Enhancing organizational well-being and growth: The value of ombud services and the development of ombud consultation evaluation survey

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ABSTRACT

The role of an organizational ombud (formerly ombudsman) is increasingly recognized as a significant contributor to fostering a healthy workplace environment. This specialized service offers an impartial, confidential, informal, and independent resource for employees and executives, addressing their concerns, mediating conflicts, and promoting fair treatment within the organization. While the role of an ombud may vary from one organization to another, this article sheds light on the findings of our ombud’s office and its contribution to the health of an organization. The ombud consultation evaluation survey serves as a valuable tool for organizations to simultaneously safeguard the health of their employees and the health of their business. The ombud confidential services serve as a cornerstone of organizational health, contributing to enhanced employee satisfaction, improved conflict resolution, ethical compliance, increased productivity, and reduced legal risks.

Key Words  Organizational ombud; workplace issues; inclusive culture; healthy culture; organizational health; conflict resolution; work productivity; mental health.

INTRODUCTION

Since the Report of the Clerk of the Privy Council (2018) “Starting a Dialogue and Taking Action on Harassment in the Public Service,” we now have 26 Organizational Ombuds serving Government of Canada departments and agencies. Public Services and Procurement Canada (PSPC) was one of the pioneers, creating the position in 2017 prior to the Clerk of the Privy Council’s Report being tabled.

What is frequently heard is that individuals may encounter challenges when navigating harassment response mechanisms, and public servants frequently lack guidance or resources on where to seek advice or obtain information. Victims say they hesitate to report harassment for several reasons: they do not believe it will make a difference; they do not know how to start the process; they tell themselves the harassment to which they are exposed “isn’t that serious”; they worry about the length and difficulty of the process; and they fear reprisals or social repercussions. Managers need practical advice and a better understanding of the resources available to support their employees.

The organizational ombud works to proactively prevent and resolves the issues that employees, managers, and executives face in the workplace. The organizational ombud strives to ensure impartiality, fairness, and objectivity in the treatment of employees, managers, and executives and the identification of problems, including systemic issues. The ombud delivers high-quality independent, confidential, impartial, and informal professional services.

The ombud helps employees with tools, resources, and guidance so that they are equipped in resolving the various workplace issues they are facing. As ombud’s professional services are voluntary, clients are accountable for the outcome of these informal mechanisms, including the determination
as to when and how they will activate the recommendations, advice, and guidance delivered to them.

The goal is to promote a psychologically healthy work environment that leads to a high-performing, productive, and innovative workplace, enshrining the values of a diversified and inclusive workplace.

The Impact of Mental Health Conditions on Productivity and Costs

Mental health conditions impose a substantial economic burden, with an estimated annual cost reaching as high as US$83 billion (Greenberg et al., 2015). One of the leading contributors to these costs is the decline in work productivity attributed to mental illnesses. Factors such as absenteeism, presenteeism, and work-sick leave play pivotal roles in reducing productivity. Among these, presenteeism emerges as a significant concern, often surpassing absenteeism in its impact on employers (Boles et al., 2004).

Anxiety and clinical depression persist as the primary contributors to the global burden of illness. According to the World Health Organization’s 2017 report, depression stands as the foremost cause of compromised well-being and disability worldwide. Research conducted by Gaspar et al. in 2020 has also explored the connection between work-related leave and the presence of depression and anxiety. The findings indicate that depression and anxiety serve as predisposing factors for the likelihood of taking a future work-related leave. Furthermore, for individuals who do not experience depression or anxiety, taking work-related leave can increase the risk of developing these conditions. Redirecting attention toward the well-being and mental health of both the organization and its employees can yield a positive return on investment. Such a shift in focus fosters improved work participation, heightened engagement, and enhanced work functioning among employees.

