

## Chapter 9

# Corrections, Policing and Public Safety—Supporting the Mental Health of Correctional Workers

### 1.0 MAIN POINTS

Correctional facility work environments are stressful by nature. Prolonged exposure to high-stress environments (e.g., inmates with infectious diseases or mental illness, gang violence, aggressive behaviour) such as in correctional facilities can lead to burnout, anxiety, and depression.

The Ministry of Corrections, Policing and Public Safety operates five adult secure-custody facilities in Saskatchewan that house adult inmates sentenced under the Criminal Code of Canada for a term of less than two years, or inmates on remand. As of February 2025, the Ministry employed about 1,400 correctional workers at these facilities, including correctional officers and managers who work shifts to operate the facilities 24/7.

We assessed the Ministry of Corrections, Policing and Public Safety's processes to support the mental health of correctional workers employed at its adult secure-custody facilities and found it had effective processes, except it needs to:

- Provide clear guidance as to when to deploy its Critical Incident Stress Management (CISM) teams at its correctional facilities to support its workers experiencing mental health issues. It also needs to consistently track, analyze, and report on CISM usage to assess effectiveness.

Without proper analysis and clear guidance on when to support correctional workers involved in critical incidents with CISM, certain workers may not receive the assistance needed to support their mental health after a critical incident.

- Establish clear expectations and agreed upon plans for contacting correctional workers on mental health leaves of absence to better support those on leave in improving their mental health, and returning to work.
- Set, track, and analyze specific information (e.g., performance measures and targets, mental health injury data) to assess the effectiveness of its mental health supports for correctional workers and take action when needed. For example, analyzing workers' compensation claims or sick leave can be used to assess whether correctional workers are receiving adequate mental health supports.
- Enhance the staff surveys it uses to evaluate the mental health supports it provides to correctional workers, such as obtaining written comments from correctional workers.



## 2.0 INTRODUCTION

The Ministry of Corrections, Policing and Public Safety provides supervision and rehabilitation services for adult and young offenders, promotes appropriate and effective policing, and supports community and public safety services throughout Saskatchewan.<sup>1</sup> It also delivers programs and services to help ensure safe communities, safe facilities, and a safe and engaged workforce.<sup>2</sup>

*The Saskatchewan Employment Act* and *The Occupational Health and Safety Regulations, 2020*, require the Ministry to protect the physical and mental health and safety of its staff, including correctional workers.

### 2.1 Adult Secure-Custody Facilities

The Ministry of Corrections, Policing and Public Safety operates five adult secure-custody facilities in the province. These correctional facilities house adult inmates sentenced under the Criminal Code of Canada for a term of less than two years, or inmates on remand (lawfully detained or confined and awaiting trial or sentencing by the courts). As at February 6, 2025, Saskatchewan had 2,211 inmates in these correctional facilities.

As shown in **Figure 1**, as of February 2025, the Ministry employed about 1,400 correctional workers at its five adult secure-custody facilities across the province, including correctional officers and managers who work shifts to operate the facilities 24/7.

**Figure 1—Correctional Worker Count as at February 6, 2025, at Saskatchewan’s Adult Secure-Custody Facilities**

Correctional Facility	Correctional Workers Per Facility				
	Correctional Officers (CO)			Managers <sup>A</sup>	Total by Facility
	Permanent Full-Time	Permanent Part-Time	Total COs by Facility	Permanent Full-Time	
Pine Grove Correctional Centre	159	26	185	12	197
Prince Albert Correctional Centre	279	36	315	17	332
Regina Correctional Centre	313	75	388	18	406
Saskatoon Correctional Centre	298	74	372	18	390
Saskatchewan Hospital North Battleford	60	12	72	6	78
<b>Total</b>	<b>1,109</b>	<b>223</b>	<b>1,332</b>	<b>71</b>	<b>1,403</b>

Source: Information provided by the Ministry of Corrections, Policing and Public Safety.

<sup>A</sup> Assistant Deputy Directors of Operations (ADDOS), Assistant Deputy Directors of Programs (ADDPs) and Deputy Directors (DDs).

Correctional officers work to keep facilities and inmates safe through monitoring, supervising, and interacting with inmates, such as ensuring inmates follow routines dictated by their individual case plans (e.g., inmates kept in units or blocks based on their security rating, inmates attend required programs). Correctional managers are responsible for the safety and security of inmates, staff, and facilities, including continuously monitoring, reviewing, and updating, where needed, inmate placements in units or blocks.

<sup>1</sup> Ministry of Corrections, Policing and Public Safety 2024–2025 Annual Report, p. 3.

<sup>2</sup> Ibid.

## 2.2 Importance of Mental Health Support for Correctional Workers

Correctional work environments are stressful by nature. Correctional workers experiencing distress or trauma in the line of duty can face disabling after-effects that, left unchecked, can lead to other health issues (e.g., depression, substance abuse, hypertension) or suicide.<sup>3,4</sup>

A Canadian study found that rates of mental disorders (e.g., post-traumatic stress disorder [PTSD], generalized anxiety disorder, panic disorder, social anxiety disorder) among public safety personnel, including correctional workers, correlated with the number of exposures to potentially psychologically traumatic events (those resulting in violence, injury, or death).<sup>5,6</sup> Prolonged exposure to high-stress environments (e.g., inmates with infectious diseases or mental illness, gang violence, aggressive behaviour) such as in correctional facilities can lead to burnout, anxiety, depression, and PTSD.

