants</th>
<th>% of total participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Corporate Services</td>
<td>315</td>
<td>6%</td>
</tr>
<tr>
<td>Traffic Safety and Operational Support (Highway Safety Division n=313 or 17% of this Command)</td>
<td>826</td>
<td>16%</td>
</tr>
<tr>
<td>Investigations and Organized Crime</td>
<td>974</td>
<td>19%</td>
</tr>
<tr>
<td>Field Operations</td>
<td>2,344</td>
<td>45%</td>
</tr>
<tr>
<td>Corporate Communications and Strategy Management Bureau</td>
<td>201</td>
<td>4%</td>
</tr>
<tr>
<td>Other/ I prefer not to answer</td>
<td>532</td>
<td>10%</td>
</tr>
</tbody>
</table>

Among the 4,750 current members who completed a survey, 33% had worked with the OPP for 10 years or less, 37% for 11 to 20 years, and 30% for over 20 years. A total of 59% indicated that their lived gender identity is male and 38% female. Among the 412 retired members who
completed the survey, 40% retired 10 years ago or less, 29% retired 11 to 20 years ago, 31% had retired over 20 years ago. A total of 85% of retired members indicated that they are male and 13% female (1% preferred not to answer). The vast majority of survey respondents indicated that their race or racial background is white (90% of current members and 96% of retired members).

1.2 Key findings

Workplace Culture and how Members Feel in Work Environment

Members were asked to indicate their experience of the culture within the OPP by indicating which of a series of words or phrases best described the work culture. For example: respectful compared to offensive, diverse compared to ‘everyone is the same’.

The closer the box selected was to the word/phrase, the more they felt that it described the culture. Members were more likely to describe their workplace as:

• Respectful (55% compared to 25% offensive);
• Diverse (53% compared to 21% ‘everyone is the same’); and
• Inclusive (50% compared to 30% discriminatory).

However, members were even more likely to describe the organization as:

• Hierarchical (68% compared to 19% democratic); and
• Secretive (60% compared to 24% transparent).

With respect to how members feel in their work environment, the majority of members felt that their workplace is safe (62% compared to 25% vulnerable) and that they are “part of the team” (60% compared to 28% isolated).

Key insights among demographic sub-groups include:

• Members who have been with the OPP for a shorter period of time (10 years or less) have more positive impressions of the OPP than longer serving members;
• 45% of retired members view the OPP as discriminatory compared to 29% of current members. By contrast, 65% of current members see the OPP as respectful compared to 46% of retired members;
• Members in uniform hold slightly more negative views of the culture within the OPP compared to civilian and auxiliary members;
• Racialized members were more likely than white members to view the organization as biased and discriminatory, rather than that the culture is diverse;
• Few differences were observed by gender; and
• Perspectives of the OPP are more positive among members holding a managerial or higher position compared to team leaders/supervisors and members with no direct reports.

Workplace Stressors and Members’ Perceptions of OPP

A sizable proportion of members, regardless of tenure, indicated that they feel that the OPP needs to develop and adhere to more equitable practices. Specifically, 64% overall felt frequent stress because of their perception that “different rules apply to different people,” 62% disagreed that the OPP is respectful towards and inclusive of members with physical disabilities, 55% disagreed that the OPP employs fair and equitable promotional processes, and 48% disagreed that the OPP employs fair and equitable hiring practices.

Sources of Stress related to the Job Itself

The most significant source of the stress related to the job itself was reported to be staff shortages and resource pressures, with 66% of members indicating that they experience this stress constantly/very often/often. Staff shortages and resource pressures was also the most frequent source of stress among uniform members (72% compared to 54% civilian and 31% auxiliary members). While 38% of members feel “constant”
stress as a result of staff shortages and resource pressures, numbers were higher among the following subgroups:

- 47% of constables;
- 47% of members in Investigations & Organized Crime;
- 45% Field Operations;
- 41% of male members;
- 54% of members in the Northeast region
- 53% of members in the East region; and
- 52% of members in the Northwest region.

Sources of Stress related to Impact of Work on Social Life

A sizable proportion of members - especially newer members - feel significant stress as a result of the pressure their work puts on their social life. The top stressors that members reported feeling all of or most of the time were:

- Their romantic relationships (35%);
- The negative impact of work on family/friends (29%);
- Upholding a “higher image” in public (25%); and
- Making friends outside of job (25%).

