MANAGING STRESS IN THE WORKPLACE POLICY

May 2015

Authorship:	**YHCS Workforce Team**
Reviewing Committee:	**Joint Trade Union Partnership Forum**
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Sustainability Impact Assessment:	**Completed**
Related Policies:	**HR02 Absence Management** **HR10 Recruitment and Selection Policy** **HR17 Managing Work Performance**
Target Audience:	**All staff**
Policy Reference No:	**HR25**
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POLICY AMENDMENTS

Amendments to the Policy will be issued from time to time. A new amendment history will be issued with each change.

New Version Number	Issued by	Nature of Amendment	Approved by & Date	Date on Internet
Draft	YHCS	Staff consultation	February 2015	
Draft	YHCS	JTUPF	27th May 2015	
Version 1	YHCS	SMT	9th June 2015	29.06.15

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1.   INTRODUCTION

1.1.   NHS Vale of York Clinical Commissioning Group (VoY CCG) is committed to protecting the health, safety and wellbeing of its employees. The purpose of this policy and procedure is to provide a framework and guidance to managers and employees for the effective prevention and management of stress at work. To develop working practices that reduce or prevent factors which may lead to stress in the workplace and identify support mechanisms in place for managing stress. This policy and procedure should be read together with other relevant policies and procedures.

2.   POLICY STATEMENT

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3.   IMPACT ANALYSES

Equality

3.1.   In applying this policy, the CCG will have due regard for the need to eliminate unlawful discrimination, promote equality of opportunity and provide for good relations between people of diverse groups, in particular on the grounds of the following characteristics protected by the Equality Act (2010); age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief and sexual orientation, in addition to offending background, trade union membership or any other personal characteristics.

3.2.   In developing this policy and Equality Impact Assessment has been undertaken. As a result of performing the analysis, it is evident that a risk of discrimination exists and this risk may be removed or reduced by recognising that an employee may require extra support (reasonable adjustments) to enable them to effectively carry out their role and this support would be managed in line with Occupational Health advice. The policy provides a framework to identify those at risk and provide support and no further actions are therefore required at this stage. The Equality Impact Analysis is attached at Appendix 1.

Sustainability

3.3.   A Sustainability Impact As developing this policy and Equality Impact Assessment has been undertaken. As a result of performing the analysis, it is evident that a risk of discrimination exists and this risk may be removed or reduced by recognising that an employee may require extra support (reasonable adjustments) to enable them to effectively carry out their role and this support would be managed in line with Occupational Health advice. The policy provides a framework to identify those at risk and provide support and no further actions are therefore required at this stage. The Equality Impact Analysis is attached at Appendix 5sessment has been undertaken. The results of the assessment are attached at Appendix 2.

4. SCOPE

4.1. This policy and procedure will apply to all CCG employees.

5. POLICY PURPOSE/AIMS & FAILURE TO COMPLY

5.1. XX

6. PRINCIPAL LEGISLATION AND COMPLIANCE WITH STANDARDS

Policy principles

6.1. The CCG has legal obligations to the management of stress, under the Health and Safety at Work Act, 1974. Employers must take all reasonable practicable measures to protect the health, safety and welfare of employees at work. Additionally, the Management of Health and Safety at Work Regulations, 1999 require employers to assess health and safety risks, and to introduce prevention and control measures based on those risk assessments.

Bribery Act 2010

6.2. The CCG follows good NHS business practice as outlined in the Business Conduct Policy and the Conflicts of Interest Policy and has robust controls in place to prevent bribery. Due consideration has been given to the Bribery Act 2010 in the development of this policy document and no specific risks were identified.

7. ROLES / RESPONSIBILITIES / DUTIES

Chief Officer Responsibilities

7.1. The Chief Officer of the CCG is responsible for this policy.

Senior Officers and Line Managers

7.2. SMT and line managers at all levels are responsible for:
- Reading and understanding the Health and Safety Executive (HSE) Management Standards for Tackling Work Related Stress (Appendix 1), and ensure the standards are understood and being met within their teams.
- Conduct and implement recommendations from risk assessments within their scope of responsibility in the team.
- Ensure good communication between management and employees, particularly where there are organisational and procedural changes.