Correctional workers seeking treatment for mental health concerns may be associated with negative perceptions such as laziness, weakness, deceitfulness, or not suited for the position.<sup>7</sup> Stigma around the treatment of mental health concerns and other barriers can lead to undiagnosed conditions and staff experiencing symptoms longer and more severely.<sup>8</sup>

Research indicates that perceptions of organizational support (e.g., how staff perceive management and available supports) can have a positive impact on the wellbeing of correctional workers.<sup>9</sup> If correctional workers do not feel supported by their managers and organization, they may experience increased job stress, burnout, or may leave the profession, ultimately leading to staff shortages. Turnover can create additional stress on remaining staff (e.g., overtime, irregular hours).

Stress experienced by correctional workers can also affect their personal lives. Long hours and demanding work schedules may lead to lack of time to fulfill family responsibilities. Workers may come home tense, irritable, or even in shock from daily experiences at work, which can negatively affect their personal relationships.<sup>10</sup> Providing appropriate and timely mental health interventions lessen the impact on correctional workers and aid in reducing stress. Intervention also helps organizations, as it can facilitate the recovery of a worker's performance and can decrease the likelihood of long-term disability leave or absence.<sup>11</sup>

Having effective processes to support the mental health of correctional workers help maintain a healthy workforce to ensure correctional workers can carry out their duties effectively and mitigate the impact of stress on their health and personal relationships. Supporting the mental health of correctional workers contributes to a safe and engaged workforce, safe facilities, and safe communities.

<sup>3</sup> [www.blueline.ca/compiling-the-data-on-correctional-officer-suicide-rates-in-canada/](http://www.blueline.ca/compiling-the-data-on-correctional-officer-suicide-rates-in-canada/) (10 October 2025)

<sup>4</sup> [www.intechopen.com/chapters/84620](http://www.intechopen.com/chapters/84620) (10 October 2025).

<sup>5</sup> R. N. Carleton et al. (2019). Exposures to Potentially Traumatic Events Among Public Safety Personnel in Canada. *Canadian Journal of Behavioural Science / Revue canadienne des sciences du comportement*, Vol. 51. No. 1, 37–52. [www.researchgate.net/publication/329550261ExposurestoPotentiallyTraumaticEventsAmongPublicSafetyPersonnelinCanada](https://www.researchgate.net/publication/329550261ExposurestoPotentiallyTraumaticEventsAmongPublicSafetyPersonnelinCanada) (9 December 2024).

<sup>6</sup> [www.intechopen.com/chapters/84620](http://www.intechopen.com/chapters/84620) (9 December 2024).

<sup>7</sup> Johnston, M. S., Ricciardelli, R., & McKendy, L. (2022). Improving the Mental Health of Correctional Workers: Perspectives from the Field. *Criminal Justice and Behavior*, 49(7), 951–970. [doi.org/10.1177/00938548221081468](https://doi.org/10.1177/00938548221081468) (10 October 2025).

<sup>8</sup> Ibid.

<sup>9</sup> Ibid.

<sup>10</sup> McKendy, L., & Ricciardelli, R. (2023). "This Job has Changed Me": Work Life Conflict, Self and Social Identity in Correctional Work. *Criminal Justice Review*, 48(4), 458–473. [doi.org/10.1177/07340168221121314](https://doi.org/10.1177/07340168221121314) (10 October 2025).

<sup>11</sup> [www.blueline.ca/compiling-the-data-on-correctional-officer-suicide-rates-in-canada/](http://www.blueline.ca/compiling-the-data-on-correctional-officer-suicide-rates-in-canada/) (10 October 2025).



## 3.0 AUDIT CONCLUSION

We concluded that for the 18-month period ended June 30, 2025, the Ministry of Corrections, Policing and Public Safety had effective processes to support the mental health of correctional workers employed at its adult secure-custody facilities.

The Ministry of Corrections, Policing and Public Safety needs to:

- Provide clear guidance as to when to deploy its Critical Incident Stress Management program and consistently track, analyze, and report on its usage
- Enhance the staff survey it uses to assess the effectiveness of mental health supports provided to correctional workers
- Establish clear expectations for contacting correctional workers on mental health leave
- Analyze key information to assess the effectiveness of its mental health supports

Figure 2—Audit Objective, Criteria, and Approach

**Audit Objective:**

To assess whether the Ministry of Corrections, Policing and Public Safety has effective processes for the period ending June 30, 2025, to support the mental health of correctional workers employed at its adult secure-custody facilities.

Correctional workers include correctional officers and correctional facility managers (e.g., Assistant Deputy Directors – Programs, Assistant Deputy Directors – Operations and Deputy Directors).