Extent to which Members Feel Supported in Mental Health

While 77% of members would feel supported by colleagues if they experienced a mental health challenge and were open about it in the workplace, just 45% of members feel that they would be supported by their supervisor or manager. Those who feel they would not be supported by their supervisor/manager reported missing more days of work in the previous year than those who feel they would be supported (mean of 24 days compared to mean of 5 days among those who feel they would be supported).

Experience with Bullying, Harassment, Discrimination

Approximately half of members indicated they experience bullying, harassment, discrimination and/or rejection in the workplace at least sometimes. In addition, less than 30% of those who experienced a workplace incident reported it. Main reasons for not reporting these experiences are impressions that “nothing will be done,” “fear of reprisal,” and fear that reporting the experience will negatively impact their opportunities for advancement:

- Among members who did not report they had experienced bullying at work (n=1,349), 56% reported “Concerns that nothing would be done, 52% reported “Concerns about reprisal, and 40% reported “Concerns it would impact advancement opportunities” as reasons for not reporting the incident;
- Among members who did not report they had experienced harassment at work (n=1,135), 54% reported “Concerns that nothing would be done, 46% reported “Concerns about reprisal, and 35% reported “Concerns it would impact advancement opportunities” reasons for not reporting the incident; and
- Among members who did not report they had experienced discrimination at work (n=1,237), 53% reported “Concerns that nothing would be done, 46% reported “Concerns about reprisal, and 35% reported “Concerns it would impact advancement opportunities” reasons for not reporting the incident.

Days of Work Missed in the Past Year Due to Work Stressors

Overall, members who participated in the survey reported missing an average of 7.7 days due to work stressors. A total of 49% of members indicated they did not miss any days of work due to workplace stressors; 23% reported missing 1 to less than 5 days; 6% missed between 5 and 10 days; and 7% reported missing 10 days or more.

Analyzed by employee sub-group, uniform members reported missing more days due to workplace stressors (mean of 8.5 days) compared to civilians (mean of 6 days) and auxiliary members (mean of 0 days). Constables reported missing
more days due to workplace stressors (mean of 10 days) compared to sergeants (mean of 7 days), staff sergeants/sergeants majors (mean of 4 days), and commissioned officers (mean of 1 day).

Although it cannot be stated that bullying, harassment and discrimination causes members to miss more days of work, results suggest that there is a correlation between the two. Those who reported that they had been bullied, harassed and/or discriminated against in the workplace reported missing more workdays than those who did not have these experiences:

- Bullying in the workplace: Those who had never experienced this missed an average of 2 days of work compared to an average of 34 days among those who reported that they constantly experienced this;

- Harassment in the workplace: Those who had never experienced this missed an average of 3 days of work compared to an average of 38 days among those who reported that they constantly experienced this; and

- Discrimination in the workplace: Those who had never experienced this missed an average of 3 days of work compared to an average of 38 days among those who reported that they constantly experienced this.

More research would be required to explore issues such as whether members who report experiencing bullying, harassment and discrimination take time off as a result of these experiences; whether the experience of bullying, harassment and discrimination arises only once a member has already taken time off work; or, a combination of factors are present with no demonstrated link between these experiences and missed days of work.

**Emotional Impact of Suicide**

Members within all employee groups and subgroups reported some degree of impact related to the suicide of a close colleague, colleague or someone in the OPP community. Survey findings confirm that this is an issue of broad-reaching impact, and for which many members report not accessing the range of supports available for a range of reasons as summarized below and throughout this report.

- Overall, 51% of members reported that they had been emotionally impacted by the suicide of a member of the OPP. However, just 16% sought supports to help them through the experience; most preferred to manage on their own.

Similar to our statement regarding bullying, harassment and discrimination, it cannot be stated that the impact of suicide causes members to miss more days of work; however, results suggest that there is a correlation between the two:

- Experienced suicide of close colleague: mean of 20 days missed among those who experienced suicide;

- Experienced suicide of colleague: mean of 10 days missed;

- Experienced suicide of someone in OPP: mean of 12 days missed; and

- No experience of suicide: mean of 3 days missed.

As noted previously, it would also be worth exploring whether collective stressors—of which suicide is only one—are the reason members are taking time off at a higher mean rate.

**Awareness and Perceived Helpfulness of Programs/Services**

High levels of perceived helpfulness for some programs suggest an opportunity for promotion to increase awareness. Findings suggest that many of the programs that members report accessing and finding most helpful are also the same programs very few members are aware exist:

- Chaplaincy Program: 92% of those who have used it consider it helpful but 41% of members not aware of the program;

- Trauma Clinician: 91% of those who have used it consider it helpful but 63% of members not aware of the program;

- Community Referral List: 87% of those who have
used it consider it helpful but 47% of members not aware of the program;

• Peer Assistance and Resource Team (PART): 81% of those who have used it consider it helpful but 38% of members not aware of the program; and

• Project Safeguard: 62% of those who have used it consider it helpful but 67% of members not aware of the program.