Stigma significantly exacerbates the financial burden associated with mental illness by intertwining with adverse effects such as diminished self-esteem, reduced efficacy, and reduced accomplishments. Moreover, it is a barrier to seeking help when needed. The ramifications of this stigma are significant, contributing to disability through reduced productivity, delayed treatment seeking, and a barrier to accessing workplace accommodations (Clement et al., 2015; Mojtabai et al., 2011). Consequently, individuals may postpone treatment, exacerbating the risk of experiencing multiple concurrent mental health issues, along with an increased risk of both short-term and long-term consequences. The above highlights the need for establishing strategies and interventions aimed at combating stigma, as well as implementing measures to mitigate its impact.

The decision to disclose mental illness appears to be influenced by two key factors: the perceived relationship with supervisors and a sense of responsibility toward the organization, as demonstrated in Dewa et al.’s study in 2020. These findings align with similar results reported in other countries, as exemplified by the research of Evans-Lacko & Knapp in 2016. According to Dewa et al.’s (2020) study, the significance of the relationship with one’s manager stands out as a crucial factor influencing decision-making. Their research indicates that this relationship’s importance can even surpass that of other occupational stressors, such as organizational pressures, recommendations from occupational physicians, or the provision of workplace accommodations. The study by Dewa et al. (2020) recommends that managers undergo training to foster supportive working relationships with their employees.

Burnout and Its Consequences

Burnout is recognized as a workplace hazard with implications for both health and work-related outcomes (Ahola et al., 2009). Maslach et al. (2001) have defined burnout as a complex condition characterized by three clusters of symptoms: exhaustion, depersonalization, and a reduced sense of personal accomplishment. Exhaustion refers to the depletion of emotional and energetic resources. Depersonalization entails individuals emotionally distancing themselves from others, often leading to cynicism or indifference toward their work and colleagues. The third cluster of symptoms includes a diminished sense of personal accomplishment, which refers to a loss of self-efficacy or a perceived decline in one’s ability to achieve meaningful goals. This, in turn, can profoundly impact one’s self-esteem, self-confidence, and overall well-being. Burnout can lead to reduced work productivity and work engagement.

Office of the Organizational Ombud

The Office of the Ombud offers (a) a confidential and impartial environment for employees, managers, and executives to have informal conversations about workplace issues, including harassment; (b) resources, tools, and supports; (c) a framework for exploring options for resolving workplace issues, including harassment; (d) a referral to other services, including restoring the work climate after a case of harassment; (e) a safe space for employees or groups seeking equity, diversity, and inclusion; (f) advice to the Deputy Minister on the Call to Action for Anti-Racism, Equity, and Inclusion in the Federal Public Service; and (g) the ombud works impartially, which means that no side is taken with any of the parties in conflict. The ombud strives to find fair and just solutions for all parties involved. This impartiality is one of the cornerstones of the profession and ensures that everyone is treated fairly, regardless of social status, race, gender, or religion.

Objectives of Our Office of the Ombud

Our objective has been multifaceted. We are working on enhancing (a) employee satisfaction and well-being; increased job satisfaction also comes in part from employees feeling heard, supported, and empowered to cope with workplace issues without fear of retaliation; (b) improved conflict resolution: the prompt and efficient resolution of work conflicts can help effectively resolve disputes before they escalate, leading to a more harmonious and healthier workplace, and individual and organizational resiliency; (c) enhanced organizational ethics: the ombud’s office helps with the organization’s ethical standards by promoting compliance with regulations and encouraging a culture of fairness and integrity; (d) increased productivity and employee engagement: employees who feel supported are more likely to be engaged in their work and feel satisfied, leading to increased productivity and improved organizational performance; (e) prevention of costly litigation: early and proactive intervention for conflict resolution by the ombud’s office can significantly reduce the likelihood
of costly legal disputes, resulting in fewer lawsuits and lower legal expenses; (f) anonymous reporting: the availability of anonymous reporting provides employees with a safe avenue to raise concerns about misconduct, or unethical behaviour, in turn, protecting the organization’s reputation and financial health.