**Audit Criteria:**

Processes to:

1. **Plan for timely mental health support (i.e., intervention services for correctional workers based on their needs)**
  - Raise awareness of mental health symptoms, disorders and the supports available
  - Allocate appropriate resources (e.g., human, financial)
  - Timely identification of correctional workers needing mental health supports
2. **Respond to correctional workers with mental health needs in a timely manner**
  - Establish standard procedures for responding timely to identified concerns
  - Provide timely access to mental health support (internal and external)
  - Provide appropriate ongoing support (e.g., periodic check-ins, peer support programs)
3. **Periodically assess the effectiveness of mental health services for correctional workers**
  - Analyze key information related to intervention services (e.g., number of correctional workers with mental health concerns, timeliness of support provided, absenteeism rates)
  - Take action to address where performance falls short of targets
  - Report key information to senior management

**Audit Approach:**

To conduct this audit, we followed the standards for assurance engagements published in the *CPA Canada Handbook—Assurance* (CSAE 3001). To evaluate the Ministry of Corrections, Policing and Public Safety's processes, we used the above criteria based on our related work, review of relevant literature including reports of other auditors, and consultation with management. Ministry management agreed with the above criteria.

We examined the Ministry's policies and procedures, training, websites, and other key documents related to supporting the mental health of correctional workers employed at its adult secure-custody facilities. We interviewed Ministry staff responsible for providing mental health supports and we tested a sample of incident files to assess mental health supports provided to correctional workers. In addition, we used an independent consultant with subject matter expertise in the area to help us identify good practice and assess Ministry processes.

## 4.0 KEY FINDINGS AND RECOMMENDATIONS

### 4.1 Raising Mental Health Awareness Among Correctional Workers

The Ministry of Corrections, Policing, and Public Safety adequately raises awareness of mental illness symptoms, disorders, and available supports among its correctional workers.

The Ministry uses various methods to educate and inform correctional workers about mental health such as:

- Online resources on its internal website such as links to relevant policies (e.g., policies about Critical Incident Stress Management, Prevention of Violence in the Workplace) and external mental health supports (e.g., Employee Family Assistance Program [EFAP], PSPNET, crisis support hotlines like the National Suicide Hotline and 211 Saskatchewan).<sup>12,13</sup>
- Email campaigns (e.g., information on the National Standard for Psychological Health and Safety in the Workplace, factors that can impact the mental health of employees).<sup>14</sup>
- Mandatory mental health training, which is part of introductory training for new correctional workers. Beginning in September 2021, the Ministry also delivered *The Working Minds First Responders Training* to those correctional workers already on the job when it implemented mandatory mental health training. It also provides additional training to supervisors on how to identify and support correctional workers with mental health issues.
- Occupational Health and Safety staff who work to identify and mitigate safety risks to correctional workers, and inform and educate them about mental health (e.g., an OH&S Consultant assigned to each correctional facility conducts weekly tours and provides guidance to facility management on how to address mental health-related incidents).
- An OH&S Committee made up of employee and employer representatives meets quarterly at each facility, reviews incident (injury) information about the types and frequency of incidents reported at the correctional facility, and maintains bulletin boards of health, safety and wellness information including mental health resources.

We reviewed information provided to correctional workers through these methods and found it sufficiently targeted the working environment stressors, mental health risks (e.g., exposure to violence, shift work, trauma) faced by correctional workers, and mental health supports available.

<sup>12</sup> The Employee Family Assistance Program (EFAP) is available to executive government employees (which includes correctional workers) and their eligible family members to provide personal health and wellbeing support. *Employee and Family Assistance Program (EFAP) Questions and Answers Fact Sheet April 2025*. Government of Saskatchewan, p. 1.

<sup>13</sup> PSPNET provides free mental health services (e.g., cognitive behaviour therapy and training on topics such as PTSD and sleep) to public safety personnel through online courses, [www.pspnet.ca/en/about-ppspnet](http://www.pspnet.ca/en/about-ppspnet) (4 June 2025).

<sup>14</sup> The National Standard for Psychological Health and Safety in the Workplace is a set of voluntary guidelines, tools, and resources intended to guide organizations in promoting mental health and preventing psychological harm at work, [mentalhealthcommission.ca](http://mentalhealthcommission.ca) (1 October 2025).



Correctional workers can educate and inform themselves about mental health resources by accessing the Ministry's internal website. The Ministry provides all correctional workers with a government-issued email account and access to a work computer during their shift and expects them to check email regularly.

The Ministry assesses how well correctional staff understand and utilize mental health supports as part of the Saskatchewan Safety Survey sent to correctional workers.<sup>15</sup> The survey includes a question asking respondents about their awareness and knowledge of mental health supports provided (i.e., I feel there is adequate awareness and knowledge of psychological health issues). The 2024 survey responses indicated two correctional facilities showed an improvement from the previous year related to this question. However, three correctional facilities did not.