There is relatively high awareness and usage of the following programs, but perceived usefulness is low relative to other programs:

• EFAP - External Provider: this is the most used program (38% have used it) but only 65% of this group found it useful; and

• Wellness Checks: one of the most used programs relative to other programs (22% have used it) but only 44% of this group found it useful.

Reasons for not using a given program among those indicating they were aware of it included 'no need' (range of 51% - 77% among programs) and 'preferred to manage myself' (range of 9% - 32%).

Suggestions for Improving the Workplace Culture

Members were asked to provide recommendations to improve their local bureau/detachment workplace culture as well as workplace culture within the OPP organization-wide. The top comments for improving the workplace culture related to:

• Wanting ‘more professionalism, accountability, respect, leadership from all’; and

• ‘Better promotion and hiring processes’.

Members were also asked what they felt were the OPP’s greatest strengths; 36%, or 2,165 participants, provided a response. The strength most frequently mentioned was the people who work for the OPP (16% of those who provided a response). Other responses included: inclusion of under-represented groups, diversity (7%); support from peers and supervisors (7%); team environment (6%); ability in crisis situations/addressing issues (6%); and resources available to help members (5%). However, 9% of members responding to this question claimed that the OPP has no strengths.

1.3 Considerations for the future

Based on the results of the OPP Workplace Culture Survey, the following are identified as areas to consider exploring:

• The implementation of OPP policies and procedures with respect to disciplinary practices as well as hiring and promotional processes may require review to ensure they are being implemented fairly.

• 45% of members feel that they would not be supported by supervisors/managers if they experienced a mental health challenge and were open about it in the workplace. Identifying the reasons for these concerns, and what steps can be taken to address them, may be required.

• Frequent bullying, discrimination, harassment and feelings of rejection in the workplace appear to contribute to a high number of workdays missed, which underscores the importance of identifying strategies for reducing these experiences.

• Two of the most frequently used programs (Wellness Checks and EFAP - External Provider) are perceived as less helpful than other programs, which suggests that it may be helpful to explore what members find most useful and least useful about these programs.

• Low awareness of the programs that are perceived as most helpful suggests additional promotion of these programs may be required (i.e., Chaplaincy Program, Trauma Clinician, Community Referral List, PART).

• Members experience frequent stress due to staff shortages/resource pressures, and to the impact of work on their social lives. If existing programs address work/life balance, additional promotion of these programs may be required. Alternatively, if no such programs exist to addresses these issues, offering this support may help reduce stress.
SECTION 2: SURVEY INSTRUMENT

OPP WORKPLACE CULTURE SURVEY

Survey Introduction

Your opinion matters!

We want to hear from every member of the OPP so that the results of this survey accurately reflect the workplace culture across all regions, bureaus and at all levels of the organization.

Why is the Independent Review Panel conducting this study?

The Independent Review Panel, in partnership with the consulting firm R.A. Malatest and Associates Ltd., is seeking feedback to help improve the working lives of the uniform, civilian and auxiliary members of the Ontario Provincial Police (OPP). This survey will create an opportunity for the panel to hear first-hand from current and recently retired members on what is positive about the workplace culture within the OPP, and ways the OPP can do better.

You can read Order in Council 643/2019 for more information and terms of reference for this review.

Who can participate?

All current and retired OPP members are eligible to participate. If you are an active, retired, uniform, civilian, auxiliary, manager, or an individual contributor member, we want to hear from you.

First Nations Police Officers are not in scope for this survey as the Independent Review Panel will be engaging them in other ways.

When can I participate?

The survey is open from July 2 to 23, 2019.

How long will it take to complete the survey?

The survey will take approximately 20-25 minutes to complete, depending on your responses. You can exit and re-access the survey any time. When you return to the survey, you can pick up where you left off, and will remain fully confidential and de-identified.
NOTICE OF COLLECTION

Personal information collected from this questionnaire is voluntary.

Results will only be viewed by designated researchers through a third party (R.A. Malatest & Associates Ltd) that has been commissioned to conduct the survey anonymously. All tracking features that could link survey responses to an email or I.P. address have been removed.