- Raise awareness of the managing stress policy with new employees during the induction period.
- Ensure employees are clear on their roles and are trained to undertake those roles effectively.
- Monitor workloads to ensure that employees are not overloaded.
- Monitor and address sickness absence in line with managing sickness absence policy and ensure that return-to-work interviews are completed.
- Monitor working hours and overtime to ensure that employees are not overloaded, including travel.
- Monitor holidays to ensure that employees are taking their full entitlement.
- Attend training as required in good management practice and health and safety guidance.
- Offer appropriate support following critical incidents
- Help employees maintain a healthy work life balance, being perceptive and sensitive and offering appropriate support to members of employees who experience stress outside of work, e.g. bereavement or separation.
- Ensure that employees who may be suffering from stress are aware of the self-referral option and counselling service offered by Occupational Health to employees.
- Encourage self-referrals to Occupational Health or other specialist agencies as required.
- Provide Trade Union representatives with reasonable paid time away from normal duties to attend any training relating to workplace stress.

Occupational Health

7.3.   Occupational Health is responsible for:
- Support individuals who have been off sick with stress and advising them and their managers on a planned return to work and any underlying work-related causative factors, with the employee's consent.
- Carry out Pre-employment checks during Recruitment to provide medical clearance and support for new recruits that may be at risk. Provide relevant information and advice to the manager on how best to manage the individual at the workplace and any adjustment or approach required.
- Provide an external counselling service and refer employees to workplace counsellors or specialist agencies as required.
- Contribute to monitoring and reviewing the effectiveness of measures to reduce stress and effectiveness of the stress management policy.
- Inform the CCG of any changes or developments in the field of work-related stress.
- Provide data on the number of stress related referrals to the CCG
- Provide support and advice on the implementation of actions arising from stress risk assessments.

- Advise managers of those who are referred to Occupational Health when they fall within the Equality Act as a disability due to a stress-related condition.

Health and Safety Advisors

7.4.   Health and Safety advisors are responsible for:.
- Provide support to management in implementing a stress risk assessment.
- Contribute to monitoring and reviewing the effectiveness of measures to reduce stress.
- Inform the CCG of any changes or developments in the field of stress.

YHCS Workforce team responsibilities

7.5.   YHCS workforce team are responsible for:
- Provide support and guidance to managers in applying this policy and procedure.
- Take a lead role in monitoring the effectiveness of measures to address stress by for example, co-ordinating the employee survey action plan, collating sickness absence statistics and identifying trends in information produced relating to the potential primary causes of stress.
- Provide management and leadership development programmes and training, to include training on recognising and managing stress for employees, as appropriate.
- Provide continuing support to managers and employees in a changing environment and encouraging referral to occupational health and the counselling service as and where appropriate.
- Produce monthly sickness absence reports, including stress and anxiety for each department and liaise with and support managers in managing cases.

Employee responsibilities

7.6.   Employees should:
- Take care of their own health and safety at work and others including maintaining and improving their own physical and mental health.
- Raise issues of concern with line manager, or if the source of pressure is your line manager, talk to your trade union representative or employee representative or workforce team.
- Help to identify factors which may cause excessive stress and discuss these with their manager, if appropriate. Take action to address these factors where possible.
- Accept opportunities for support where recommended and/or available.
- Take the opportunity of the service offered by Occupational health to self-refer for counselling should this be appropriate for either work related on non-work related stress.

Health & Safety Committee Responsibilities

7.7. The Committee with responsibilities for Health & Safety should:

- Perform a key role in ensuring that the policy and procedures are implemented and disseminated appropriately.
- Oversee the monitoring of the effectiveness of the policy and procedure through, for example, reasons for absence, the annual employee survey and the workforce information data.
- Ensure that Stress Management policy reviews are conducted in accordance with the monitoring arrangements (see section 7.0 below).
- May commission specific stress-related surveys or focus groups, to assess how the organisation is performing against the HSE Management Standards (**Appendix 3**). If routine data or evidence highlights a need for further investigation.