Core Values and Ethical Principles
The following core values are essential to the ombuds’ work:

- Act with honesty and integrity.
- Promote fairness and support equitable processes.
- Remain non-judgmental, with empathy and respect for individual differences.
- Promote dignity, diversity, fairness, inclusion, and belonging.
- Communicate an accurate understanding through clear and concise language.
- Communicate accurate understanding through active listening.
- Promote individual empowerment, self-determination, and collaborative problem-solving.

Our standards of practice include the following four fundamental ethical principles that define the practice of the ombud: independence, impartiality, informality, and confidentiality. The ombud holds in the strictest confidence all communications with people who ask for help and takes all possible measures to preserve confidentiality. The ombud may only take specific action in relation to an individual’s problem with the individual’s permission, and only to the extent permitted. The ombud is a designated “neutral party” that reports to the Deputy Minister and is independent of the organization’s hierarchical structure. The ombud does not make binding decisions or pronounce formal judgments on behalf of the organization. Use of the ombud office is optional and not a mandatory step in any process.

Occupational Stressors
Occupational stress has been shown to incur significant costs at both the individual and organizational levels. This includes risks to negative physical and mental health conditions for individuals, as well as consequences such as absenteeism, reduced productivity, staff turnover, and a heightened risk of accidents for organizations (Cooper & Marshall, 1976; Cooper & Cartwright, 1994).

When individuals experience work-related stress, they tend to resort more to unhealthy coping strategies and are less inclined to adopt healthy adaptive coping mechanisms (e.g., Meunier et al., 2019). This, in turn, exacerbates work-related stress and contributes to the deterioration of health conditions and increased stress levels. Therefore, any comprehensive approach to organizational health should encompass preventive and intervention measures that address stress at multiple levels, including the systemic, organizational, and individual levels.

Research by McCreary & Thompson (2006) and Toch et al. (2002) has shown that occupational stressors associated with high work demands, insufficient resources, limited control, reduced social support, and a sense of injustice within an organization can be categorized into two main types: organizational stressors (such as a lack of adequate resources) and operational stressors (such as job-related injury risks). To foster a more resilient and psychologically well-balanced organization, various approaches have been proposed. These include leadership training, support for leaders, improving organizational engagement, and addressing factors like sleep quality and social support, as suggested by Carleton et al. (2020).

Our office of the ombud compiled a catalogue of occupational stressors further drawing upon Finney et al.’s (2013) research on occupational stressors and Carleton et al.’s (2020) investigation into both organizational and operational stressors. This list was customized to suit the unique context of our public service sector. Encounters with potentially traumatic situations and the pressures of the workplace elevate the likelihood of experiencing psychological and physical harm. Research suggests a strong connection between exposure to traumatic events and workplace stressors and the development of mental health issues (Carleton et al., 2020). Furthermore, both factors have been shown to individually contribute to the onset of mental health conditions (Carleton et al., 2020).

THE RESULTS OF THE OMBUD EVALUATION SURVEY: METHODS

Sample
Our office of the ombud has developed its own evaluation survey, drawing insights from Ombud Professional Consultations held in June 2023. This survey was poised for implementation in July 2023, following a meticulous development process. The data informing this report span from June 2023 to 19 October 2023, providing a robust foundation for analysis.

The survey was administered using the Interceptum software, ensuring a streamlined and efficient data collection process. Out of 85 clients to whom the survey was distributed, responses were obtained from 34 participants who comprised the sample. For a detailed examination of the survey questions, please refer to Supplemental Survey.

Survey Instrument

Demographics
Our office of the ombud administered the survey instrument, which encompassed a range of demographic questions. Participants were queried about their work location, branch affiliation, and position level within Public Services Procurement Canada (PSPC). Additionally, the survey delved into aspects related to equity-seeking groups and membership in the 2LGBTQI+ community.

Office of the ombud interaction experience
Data were collected regarding the satisfaction levels with the services provided by the ombud’s office during consultation (four questions). Responses were gathered using a scale of 1 to 5, where 1 denoted “strongly disagree,” 5 indicated “strongly agree,” and an additional option allowed for expressing a neutral stance (“neither agree nor disagree”). Additionally, feedback was collected on the satisfaction with professional guidance provided by the ombud/associate ombud, captured through a single question. Respondents rated their
satisfaction on a scale of 1 to 6, where 1 represented “not at all” and 4 reflected “to a very large extent.” Two supplementary options (5 and 4), “don’t know” and “not applicable,” were included to ensure a comprehensive understanding of participants’ perspectives.