Overall, we noted approximately 35% of respondents at the five adult secure-custody facilities agreed there was adequate awareness and knowledge of psychological health issues (approximately 15% of respondents neither agreed nor disagreed). While we found the Ministry utilizes several initiatives to raise awareness of mental health supports among correctional workers, it should consider other methods to raise awareness in facilities that did not show improvement.

Raising awareness and understanding of mental health, disorders, and available supports may reduce the risk of psychological injury to correctional workers in high-stress environments as well as the stigma associated with mental illness to encourage them to seek help without embarrassment or fear.

## 4.2 Accessible Resources Available to Support Correctional Workers' Mental Health

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The Ministry of Corrections, Policing, and Public Safety has appropriate and accessible resources available to support the mental health of correctional workers. Key resources include Occupational Health and Safety Consultants, Occupational Health and Safety Committees, and a Critical Incident Stress Management (CISM) team assigned to each adult secure-custody correctional facility. The Ministry also employs Return-to-Work Specialists who support correctional workers on leave as well as provide access to other resources (e.g., counselling) to support mental health.

### 4.2.1 Occupational Health and Safety Consultants and Committees

The Ministry's Occupational Health and Safety (OH&S) Unit is responsible for mental health strategies for staff, including for correctional workers. The Ministry has four OH&S Consultants to support its five correctional facilities. Some Consultants split their time between two facilities (e.g., Prince Albert and Pine Grove Correctional Centres). We found, based on the number of correctional workers and incident (injury) reports at each correctional facility, with four OH&S Consultants the Ministry is able to reasonably support the mental health of its correctional workers.

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<sup>15</sup> The Ministry of Corrections, Policing, and Public Safety participated in a government-wide survey assessing physical and psychological safety annually up to 2024, which is now planned to be conducted every second year (next survey will be 2026).

The Ministry's OH&S Consultants provide guidance and assistance to managers, supervisors, staff, and OH&S Committees to identify mental health risks and develop and implement strategies to reduce those risks. We found the OH&S Consultants provided a monthly report on incidents (injuries) to the correctional facility directors summarizing the types of physical and psychological incidents and corrective actions to address them. The two parties also meet weekly to review and discuss any significant incidents that may have occurred and how best to address them.

The OH&S Committee at each correctional facility includes members representing both management and staff with a key responsibility to establish, promote, and recommend appropriate occupational health and safety programs for their facility. We observed the Committees posted relevant mental health information (e.g., Employee Family Assistance Program) on the OH&S bulletin board at three correctional facilities we tested.

#### 4.2.2 Critical Incident Stress Management (CISM) Teams

The Ministry utilizes Critical Incident Stress Management (CISM) teams to provide peer support to correctional workers involved in or affected by critical incidents (e.g., suicide, physical attack, threats, riots) at correctional facilities. Critical Incident Stress Management is a support program designed to lessen the impact of a critical incident and help people cope with the stress from a serious or traumatic event (further described in **Section 4.5**).

The Ministry provides critical incident response training to correctional workers who volunteer on CISM teams. Management indicated the training was completed by the newest CISM team members in April 2025. This training prepares CISM team members to handle the psychological and emotional impacts of traumatic incidents, as well as how to provide peer support to colleagues.

The CISM team provides correctional workers with information about common reactions to stressful events (e.g., anxiety, sleep problems), self-care strategies (e.g., physical exercise), and available mental health resources (e.g., Employee Family Assistance Program, PSPNET).

We analyzed the composition of CISM teams in correctional facilities for 2024–25 and found CISM team sizes ranged from five to 14 members (see **Figure 3**) and were reasonable based on the number of correctional workers, with larger facilities having larger CISM teams.

**Figure 3—Critical Incident Stress Management (CISM) Teams at Adult Secure-Custody Correctional Facilities**

Correctional Facility	Correctional Workers (February 2025)	CISM Team Members (June 2025)
Pine Grove Correctional Centre	197	7
Prince Albert Correctional Centre	332	13
Regina Correctional Centre	406	13
Saskatoon Correctional Centre	390	14
Saskatchewan Hospital North Battleford	78	5
<b>Total</b>	<b>1,403</b>	<b>52</b>

Source: Adapted from Ministry of Corrections, Policing and Public Safety records.



### 4.2.3 Return-To-Work Specialists

The Ministry's Return-To-Work Specialists help injured, or ill staff safely return to work by developing customized plans, coordinating injury assessments, and facilitating communication between the employee, the Ministry, and healthcare providers. These Specialists ensure injured workers, including those with psychological injuries, receive appropriate support needed to improve their mental health, and return to work. The Ministry employs two Specialists who support all five correctional facilities.

We tested two leave files of correctional workers and found the Return-to-Work Specialists documented reasonable contact (e.g., every 1–2 months) with them and showed ongoing assessment of their progress toward returning to work.

### 4.2.4 Other Resources

The Ministry provides correctional workers access to several other mental health resources, including:

- **Employee Family Assistance Program (EFAP):** Provides free, 24/7 365-day access to voluntary, confidential personal health and wellbeing support. Correctional workers can participate in counselling in-person or online.