Malatest will use this information to provide a summary and analysis of survey results to the Independent Review Panel to assist them with making recommendations to the OPP with regards to workplace culture and mental health resources and training.

Summaries will only be provided for units where more than 20 people have responded.

For additional information, you can view Malatest’s privacy policy at:


Note about the survey

Current members:

Depending on the question, please answer based on your overall experiences with the OPP or based on your current position or rank (not your home position, if acting out).

Retirees:

Depending on the question, please answer based on your overall experiences with the OPP or based on the position that you retired from. If you have retired and returned to work, please answer as a current member rather than retiree.
DEMOGRAPHICS

The following demographic questions will be used to group members’ responses so that results can be reported in aggregate while enabling the panel to identify potential themes, common concerns and trends across different groups. You will never be personally identified in our report, and your feedback will remain completely anonymous.

1. Are you an active member or retired?
   a. Active member
   b. Retired member
   c. I prefer not to answer this question

2. Which of the following best describes your length of service with the OPP?
   a. Less than 1 year
   b. 1 to 5 years
   c. 6 to 10 years
   d. 11 to 15 years
   e. 16 to 20 years
   f. 21 to 25 years
   g. 26 to 30 years
   h. More than 30 years
   i. I prefer not to answer this question

IF ‘RETIRED’ AT Q1, ASK:
2b) You indicated that you are a retired member. How long ago did you retire from the service?
   a. Less than 1 year
   b. 1 to 3 years
   c. 4 to 6 years
   d. 7 to 10 years
   e. 10 to 15 years
   f. 15 to 20 years
   g. More than 20 years
   h. I prefer not to answer this question

3. Are you currently a uniform, civilian, or auxiliary member? (If retired, which were you when active?)
   a. Uniform
   b. Civilian
   c. Auxiliary
   d. I prefer not to answer this question
[IF UNIFORM OR AUXILIARY]
4. What is your rank (or the rank from which you retired)?
   a. Constable
   b. Sergeant
   c. Staff Sergeant and Sergeants Major
   d. Commissioned Officer
   e. I prefer not to answer this question

[IF CIVILIAN]
5. What level of management do you work at (or did you retire from)?
   a. No direct reports
   b. Team Leader/Supervisor
   c. Manager and above
   d. I prefer not to answer this question

6. Which Command/Bureau do you currently work in (or retired from)?
   a. Corporate Services
   b. Traffic Safety and Operational Support
   c. Investigations and Organized Crime
   d. Field Operations
   e. Corporate Communications and Strategy Management Bureau
   f. I prefer not to answer this question

[DEPENDING ON SELECTION, DROPDOWN WILL POPULATE]
[ASK IF Q6≠ “Corporate Communications and Strategy Management Bureau”]
IF Q6 = “Field Operations” ASK: Please select the bureau/detachment that you work in/retired from:

7. ALL OTHER RESPONSES AT Q8 ASK: Please select the bureau/division that you work in/retired from:

8. What is your current lived gender identity? (Select all that apply)
   a. Man
   b. Woman
   c. Non-binary
   d. Transgender
   e. Two-Spirit
   f. I do not identify with the above
   g. I prefer not to answer this question
9. In our society, people are often described by their race or racial background. For example, some people are considered “White” or “Black” or “East/Southeast Asian,” etc. Which category best describes you? (Select all that apply)

a. Black (e.g., African, Afro-Caribbean, African-Canadian descent)
b. East / Southeast Asian (e.g., Chinese, Korean, Japanese, Taiwanese descent, Filipino, Vietnamese, Cambodian, Thai, Indonesian, other Southeast Asian descent)
c. Indigenous (e.g., First Nations, Métis, Inuit descent)
d. Latino/Latina/Latinx (e.g., Latin American, Hispanic descent)
e. Middle Eastern (e.g., Arab, Persian, West Asian descent, e.g. Afghan, Egyptian, Iranian, Lebanese, Turkish, Kurdish, etc.)
f. South Asian (e.g., East Indian, Pakistani, Bangladeshi, Sri Lankan, Indo-Caribbean)
g. White (e.g., European descent)
h. Another race category not described above
i. I prefer not to answer this question

OPP ORGANIZATIONAL CULTURE

The following questions will help us understand how you view the current culture within the OPP as an organization, and more locally, within your bureau/detachment (or the bureau/detachment you worked in before you retired). Your responses will only be reported in aggregation with other active/retired OPP members.

The following question is about the OPP as an organization:

10. Please indicate the extent to which the word or phrase within each pair below describes your experience of the culture within the OPP as an organization. The closer the box is to the word/phrase you select, the more you feel that it describes the culture.