**Action and impact**

The survey aimed to gather insights into participants’ responses to recommendations provided by the ombud/associate ombud. Specifically, participants were asked to indicate whether they had actively actioned or not these recommendations by selecting “yes” or “no.” For those who responded affirmatively (“yes”), participants were prompted to specify the extent to which the recommendations contributed to resolving workplace issues, utilizing a scale of 1 to 6. In this scale, 1 represented “not at all,” and 4 indicated “to a very large extent.” Two supplementary options (5 and 4), “don’t know” and “not applicable,” were also included. Conversely, for participants who answered negatively (“no”), they were asked to assess the anticipated effectiveness of future implementation. Like the affirmative group, respondents rated their level of optimism on the same scale of 1 to 6.

**Workplace issues consultation**

**Organizational Stressors:** To understand the sources of stress in the workplace, participants were invited to articulate specific organizational stressors for which they sought consultation from the ombud’s office. They were presented with a list of 18 potential stress sources. The options included dealing with co-workers, dealing with supervisors/managers, favouritism, low professional worthiness, excessive administrative duties or excessive workload, change in policies, lack of resources, training, and support, leadership style, inconsistent work distribution, negative judgment from others, performance feedback, dealing with an investigation, participation level, skills utilization, roles-related issues, perceived rewards, organizational culture, and not applicable.

**Operational Stressors:** Subsequently, participants were prompted to pinpoint the operational stressors that prompted them to seek assistance from the ombud’s office. They were presented with a concise list of eight potential sources of stress. These included responding to overtime requests, feeling of always being on duty, fatigue, administrative, finding time to stay in good physical care, managing social life, occupational-related pain, and negative comments from Open Government Data (OGD)/Industry Sector.

**Confidential services and intent**

This survey focused on gauging participants’ interactions with the ombud’s confidential services. Respondents were prompted to identify the type of service they received choosing from options such as “individual intervention,” “group intervention,” or indicating that they had experienced both types of interventions. Subsequently, participants were inquired about their post-consultation intent with the ombud/associate ombud. Responses options included: remain within PSPC and continue to engage with the ombud’s office, leaving PSPC, no matter what the outcome of the process is, and an open-ended “other” category.

**Impact of consultation services**

Data were collected to evaluate the perceived impact of consultation services provided regarding the ombud’s encompassing six questions. Participants were asked to indicate the current or anticipated effect these services had or will have on them. Responses were gathered using a scale of 1 to 5, where 1 denoted “strongly disagree” and 5 indicated “strongly agree,” and an additional option allowed for expressing a neutral stance with “neither agree nor disagree”.

**RESULTS**

**Office of the Ombud Interaction Experience**

The interaction experiences, as illustrated in Table I, show that more than half of respondents found their interactions with the ombud’s office appropriate. Notably, 33 participants (97.6%) strongly agreed or agreed that the ombud/associate ombud promptly met with them, with only one participant (2.94%) providing a neutral response. Regarding professional and respectful interactions, 34 participants (100%) affirmed the ombud/associate ombud’s conduct. Additionally, 33 participants (97.6%) acknowledged effective listening skills and empathy, while only one participant (2.94%) remained neutral. Finally, 34 participants (100%) agreed or somewhat agreed that the ombud/associate ombud delivered services in a confidential manner.