The Ministry receives a quarterly EFAP utilization report from the service provider that includes statistics such as the number of service requests (e.g., cases, information calls) and primary issue discussed (e.g., stress management, family conflict, depression). This information is very high-level to maintain confidentiality and does not include any details to determine who (e.g., employee or family member) uses the service or to identify them.

- **Mental health service coverage:** Correctional workers can access mental health services (e.g., psychologist, counsellor) of their choice and seek reimbursement under their employee benefits plan to a maximum of \$2,000 per year.
- **PSPNET:** External website specific to public safety personnel offering free, confidential, online cognitive behaviour therapy and courses about mental wellbeing, PTSD, and sleep.

We found the Ministry had appropriate resources available for correctional workers who may need mental health support that also accommodates the variable schedules of correctional workers (i.e., shift work). We tested 13 injury reports filed by correctional workers and found the Ministry offered mental health resources where appropriate.

Providing correctional workers with access to various types of mental health resources allow individuals to choose supports that will work best for their needs.

## 4.3 Identifying Correctional Workers in Need of Mental Health Support

The Ministry of Corrections, Policing and Public Safety identifies correctional workers with mental health concerns, focusing on workers involved in critical incidents (e.g., suicide, physical attack, threats, riots).

The Ministry uses various means to help identify correctional workers in need of mental health support, including:

➤ Voluntary self-disclosure

An employee may inform their supervisor about a mental health concern or their need for support or accommodation. Employees may also request Critical Incident Stress Management (CISM) team support regardless of whether they have been involved in a critical incident.

➤ Incident Reporting and Investigation Forms

The Ministry requires correctional workers involved in a workplace incident that causes or may cause injury (including psychological injury) to complete an Incident Reporting and Investigation (IRI) Form for further review and investigation. We found correctional workers filed 132 IRI Forms in 2024–25 for incidents related to violence or psychological injury.

➤ Senior Management Follow-up

Senior managers (e.g., Deputy Directors) at correctional facilities follow up with staff involved in a serious incident (e.g., staff assault, death in custody) that could result in psychological injury. Senior management is also present throughout an inquest (e.g., coroner's inquest for a death in custody) to support staff required to serve as a witness and recall traumatic events.

➤ Staff Behavioural Changes

Supervisors or coworkers may observe and report behavioural or attendance changes of certain workers that may be indicative of challenges affecting mental health.

➤ Saskatchewan Safety Survey results

The Ministry uses the survey results to identify both physical and psychological safety and mental health concerns at both the correctional-facility level and for the whole Ministry. It is distributed to all Ministry staff and includes six questions on workplace psychological safety (e.g., whether staff wellbeing is prioritized), four questions on awareness, support, and discussions of psychological health (e.g., adequacy of knowledge on these issues), and a query on employees' primary workplace stressor (e.g., workload or poor supervisor relations). The survey results are summarized at a correctional-facility level. **Section 4.4** provides further details about the survey and how the Ministry uses the results to enhance mental health supports.



Having various means to identify correctional workers in need of mental health support can help the Ministry take appropriate actions (e.g., referrals to counselling, CISM deployment) to support its workers.

## 4.4 Survey Conducted to Assess Mental Health Supports But Enhancements Needed

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The Ministry of Corrections, Policing and Public Safety uses the Saskatchewan Safety Survey to assess the mental health supports it provides to its correctional workers. However, the survey may not sufficiently consider the unique working environment encountered by correctional workers.

As noted in **Section 4.3**, the survey asks questions related to both physical and psychological safety, calculating a safety score based on the responses.<sup>16,17</sup> The survey is used across 14 Government of Saskatchewan agencies including the Ministry of Corrections, Policing and Public Safety. The Government developed a Corporate Health, Safety and Wellness Plan for Executive Government (i.e., ministries). The 2024–25 Plan states that each ministry will maintain or increase its psychological safety survey score from the prior year's results, although it does not set or direct ministries to set a specific target.

The Ministry indicated it aims for a psychological safety score above 3.0 for all its correctional facilities. It received a 35% response rate overall for the 2024 survey (from approximately 3,000 employees) and a Ministry-wide psychological safety score of 3.08—an increase from 2.52 in 2018. However, the psychological safety survey score among the five adult secure-custody correctional facilities (based on 358 responses received) ranged from 2.16 to 3.18, with four facilities reporting a score below 3.0.

The Ministry uses the psychological safety survey to assist in analyzing the effectiveness of mental health supports provided to correctional workers. However, because the survey is designed to be used across all ministries, the questions and results do not always highlight concerns unique to correctional work environments (e.g., daily exposure to violence and trauma).

We found some survey questions asked respondents to score statements that contained two different concepts (e.g., knowledge and awareness of psychological health issues), which can leave the response open to interpretation and result in inaccurate conclusions. Also, ministries can choose whether they want the survey to allow for written comments from respondents. However, the Ministry did not choose this for its 2024 survey.

To be an effective performance tool, the Ministry should revise its psychological safety survey to better assess the unique working environment of correctional workers. Alternatively, the Ministry could explore developing a separate survey for correctional workers.