7.8. Health & Safety responsibilities (Employee representatives – i.e. Trade Union)

- Engage with changes to work practices or work design that could precipitate stress.
- Consult with members on issues of stress including conducting any workplace surveys. This may include investigating complaints by any employee they may represent.
- To access collective and anonymous data from workforce information records where appropriate.
- Conduct joint inspections of the workplace to ensure that environmental stressors e.g. light, temperature and noise, are properly controlled.
- To be meaningfully involved in the risk assessment process.
- Involved in conducting joint inspections of the workplace to ensure that environmental stressors are properly controlled.
- Shall at all times act in accordance with the Safety Representatives and Safety Committee regulations 1977.

8. POLICY IMPLEMENTATION

8.1. Following approval by the Joint Trade Union Partnership Forum (JTUPF) the policy will be sent to:

- The Communications Manager who will disseminate to all staff via the team newsletter process
- The Chairs of the Governing Body, the Council of Members and all other committees and sub committees for dissemination to members and attendees.
- The Practice Managers of all member practices for information, (if appropriate).

9.   TRAINING & AWARENESS

9.1.   This policy will be published on the CCG's website and will be available to staff on the organisation's intranet.

9.2.   The policy will be brought to the attention of all new employees as part of the induction process. Further advice and guidance is available from the Policy and Assurance Manager.

10.   MONITORING & AUDIT

10.1.   The CCG's Senior Management Team is responsible for monitoring the effectiveness of this policy and for providing assurance to the Governing Body regarding compliance with the policy..

10.2.   Monitoring of this policy may form part of the Internal Audit review of governance compliance.

11.   POLICY REVIEW

11.1.   This policy will be reviewed periodically by YHCS Workforce team in conjunction with Health and Safety, managers and Trade Union representatives where applicable. Earlier review may be required in response to exceptional circumstances, organisational change or relevant changes in legislation/guidance.

12.   REFERENCES

12.1.   The policy and procedure has been developed with reference to Health and Safety Executive (HSE) publications which can be accessed via the HSE website: www.hse.gov.uk and also the NHS Employers Guidance on Prevention and Management of Stress at Work, which can be accessed via the website: NHS Employers. It has also being developed in partnership working with Trade Union representatives and the Health & Safety team.

13.   ASSOCIATED POLICIES

13.1.   The following VOY CCG policies are available on the intranet;

- HR02 Absence Management
- HR10 Recruitment and Selection Policy
- HR17 Managing Work Performance

14.   CONTACT DETAILS

Strategy and Assurance Manager
Manager Name: Helena Nowell
Email: valeofyork.contactus@nhs.net
Address: NHS Vale of York Clinical Commissioning Group, West Offices, Station Rise, York. Y01 6GA

Occupational Health:
Address: Centurion House, Centurion Park, Tribune Way, Clifton Moor, York, North Yorkshire, YO30 4RY
Staff can self-refer to Occupational Health by contacting:
Tel: 01904 725099 (Reception)
Email: occupational.health@york.nhs.uk

15.   APPENDIX 1: EQUALITY IMPACT ANALYSIS FORM

1.	**Title of policy/ programme/ service being analysed**
2.	**Please state the aims and objectives of this work.**
3.	**Who is likely to be affected? (e.g. staff, patients, service users)**
4.	**What sources of equality information have you used to inform your piece of work?**
5.	**What steps have been taken ensure that the organisation has paid <u>due regard</u> to the need to eliminate discrimination, advance equal opportunities and foster good relations between people with protected characteristics**
	The analysis of equalities is embedded within the CCG's Committee Terms of Reference and project management framework.
6.	**Who have you involved in the development of this piece of work?**
	Internal involvement: Senior Management team **Stakeholder involvement**: Consultation with Senior Managers **Patient / carer / public involvement**: This is an Internal policy aimed at staff employed by the CCG and contractors working for the CCG. The focus is on compliance with statutory duties and NHS mandated principals and practice. There are no particular equality implications.