**Action and Impact**

Of the 34 participants, 91.18% (31 participants) actively initiated or planned to implement recommendations discussed with the ombud/associate ombud. Among these, 8.82% (3 participants) did not take action. The details of the implementation of recommendations and options are illustrated in Table II. Among the 31 participants committed to taking

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**TABLE I** Participant satisfaction with various aspects of their interactions with the ombud’s office

<table>
<thead>
<tr>
<th>The Ombud/Associate Ombud (and Their Staff)</th>
<th>Strongly Disagree</th>
<th>Somewhat Disagree</th>
<th>Neither Agree nor Disagree</th>
<th>Somewhat Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Met with me within a reasonable time (within 2 weeks)</td>
<td>0% [0]</td>
<td>0% [0]</td>
<td>2.94% [1]</td>
<td>8.82% [3]</td>
<td>88.24% [30]</td>
</tr>
<tr>
<td>Have interacted with me in a professional, respectful, and courteous manner</td>
<td>0% [0]</td>
<td>0% [0]</td>
<td>0% [0]</td>
<td>5.88% [2]</td>
<td>94.12% [32]</td>
</tr>
<tr>
<td>Have demonstrated listening skills and empathy</td>
<td>0% [0]</td>
<td>0% [0]</td>
<td>2.94% [1]</td>
<td>5.88% [2]</td>
<td>91.18% [31]</td>
</tr>
<tr>
<td>Have delivered service in a confidential manner</td>
<td>0% [0]</td>
<td>0% [0]</td>
<td>0% [0]</td>
<td>11.76% [4]</td>
<td>88.24% [30]</td>
</tr>
</tbody>
</table>

Percentages (%) are based on participant responses.
The numbers in square brackets [ ] represent the count of responses.
action, 2.94% (1 participant) found the impact small, 23.53% (8 participants) moderate, and 23.53% (8 participants) found the action had a very large impact. Interestingly, 26.47% (9 participants) were uncertain about the impact, and 23.53% (8 participants) deemed the question not applicable. For participants planning to implement recommendations, 8.82% (3 participants) anticipate no impact, 14.71% (5 participants) a moderate extent, and 41.18% (14 participants) a very large extent. Similarly, 11.76% (4 participants) are uncertain about the expected impact, and 23.53% (8 participants) consider the question not applicable. The valuable findings can be utilized to shape the organizational ombud program and other workplace support programs accordingly.

Workplace Issues Consultation

Organizational stressors

In the exploration of organizational stressors, participants detailed the specific stressors for which they sought consultation from the ombud’s office, as depicted in Figure 1. Among the 34 participants, only one (2.94% each) sought consultation on perceived rewards and participation levels. Three participants (8.82% each) sought guidance on issues such as inconsistent work distribution, negative judgment, and excessive administrative duties. In another category, four participants (11.76% each) sought help with skills utilization, investigations, and role-related concerns. Five participants (14.71% each) sought assistance on a range of issues, including policy changes, favouritism, non-applicable matters, and challenges related to resources, training, and support. Seven participants (20.59% each) consulted on organizational culture and performance feedback. Eight participants (23.53%) sought help with feelings of low professional worthiness, while nine participants (26.47%) sought guidance on co-worker issues. For 11 participants (32.35%), consultation focused on leadership styles. The most prevalent stressor, highlighted by 17 participants (50%), was challenges associated with supervisors/managers.

Operational stressors

In the examination of operational stressors, participants detailed the challenges leading them to seek consultation from the ombud’s office, as depicted in Figure 2. Among the 34 participants, 3.33% reported consulting on social life
management. Three participants (10% each) sought advice on diverse issues, including overtime requests, maintaining physical health, and addressing negative comments from OGD/Industry Sector. In another category, four participants (13.33%) sought guidance on managing occupational-related pain. Five participants (16.67%) consulted on the persistent feeling of always being on duty. A substantial group of 12 participants (40%) sought help with issues related to fatigue, and 13 participants (43.33%) consulted on administrative concerns (e.g., complaints about change management initiatives with new administrative processes involved, new electronic tools, without proper or sufficient training provided).

Confidential Services and Intent
The distribution of participant engagement revealed that a significant majority, comprising 29 individuals (85.29%), participated in individual interventions, while 3 participants (8.82%) opted for group interventions. Additionally, 4 participants (11.76%) engaged in both individual and group interventions, as depicted in Figure 3. Following the confidential process, it was found that 24 participants (70.59%) expressed their intention to remain affiliated with PSPC and continue their involvement with the ombud. Interestingly, only one participant (2.94%) indicated a desire to discontinue their association with PSPC, while 9 participants (26.47%) had diverse considerations influencing their decisions.