RANDOMIZE LIST OF PAIRS

<table>
<thead>
<tr>
<th>Cohesive</th>
<th>Siloed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trusting</td>
<td>Suspicious</td>
</tr>
<tr>
<td>Democratic</td>
<td>Hierarchical</td>
</tr>
<tr>
<td>Transparent</td>
<td>Secreteive</td>
</tr>
<tr>
<td>Inclusive (values differences)</td>
<td>Discriminatory</td>
</tr>
<tr>
<td>Impartial</td>
<td>Biased</td>
</tr>
<tr>
<td>Respectful</td>
<td>Offensive</td>
</tr>
<tr>
<td>Diverse</td>
<td>Everyone is the same</td>
</tr>
</tbody>
</table>
The following question is about your bureau/detachment:

11. To what extent does the word or phrase within each pair below describe the culture within your bureau/detachment? The closer the box is to the word you select, the more you feel that it describes the culture. [SHOW Q11 LIST OF PAIRS] RANDOMIZE LIST OF PAIRS

The following question is about the OPP as an organization:

12. To what extent do you agree or disagree that each of the following describes the OPP as an organization?

<table>
<thead>
<tr>
<th>RANDOMIZE LIST</th>
<th>Strongly disagree</th>
<th>Somewhat disagree</th>
<th>Neutral</th>
<th>Somewhat agree</th>
<th>Strongly agree</th>
<th>Prefer not to answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trust exists between those in supervisory and non-supervisory positions</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Management creates an environment in which members are free to express their opinion without fear of reprisal</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Is respectful towards, and inclusive of, members in underrepresented groups</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Is respectful towards, and inclusive of, members with mental health disabilities</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Is respectful towards, and inclusive of, members with physical disabilities</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Applies disciplinary processes in the same way, regardless of rank, gender, race, etc</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Employs fair and equitable hiring practices</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Employs a fair and equitable promotional process</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

The following question is about your bureau/detachment:

13. To what extent do you agree or disagree that each of the following describes your bureau / detachment. [SHOW Q13 LIST]
14. Within the past year, how often have you personally experienced each of the following?

MOUSEOVER DEFINITION FOR BULLYING: Bullying is a form of aggression where there is a power imbalance; the person doing the bullying has power over the person being victimized. Types of bullying can include: Physical bullying: using physical force or aggression against another person; Verbal bullying: using words to verbally attack someone; Social/relational bullying: trying to hurt someone through excluding them, spreading rumours or ignoring them; Cyberbullying: using electronic media to threaten, embarrass, intimidate, or exclude someone, or to damage their reputation.

MOUSEOVER DEFINITION FOR HARASSMENT: Workplace harassment: a course of vexatious comment or conduct against an employee or other worker in the workplace that is known or ought reasonably to be known to be unwelcome.

MOUSEOVER DEFINITION FOR DISCRIMINATION: Discrimination: any practice or behavior, whether intentional or not, which has a negative impact on an individual or group based on one or more of the prohibited grounds of discrimination.

<table>
<thead>
<tr>
<th>Bullying in the workplace</th>
<th>Never</th>
<th>Rarely (once or twice/year)</th>
<th>Sometimes (multiple times/year)</th>
<th>Often (monthly)</th>
<th>Very often (weekly)</th>
<th>Constantly</th>
<th>Prefer not to answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Harassment in the workplace</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Harassment from members of the public</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discrimination in the workplace</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discrimination from members of the public</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Feeling excluded or rejected by colleagues/superiors</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

[IF ANY VALID RESPONSE OTHER THAN “NEVER” AT Q15, ASK]

15. You indicated that you experienced [INSERT Q15 RESPONSE CATEGORY] within the past year. Did you report this experience to someone in a position of authority?

   a. Yes
   b. No
   c. I prefer not to answer this question
[AFTER EACH RESPONSE OF “NO” AT Q16, IMMEDIATELY ASK]

16. Can you tell us why not? (Please select all that apply)
   a. Concerns about reprisal
   b. Concerns that nothing would be done
   c. Concerns about others’ perceptions if they found out
   d. Concerns that it would impact my opportunities for advancement
   e. Concerns that it would impact my reputation
   f. Concerns that it would jeopardize my job
   g. I was able to achieve satisfactory resolution without reporting it
   h. It didn’t impact me
   i. Other (please specify)
   j. I prefer not to answer this question