7.	What evidence do you have of any potential adverse or positive impact on groups with protected characteristics? Do you have any gaps in information? Include any supporting evidence e.g. research, data or feedback from engagement activities (Refer to Error! Reference source not found. if your piece of work relates to commissioning activity to gather he evidence during all stages of the commissioning cycle)
Disability People who are learning disabled, physically disabled, people with mental illness, sensory loss and long term chronic conditions such as diabetes, HIV)	Consider building access, communication requirements, making reasonable adjustments for individuals etc
N/a	
Sex Men and Women	Consider gender preference in key worker, single sex accommodation etc
N/a	
Race or nationality People of different ethnic backgrounds, including Roma Gypsies and Travelers	Consider cultural traditions, food requirements, communication styles, language needs etc.
N/a	
Age This applies to all age groups. This can include safeguarding, consent and child welfare	Consider access to services or employment based on need/merit not age, effective communication strategies etc.
N/a	

Trans People who have undergone gender reassignment (sex change) and those who identify as trans	Consider privacy of data, harassment, access to unisex toilets & bathing areas etc.
N/a	
Sexual orientation This will include lesbian, gay and bi-sexual people as well as heterosexual people.	Consider whether the service acknowledges same sex partners as next of kin, harassment, inclusive language etc.
N/a	
Religion or belief Includes religions, beliefs or no religion or belief	Consider holiday scheduling, appointment timing, dietary considerations, prayer space etc.
N/a	
Marriage and Civil Partnership Refers to legally recognised partnerships (employment policies only)	Consider whether civil partners are included in benefit and leave policies etc.
N/a	
Pregnancy and maternity Refers to the pregnancy period and the first year after birth	Consider impact on working arrangements, part-time working, infant caring responsibilities etc.
N/a	
Carers This relates to general caring responsibilities for someone of any age.	Consider impact on part-time working, shift-patterns, options for flexi working etc.
N/a	

Other disadvantaged groups This relates to groups experiencing health inequalities such as people living in deprived areas, new migrants, people who are homeless, ex-offenders, people with HIV.	Consider ease of access, location of service, historic take-up of service etc
N/a	

8.	**Action planning for improvement** Please outline what mitigating actions have been considered to eliminate any adverse impact? Please state if there are any opportunities to advance equality of opportunity and/ foster good relationships between different groups of people? An Equality Action Plan template is appended to assist in meeting the requirements of the general duty

Sign off	
Name and signature of person / team who carried out this analysis	
Date analysis completed	
Name and signature of responsible Director	
Date analysis was approved by responsible Director	

17.   APPENDIX 2: SUSTAINABILITY IMPACT ASSESSMENT

Staff preparing a policy, Governing Body (or Sub-Committee) report, service development plan or project are required to complete a Sustainability Impact Assessment (SIA). The purpose of this SIA is to record any positive or negative impacts that this is likely to have on sustainability.

Title of the document	Policy Name
What is the main purpose of the document	
Date completed	
Completed by	

Domain	Objectives	Impact of activity Negative = -1 Neutral = 0 Positive = 1 Unknown = ? Not applicable = n/a	Brief description of impact	If negative, how can it be mitigated? If positive, how can it be enhanced?
Travel	Will it provide / improve / promote alternatives to car based transport?			
	Will it support more efficient use of cars (car sharing, low emission vehicles, environmentally friendly fuels and technologies)?			
	Will it reduce 'care miles' (telecare, care closer) to home?			
	Will it promote active travel (cycling, walking)?			
	Will it improve access to opportunities and facilities for all groups?			
	Will it specify social, economic and environmental outcomes to be accounted for in procurement and delivery?			
Procurement	Will it stimulate innovation among providers of services related to the delivery of the organisations' social, economic and environmental objectives?			