Impact of Consultation Services
The findings, as demonstrated in Table III, reveal a resounding consensus among participants. A noteworthy 67.65% (23 individuals) strongly agreeing or somewhat agreeing that the service significantly contributes to their understanding of personal goals. Minimal dissent is observed, as only 5.88% (2 participants) express disagreement, while 26.47%
TABLE III  Participant perceptions of consultation service impact

<table>
<thead>
<tr>
<th>I Feel/I Have</th>
<th>Strongly Agree</th>
<th>Somewhat Agree</th>
<th>Neither Agree nor Disagree</th>
<th>Somewhat Disagree</th>
<th>Strongly Disagree</th>
<th>Neither Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>The consultation service has helped me gain a better understanding of my specific goals, needs, and interests</td>
<td>5.88% [2]</td>
<td>0% [0]</td>
<td>26.47% [9]</td>
<td>26.47% [9]</td>
<td>41.18% [14]</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Satisfied with the level of support and guidance provided by the consultation service</td>
<td>2.94% [1]</td>
<td>2.94% [1]</td>
<td>8.82% [3]</td>
<td>17.65% [6]</td>
<td>67.65% [23]</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Percentages (%) are based on participant responses. The numbers in square brackets [ ] represent the count of responses.

(9 participants) maintain a neutral stance. Moving ahead, an impressive 85.3% (29 participants) showcase high levels of satisfaction, with a mere 5.88% (2 participants) in disagreement and 8.82% (3 participants) adopting a neutral perspective. In terms of well-being, a substantial 82.36% (28 participants) either strongly agree or somewhat agree on gaining valuable insights, juxtaposed with a modest 8.82% (3 participants) in disagreement and an additional 8.82% (3 participants) expressing neutrality. Assessing overall quality of life, a significant 79.42% (27 participants) either strongly agree or somewhat agree, while 11.76% (4 participants) indicate disagreement and 8.82% (3 participants) remain neutral. Examining the psychological impact, an impressive 82.36% (28 participants) either strongly agree or somewhat agree, contrasted with 8.82% (3 participants) in disagreement and an additional 8.82% (3 participants) maintaining a neutral standpoint. Shifting the focus to relationships, a majority of 58.83% (20 participants) strongly agree or somewhat agree, while 11.76% (4 participants) express disagreement, and 29.41% (10 participants) hold a neutral opinion.

CONCLUSION

Our office of the ombud serves as a cornerstone of organizational health, contributing to enhanced employee satisfaction, improved conflict resolution, ethical compliance, increased productivity, and reduced legal risks. The findings and recommendations can generalize across organizations and beyond the public sector.

Our findings reveal key information for an ombud’s office in terms of organizational and operational stressors which, in turn, allows the ombud’s office to provide clear guidance and recommendations to senior management. For instance, workshops, initiatives, programs and training in order to support a stronger organizational culture and health. This also can help contribute to return on investment and improved employee performance, recruitment, and retention. This paper also allows the ombud’s office to tailor its specific workshop on mental health, leadership and organizational health and resiliency.

The challenges associated with leadership style are prevalent stressors in the workplace with significant impact on the employee’s well-being and job satisfaction. Leadership training programs focused, for instance, on interpersonal skills, effective communication and conflict resolution would be proactive measures toward a healthy workplace culture that fosters employee engagement and reduces stress levels.

By providing employees with confidential, informal, independent, and impartial services to address their concerns and workplace issues, organizations can create a more resilient and inclusive workplace culture with a positive impact on the organization’s overall health and success.

CONFLICTS OF INTEREST
The authors have no conflicts of interest to declare.

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SUPPLEMENTARY MATERIAL
Supplementary material is linked to the online version of the paper at https://www.journalswcb.ca/index.php/cswb/article/view/375/supp_material.

REFERENCES