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<sup>16</sup> Psychological safety score ranges from one to five, with higher scores reflecting a stronger safety climate.

<sup>17</sup> The survey asks respondents to rate management's attitude and response to statements relating to psychological safety (e.g., management shows support for stress prevention through involvement and commitment, management considers employee psychological health to be as important as productivity).

1. We recommend the Ministry of Corrections, Policing and Public Safety enhance the staff survey it uses to assess the effectiveness of mental health supports it provides to its correctional workers.

## 4.5 Consistent Use and Periodic Analysis of Critical Incident Stress Management Program Needed

The Ministry of Corrections, Policing and Public Safety does not have clear guidance on when the Critical Incident Stress Management (CISM) program must be used at its correctional facilities to support its workers experiencing mental health issues. It also needs reliable and complete information to sufficiently analyze whether the CISM program is working effectively.

The Ministry uses CISM teams at its correctional facilities to provide peer-support to correctional workers following critical incidents (e.g., suicide, physical attacks) as described in **Figure 4**.<sup>18</sup>

**Figure 4—Types of CISM Support for Correctional Workers**

**Defusing:** Confidential peer support provided by CISM members to inform correctional workers about common reactions to stressful events, self-care strategies, and available resources (e.g., Employee Family Assistance Program, PSPNET). Defusing sessions are typically brief (i.e., 15–25 minutes) and conducted within 24 hours of a critical incident.

**Debriefing:** Provides an opportunity for correctional workers to share their reactions to a stressful event with a mental health provider (e.g., counsellor, psychiatrist). Debriefing will occur if requested by the worker during defusing and is typically conducted within 24–72 hours of an incident.

Source: Adapted from information provided by the Ministry of Corrections, Policing and Public Safety.

In October 2024, the Ministry created policies for the CISM program, setting out guidance and expectations for the program as well as the selection and training of CISM team members.

In policy, the Ministry defines critical incidents as any incident in the workplace with the potential to impact an individual's wellbeing and interfere with their ability to function effectively in their professional or personal lives. It also lists examples such as suicide, physical attacks, threats, or riots.

The Ministry did not clearly state in its policy which critical incidents should involve CISM teams but rather allows correctional facility management (e.g., Facility Director, Assistant Deputy Director of Operations) to decide whether to offer CISM. We found management did not track these decisions, and we were unable to determine whether decisions on offering CISM support were made consistently and appropriately across correctional facilities (see **Recommendation 3** about tracking CISM usage).

We tested a sample of 13 incident (injury) reports filed by correctional workers and found:

- One report where CISM was provided
- Five reports where the Ministry indicated CISM was offered and declined

<sup>18</sup> Critical Incident Stress Management (CISM) is a support program intended to lessen the impact of a critical incident, normalize instinctive reactions to the incident, encourage the natural recovery process, restore the adaptive functioning skills of the person and/or group, and determine the need for further supportive services or therapy. [cism.ca/cisminfo/](https://cism.ca/cisminfo/) (25 September 2025).



- Three reports related to incidents of violence where CISM was not offered
- Four reports related to injuries resulting from other events (e.g., human resource concerns) that are not the result of a critical incident

As shown in **Figure 5**, the Ministry reported it offered CISM support in 84 instances in 2024–25 and correctional workers utilized CISM in 50 of those instances. This information was manually compiled by the Ministry and is not something it regularly tracks. In 34 instances, CISM was offered to, and declined by, all correctional workers involved. According to Ministry management, if all employees involved in a critical incident decline the offer of CISM support then CISM teams do not prepare a report, suggesting CISM may have been offered in more instances than outlined in **Figure 5**.

**Figure 5—Provision of Critical Incident Stress Management (CISM) at Adult Secure-Custody Correctional Facilities in 2024–25**

Correctional Facility	CISM Offered	CISM Provided <sup>B</sup>
Pine Grove Correctional Centre	15	7
Prince Albert Correctional Centre	24	13
Regina Correctional Centre	24	10
Saskatoon Correctional Centre	21	15
Saskatchewan Hospital North Battleford	Unknown <sup>A</sup>	5
<b>Total</b>	<b>84</b>	<b>50</b>

Source: Adapted from Ministry of Corrections, Policing and Public Safety records.

<sup>A</sup> Saskatchewan Hospital North Battleford did not track when it offered CISM, only when it provided CISM.

<sup>B</sup> CISM team member offers support to correctional workers and will provide support if the offer is accepted. Correctional workers can decline to receive support.

Without clear guidance on when to offer CISM support to correctional workers involved in critical incidents, certain workers may not receive the assistance they need to support their mental health after a critical incident.

## 2. We recommend the Ministry of Corrections, Policing and Public Safety provide clear guidance on when to use the Critical Incident Stress Management program to support correctional workers' mental health.