17. Over the past year, how often have you experienced feelings of stress from each of the following:

<table>
<thead>
<tr>
<th>RANDOMIZE LIST</th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Most of the time</th>
<th>All the time</th>
<th>Prefer not to answer</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Workload</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Administrative duties/ paperwork</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Constant changes in legislation/policy</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Staff shortages/res resource pressures</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Bureaucratic red tape</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Lack of training</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Duties related to the court system</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>
18. If you experienced a mental health challenge and were open about it in your workplace, to what extent did/do you feel supported by:

<table>
<thead>
<tr>
<th>RANDOMIZE LIST</th>
<th>Not at all supported</th>
<th>Not very supported</th>
<th>Somewhat supported</th>
<th>Very supported</th>
<th>Completely supported</th>
<th>Prefer not to answer</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colleagues/Supervisors</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>managers</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

**INTERACTION WITH THE COMMUNITY/PUBLIC**

Many roles in policing spend a great deal of time interacting with the public. The following questions will help us understand whether these professional interactions cause stress and the nature in which they may impact your interactions with friends, family, and the community when you are not working. If you are retired, please answer based on your reflections of what it was like.

19. Over the past year, how often have you experienced feelings of stress from each of the following:

**MOUSE-OVER FOR ROLE BLURRING:** For the purposes of this survey, role-blurring refers to having trouble switching from the role you assume while at work (e.g., as a police officer) to the role you assume when you are not at work (e.g., as a parent/spouse/friend).

<table>
<thead>
<tr>
<th>RANDOMIZE LIST</th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Most of the time</th>
<th>All the time</th>
<th>Prefer not to answer</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Upholding a “higher image” in public</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Negative comments from members of the general public</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Negative portrayal of the OPP by the media</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Role blurring (role when on-duty and role when off-duty)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Managing social life outside of work</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Making friends outside the job</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Pressures work puts on romantic relationships</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Not enough time available to spend with friends and family</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Lack of understanding from friends and family about your work</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>
MENTAL HEALTH: PROGRAMMING & SUPPORT

The following questions will help us understand the extent to which active/retired OPP members are using the programs and supports currently available, and the perceived helpfulness of these supports. Results will be used to help assess and potentially modify the supports available, how supports are delivered and accessed, and identify any new supports that might be required.

20. In general, how do you prefer to access the programs and services you need?
   a. Prefer to access OPP programs and services
   b. Prefer to access programs through external channels
   c. I prefer not to answer this question

21. Which of the following support programs that address issues relating to mental health are you aware of?

<table>
<thead>
<tr>
<th>Program</th>
<th>Not aware</th>
<th>Aware, not used</th>
<th>Aware, have used</th>
<th>Prefer not to answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Critical Incident Stress Response/Peer Support (CISR/PS) Team</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Post-Critical Incident Check Program</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Peer Assistance and Resource Team (PART)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employee/Family Liaisons</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fitness/Wellness Liaisons</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employee and Family Assistance Program (EFAP – External Provider)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community Referral List</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trauma Clinician</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chaplaincy</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wellness Checks</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
OPPA Administered Psychological Benefits
Not aware □ Aware, not used □ Aware, have used □ Prefer not to answer □
Project Safeguard □ □ □ □

[FOR EACH SUPPORT “AWARE NOT USED” AT Q22, ASK]

22. You indicated that you are aware of [INSERT FIRST SELECTION] but have not used it. Could you tell us why? (Please select all that apply)
a. No need
b. Preferred to manage myself
c. Consulted family physician or other private clinician
d. Rely on family and friends
e. Rely on faith and spirituality
f. Did not know where to go for information
g. Have not gotten around to it
h. Schedule challenges
i. Help was not readily available
j. Do not have confidence in the support available
k. Cannot afford additional fees/insurance will not cover it (if applicable)
l. Afraid of what others would think if they found out
m. Confidentiality concerns
n. Not comfortable talking about it
o. Distance to services was a barrier
p. Other (Please specify):
q. I prefer not to answer this question

[FOR EACH “AWARE USED” AT Q22, ASK]

23. What do you think of the following program(s) (If you have accessed this program more than once, please refer to the most recent experience)?

[SHOW LIST OF “AWARE, USED”] □ □ □ □ □ □ □ □

24. If you think there are gaps in the supports or resources that are currently available, please tell us what additional supports or resources you think should be made available to current and/or retired members.

I prefer not to answer the question □
MENTAL HEALTH: PERSONAL

The following questions will help us understand how your job and work environment impact you. Results will be used to identify ‘pressure points’ related to your work and/or the environment in which you work.

25. Please indicate the extent to which the word or phrase within each pair below describes how you feel in your work environment. The closer you get to that word/phrase, the more it describes how you feel.

RANDOMIZE LIST OF PAIRS AND INCLUDE “I prefer not to answer this question” AFTER EACH PAIR

- Safe
- Vulnerable
- Calm
- Anxious
- Supported
- Unsupported
- Empowered
- Disempowered
- Valued
- Devalued
- Part of the team
- Isolated

26. Over the past year, how often have you experienced feelings of stress as a result of each of the following:

RANDOMIZE LIST

<table>
<thead>
<tr>
<th></th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Most of the time</th>
<th>All the time</th>
<th>Prefer not to answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interacting with coworkers</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Interacting with supervisors</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Proving yourself to the organization</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Co-workers are unsupportive/critical when you are sick or injured</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>A workplace incident you experienced or witnessed</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Risk of injury/risk to personal safety on the job</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Overtime demands</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Feeling pressure to volunteer free time</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Feeling that different rules apply to different people</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Finding time to stay fit/ eat healthy</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>
27. Over the past year, approximately how many days of work in total have you missed as a result of stress, anxiety, depression or any other symptom related to the work stressors you indicated experiencing in the previous survey questions? Please do not indicate the number of days missed as a result of other, non-work related stressors.

Enter # of days ___________  Prefer not to answer ☐

28. A part of the mandate of the IRP is to make recommendations on potential remedial actions to address the impact of suicides on OPP members and work culture. Have you been emotionally impacted by the suicide of an OPP member? (Select all that apply)

a. Yes, through a close colleague
b. Yes, through a colleague
c. Yes, through someone in the OPP community
d. No
e. I prefer not to answer this question

[IF YES AT Q29] [Ask for each Yes selected]

29. What emotional impact did [IF “Yes, through a close colleague”: the suicide of a close colleague; IF “Yes, through a colleague”: the suicide of a colleague; IF “Yes, through someone in the OPP community”: the suicide of someone in the OPP community] have on you? The closer you get to the word, the more it describes the extent to which you were emotionally impacted.

No emotional impact ☐ ☐ ☐ ☐ ☐ ☐ ☐ Extreme emotional impact

I prefer not to answer the question ☐

30. Did you access supports for this?

a. Yes
b. No
c. I prefer not to answer this question

[IF NO AT Q30]

31. Can you explain why you didn’t access resources? (Please select all that apply)

a. No need
b. Preferred to manage myself
c. Consulted family physician or other private clinician
d. Relied on family and friends
e. Relied on faith and spirituality
f. Did not know where to go for information
g. Have not gotten around to it
h. Schedule challenges
i. Help was not readily available
j. Do not have confidence in the support available
k. Cannot afford additional fees/insurance won’t cover it (if applicable)
l. Afraid of what others would think if they found out
m. Confidentiality concerns
n. Not comfortable talking about it
o. Distance to services was a barrier
p. Other (please specify) ______________
q. I prefer not to answer this question

ADDITIONAL FEEDBACK

32. Do you have any recommendations to improve the workplace culture within the OPP:
a. Organization-wide? If you prefer not to answer, please leave blank
b. Within your local bureau/detachment? If you prefer not to answer, please leave blank

33. What do you think is the OPP’s greatest strength with respect to workplace culture and what suggestions do you have for strengthening or promoting these positive elements within the OPP?

34. Is there anything else you would like to tell us? If you prefer not to answer, please leave blank
Appendix D: Independent Review Panel Activities

Internal briefings:

**Ontario Provincial Police Command leadership:**
- Corporate Services
- Traffic Safety and Operational Support
- Investigations and Organized Crime
- Field Operations

**Regional Command leadership:**
- North West Region (Kenora, Ontario)
- West Region (London, Ontario)
- North East Region (North Bay, Ontario)
- East Region (Smiths Falls, Ontario)

**Dedicated presentations relating to:**
- OPP Mental Health Review
- OPP Suicide Review: A Review of OPP Member Suicide Deaths from 2012 to 2018
- Mobile Crisis Response pilots, including:
  - IMPACT (Integrated Mobile Police and Crisis Team) – Wellington County
- Strategic Change Member Wellness Project (Essex and Wellington Counties)
- Lanark County OPP/Lanark County Mental Health partnership

**Other internal briefings:**
- Diversity & Inclusion Initiatives
- Office of the Commissioner
- Professional Standards Bureau
- Provincial Police Academy
- Uniform Recruitment
- Wellness Unit