The Ministry has outlined reporting requirements in its CISM policies for CISM teams to provide the following to their correctional facility director:

- A report after each use of the program including details such as naming which CISM team members attended a critical incident, which staff were offered CISM, and limitations/barriers the CISM team faced during deployment
- Each year, a report including CISM group training events for team members, CISM team meetings and minutes, and a list of when CISM was used and which CISM team members attended which incident

We found the Ministry did not comply with its reporting requirements. The Ministry did not prepare consistent CISM reports or prepare CISM reports at all after some critical incidents (if CISM team support was declined). In addition, the Ministry did not prepare an annual CISM report as expected.

We found the Ministry does not always know when CISM is offered to and declined by correctional workers because reports are not always prepared when CISM is declined.

We reviewed two CISM reports prepared after incidents and found the CISM team provided timely supports (within 24 hours of an incident). However, we found the two reports varied. For example, one report did not list who CISM was offered to or the limitations/barriers encountered by the CISM team, as required by Ministry policy.

Further, we found correctional facilities did not prepare and provide the Correctional Facility Director an annual report in 2024–25 about CISM activities. An annual report would allow the Director to assess whether use of CISM teams effectively support the mental health of correctional workers when critical incidents occur.

In March 2025, the Ministry engaged the University of Regina to evaluate its CISM program to determine successes and improvements. The Ministry expects to receive these results in January 2026. The University will also complete a jurisdictional scan and literature review of CISM-type programs in correctional facilities and report to the Ministry in October 2025. A comprehensive evaluation should provide the Ministry qualitative (e.g., employee interviews) and quantitative data (e.g., number of critical incidents where CISM is and is not offered, number of employees who decline CISM support) to assess whether the program provides the necessary support staff want and need following a traumatic and stressful event.

A well-functioning CISM program supports correctional workers who regularly face violent and traumatic situations as part of their job. Without appropriately tracking information and periodically analyzing CISM use (e.g., decisions to offer program, CISM provided or declined), the Ministry cannot know whether the program operates effectively.

**3. We recommend the Ministry of Corrections, Policing and Public Safety consistently track, analyze, and report on the usage of its Critical Incident Stress Management program by correctional workers.**

## 4.6 Clear Expectations Needed for Contacting Correctional Workers on Mental Health Leave

The Ministry of Corrections, Policing and Public Safety does not have clear expectations for contacting correctional workers on mental health leave.

The Ministry will periodically contact (check-in with) correctional workers on extended leave (i.e., longer than one month) to take necessary steps for injured workers to receive appropriate support they need to improve their mental health, and return to work.



The Ministry's Return-to-Work Specialists manage correctional workers' leaves of absence (e.g., workers' compensation leave, non-work-related medical absences), including for mental health-related injuries. The Specialists track case management activity and schedule reminders to complete key tasks timely (e.g., obtain medical information from workers on leave, submit forms to Saskatchewan Workers' Compensation Board) in a database.

We tested the leave files for two correctional workers on a mental health leave of absence and observed documentation showing Ministry staff (e.g., correctional worker's supervisor, Deputy Director of Personnel) contacted the correctional worker on leave generally every 1–2 months to acquire updated medical information or discuss their return to work, which was reasonable. However, the Ministry has not established expectations on checking in with workers on leave.

Good practice recommends establishing clear expectations for contacting correctional workers on leave. Where possible, prior to going on leave, Ministry staff and the correctional worker should document and agree to the planned check-in terms (e.g., how often, by whom, communication method) to ensure they are comfortable with the amount of expected check-in. How often a correctional worker wants to be contacted will vary by individual.

Without clear expectations and an agreed upon plan for contacting correctional workers on mental health leave, the Ministry may not obtain required case management information timely. Allowing a correctional worker to have input into this process reduces the risk they feel harassed or unsupported by the Ministry.

**4. We recommend the Ministry of Corrections, Policing and Public Safety establish clear expectations for contacting correctional workers on mental health leave.**

## 4.7 Enhanced Analysis to Monitor Mental Health Supports for Correctional Workers Needed

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While the Ministry of Corrections, Policing and Public Safety collects some information related to the mental health of its correctional workers, it does not sufficiently track, compile, and analyze all key information to assess and monitor the mental health supports provided to its correctional workers.

The Ministry has not set specific performance measures and targets to evaluate the effectiveness of mental health supports. Establishing and monitoring key performance indicators help to enhance the supports provided and identify areas for improvement. Potential performance measures are outlined in **Figure 6**.

**Figure 6—Potential Performance Measures for Evaluating Mental Health Supports**

Performance Measure	Importance of Measure
Sick leave hours (e.g., % reduction in sick leave hours)	Sick leave hours may indicate the lack of adequate mental health supports for correctional workers. Employees who are unwell (e.g., stressed, sleep deprived) may use sick time to recover. This may result in overtime to cover their shifts increasing the stress of other correctional workers.
CISM utilization (e.g., % of incidents where CISM was used, % of correctional workers accepting offer of CISM support)	CISM utilization indicators provide information on whether CISM is being used effectively to support the mental health of correctional workers involved in critical incidents. See <b>Recommendation 3</b> .
Mental health related WCB Claims (e.g., % reduction in mental health claims or costs)	WCB claims may indicate correctional workers are not receiving adequate mental health supports.
Survey results related to mental health of correctional workers (% of employees aware of mental health supports)	Provides qualitative and quantitative information from correctional workers about their views on the Ministry's mental health supports.