**OPP Member and Family Engagements:**
Confidential and anonymous survey open to all current and retired OPP members, July 2 – 23, 2019
Dedicated email address (inquiries@opp-irp.ca), accepting questions and submissions from OPP members and the public from July 1 – December 31, 2019
Roundtables open to OPP members in each geographic region:
- June 25, 2019: North West Region (Kenora, Ontario)
- July 12, 2019: Central Region (Orillia, Ontario)
- July 31, 2019: West Region (London, Ontario)
- August 19, 2019: North East Region (North Bay, Ontario)
- August 28, 2019: East Region (Smiths Falls, Ontario)

Interviews with:
- Families of OPP members who died by suicide
- Individual current and former OPP members

Other Stakeholder Engagements and Outreach:
- Ontario Provincial Police Association (OPPA)
- Commissioned Officers Association (COA)
- Civilian Association of Managers and Specialists (CAMS)
- Ontario Police College
- Toronto Police Services – People & Culture Unit
- Chiefs of police, First Nations Police Services
- Ontario Association of Police Services Boards (OAPSB)
- Ontario Ombudsman, Paul Dubé
- André Marin, former ombudsman of Ontario
- Health care leaders from Windsor, Ontario, representing a cross-section of nursing, social work, community mental health, physicians, security, psychiatry, inpatient mental health, Emergency services (EMS), health and safety and workplace violence advocates


Endnotes


7. OPP website

8. OPP website


11. Survey, p11

12. Survey p10

13. Survey, p11

14. Survey, p11

15. Survey, p12

16. Survey, p10

17. Survey, p11

18. Survey, p12

19. OPP Website


21. Victoria AU Review, p34

22. C. Shann, A. Chester, A. Martin, S. Ruddock (2019) Effectiveness and Application of an Online Leadership Intervention to Promote Mental Health and Reduce Depression-Related Stigma in


26. Survey, p13


28. Mental Health Review, p52

29. Survey, p13

30. Victoria AU Review, p34

31. Victoria AU Review, p38

32. Mental Health Review, p49-51

33. OPP Suicide Review, Recommendation 20, p50

34. The Panel appreciates the submission from the Pembroke Police Services Board, September 5, 2019

35. OPP Suicide Review, p42 from CACP 2018 PTSF Fact Sheet

36. See for example the Ontario Public Service Directives: Employment Policy

37. Mental Health Review, p27

38. OPP Suicide Review, Recommendation 19, p50

39. OPP Suicide Review, p32


42. OPP Suicide Review, Recommendation 7, p49


44. Mental Health Review, p46
45. See for example Chief Coroner’s Expert Panel Report
46. Mental Health Review, p46
47. See for example OPP Suicide Review, Recommendation 12, p49
48. Victoria AU Review, p58
49. Survey, p23
50. OPP Suicide Review, Recommendation 13, p50
51. Mental Health Review, p13
52. Mental Health Review, p48
53. OPP Suicide Review, Recommendation 4, p48
55. OPP Suicide Review, Recommendation 5, p48
56. Mental Health Review, p17 and OPP Suicide Review, p40
57. Survey, p13
58. Mental Health Review, p24
59. OPP Suicide Review, Recommendation 21, p51
60. Mental Health Review, p36
62. Mental Health Review, p36
63. Mental Health Review, p36-40 and OPP Suicide Review, p38-39
64. Chief Coroner’s Expert Panel Report, p15
65. Mental Health Review, p38
66. Mental Health Review, p38
67. OPP Suicide Review, Recommendation 18, p50 and PERF Recommended Action 5, p38
68. Survey, p12
69. OPP Suicide Review, Recommendation 14, p50
70. OPP Suicide Review, Recommendation 14, p50 and PERF Recommended Action 10, p52
71. OPP Suicide Review, Recommendation 15, p50, and PERF Recommendation Action 9, p51
72. OPP Suicide Review, Recommendation 16, p50
73. Survey, p11
74. See also findings in Mental Health Review and OPP Suicide Review
75. See for example Dewa
76. Survey, p10
77. See for example Mental Health Review, p8
78. Survey, p23
79. Figures regarding “missed days” of work due to stress or any other factor have been estimated and self-reported by respondents. These figures have not been checked against workforce data and/or the OPP’s attendance tracking database and may include days a member has taken off
but not identified as sick-time, such as vacation or other leave of absence.

80. Absenteeism is based on self-reported estimates. While respondents were asked to report the number of work days missed due to work stressors, respondents may have also included days missed due to vacation, short-term sickness plan credits, etc.