Source: Office of the Provincial Auditor of Saskatchewan.

As shown in **Figure 7**, over the last three fiscal years, the Ministry has experienced high levels of sick leave and overtime at its adult secure-custody facilities. For example, for 2024–25, correctional officers used nearly 152,000 sick leave hours or approximately 114 hours (or three weeks of sick leave) per correctional officer. Also, in 2024–25, the Ministry's correctional officers worked over 350,000 hours of overtime or nearly 265 overtime hours per correctional officer. Overtime can lead to stress and burnout in correctional workers and may increase sick leave to deal with these mental health concerns.

**Figure 7—Potential Indicators of Stress and Burnout in Correctional Officers (CO) at Five Adult Secure-Custody Facilities<sup>A</sup>**

	2022–23	2023–24	2024–25
Total Sick Leave Hours (per CO)	153,273 (106.6)	150,348 (104.4)	151,689 (113.9)
Total Overtime Hours (per CO)	311,651 (216.7)	406,073 (282.0)	352,675 (264.8)

Source: Adapted from Ministry of Corrections, Policing and Public Safety records.

<sup>A</sup> Data for correctional officer positions only (i.e., does not include facility managers).

The Ministry collects information such as incident (injury) reports, Workers' Compensation Board claims, leaves, and accommodations, as well as safety surveys. As noted in **Section 4.5** the Ministry does not have complete information related to the use of its CISM program to support correctional workers.

The Ministry's OH&S Consultants and Return-to-Work Specialists developed a process to improve its tracking of incidents (injuries), leaves, and accommodation details. This tracking is expected to help gather better data to analyze correctional workers on mental health leaves of absence and the effectiveness of its mental health supports provided.



The Ministry prepared ad hoc reports and presentations to management regarding year-over-year trends and facility comparisons of safety survey results, such as the number of incidents (injuries). For example, the Ministry indicated that its comparisons identified overcrowding at one correctional facility, which led to more reported incidents. The Ministry added space at another facility and moved inmates to help alleviate overcrowding. However, without specific targets (e.g., psychological safety score), reporting may lack gap analysis to help in developing action plans where results fall short.

While the Ministry did prepare some action plans to address concerns identified in the various surveys (e.g., Saskatchewan Safety Survey, employee engagement survey), we found these action plans incomplete because they did not specify responsibilities, performance measures, targets, and timeframes. For example, one facility's action plan specified steps to increase physical and mental health awareness initiatives and listed a decrease in the number of injury reports as a measure. However, it did not include a target (e.g., amount of decrease expected) or specify who is responsible to carry out the action or timeframes required to complete the action. Other action plans also did not specify who is responsible to carry out the action. Specifying these will support accountability for the planned actions and address concerns identified in the various surveys, ultimately supporting the mental health of correctional workers.

Setting specific performance measures and targets can help the Ministry assess the effectiveness of its mental health supports for correctional workers. Tracking and analyzing key information like results against performance measures can help in determining whether the Ministry achieved its desired results, and if not, take action.

**5. We recommend the Ministry of Corrections, Policing and Public Safety specifically analyze key information (e.g., performance measures, mental health injury data) to assess the effectiveness of mental health supports provided to correctional workers.**

## 4.8 Better Reporting to Senior Management Needed

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The Ministry of Corrections, Policing and Public Safety needs better reporting to senior management on the effectiveness of mental health supports provided to its correctional workers.

Costs associated with correctional workers with mental health issues can be significant, including increased sick leave, overtime, and Workers' Compensation Board (WCB) claims. The Ministry incurs approximately \$3 million per year in WCB premiums. As shown in **Figure 7**, in 2024–25, correctional officers used over 150,000 sick leave hours, and worked over 350,000 overtime hours costing approximately \$30 million. If the Ministry continues to address mental health issues for its correctional workers, sick leave and overtime costs could decrease.

The Ministry has some reporting requirements set out in its policies. For example, the Ministry expects quarterly incident (injury) data to be provided to the OH&S Committee at each facility. As noted in **Section 4.5**, the Ministry also expects annual reporting of CISM events and statistics to facility directors. However, annual reporting did not occur in 2024–25. There are no set policies for reporting to senior management on the effectiveness of mental health supports for correctional workers.

Current reporting to senior management is ad hoc and informal. For example, we found the Occupational Health and Safety Branch of the Ministry presented the 2024 psychological safety survey results to Ministry senior management. We also found staff presented WCB claims and incident (injury) data to the Ministry's Executive Director of the Central Services Branch in 2024.

Once the Ministry completes comprehensive analysis of key information related to the effectiveness of mental health supports for correctional workers (see **Recommendation 5**), it should provide this analysis to senior management to inform decision-making.

Formal, periodic reporting (e.g., annually) to senior management about the sufficiency of Ministry-provided supports for mental health of correctional workers will help senior management be informed of potential issues, know whether the Ministry achieved its overall objectives or whether timely corrective action needs to occur.

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