Domain	Objectives	Impact of activity Negative = -1 Neutral = 0 Positive = 1 Unknown = ? Not applicable = n/a	Brief description of impact	If negative, how can it be mitigated? If positive, how can it be enhanced?
	Will it promote ethical purchasing of goods or services?			
Procurement	Will it promote greater efficiency of resource use?			
	Will it obtain maximum value from pharmaceuticals and technologies (medicines management, prescribing, and supply chain)?			
	Will it support local or regional supply chains?			
	Will it promote access to local services (care closer to home)?			
	Will it make current activities more efficient or alter service delivery models			
Facilities Management	Will it reduce the amount of waste produced or increase the amount of waste recycled? Will it reduce water consumption?			
Workforce	Will it provide employment opportunities for local people?			
	Will it promote or support equal employment opportunities?			

Domain	Objectives	Impact of activity Negative = -1 Neutral = 0 Positive = 1 Unknown = ? Not applicable = n/a	Brief description of impact	If negative, how can it be mitigated? If positive, how can it be enhanced?
	Will it promote healthy working lives (including health and safety at work, work-life/home-life balance and family friendly policies)?			
	Will it offer employment opportunities to disadvantaged groups?			
Community Engagement	Will it promote health and sustainable development?	0		
	Have you sought the views of our communities in relation to the impact on sustainable development for this activity?	N/a		
Buildings	Will it improve the resource efficiency of new or refurbished buildings (water, energy, density, use of existing buildings, designing for a longer lifespan)?			
	Will it increase safety and security in new buildings and developments?			

Domain	Objectives	Impact of activity Negative = -1 Neutral = 0 Positive = 1 Unknown = ? Not applicable = n/a	Brief description of impact	If negative, how can it be mitigated? If positive, how can it be enhanced?
	Will it reduce greenhouse gas emissions from transport (choice of mode of transport, reducing need to travel)?			
	Will it provide sympathetic and appropriate landscaping around new development?			
	Will it improve access to the built environment?			
Adaptation to Climate Change	Will it support the plan for the likely effects of climate change (e.g. identifying vulnerable groups; contingency planning for flood, heat wave and other weather extremes)?			
Models of Care	Will it minimise 'care miles' making better use of new technologies such as telecare and telehealth, delivering care in settings closer to people's homes?			
	Will it promote prevention and self-management?			

Domain	Objectives	Impact of activity Negative = -1 Neutral = 0 Positive = 1 Unknown = ? Not applicable = n/a	Brief description of impact	If negative, how can it be mitigated? If positive, how can it be enhanced?
	Will it provide evidence-based, personalised care that achieves the best possible outcomes with the resources available?			
	Will it deliver integrated care, that co-ordinate different elements of care more effectively and remove duplication and redundancy from care pathways?			

18.   APPENDIX 3: PART 2 - PROCEDURE

Stress risk assessment process

Procedure

18.1.   The procedural section of this Policy and Procedure is concerned with the process of risk assessments. Where Managers are concerned about an individual's level of stress or several employees in a department, e.g. highlighted by high sickness absence, high turnover, stress documented by a General Practitioner, changes in behaviour etc., they should follow the process below.

MSWRS Step 1: Identifying the hazards

18.2.   The hazards of work-related stress can be identified using the HSE Management Standards listed in **Appendix 1**. The standards cover six key areas and each standard provides statements about good management practice in each of the areas. It is a requirement under the Management of Health and Safety at Work regulations (MSWRS) to conduct risk assessments. Managers must identify 'hot-spots' by undertaking a systematic risk assessment using the MSWRS. Each of the six factors does not always operate singly, often they combine or interact.

MSWRS Step 2: Decide who may be harmed and how

18.3.   Where Managers are concerned about an individual's level of stress or several employees in a department, e.g. highlighted by high sickness absence, high turnover, stress documented as the reason for absence by a General Practitioner, etc., they should refer to **Appendix x** and flow chart for managers in section 11. Employees can also refer to the flow chart for employees in section 11 for guidance.

18.4.   Where the stressor is believed to be work-related, the Manager should liaise with the nominated HR Lead to ensure that the HSE Management Standards Indicator Tool (**Appendix x**) is completed. The questionnaire is made up of 35 items that ask about 'working conditions' that are well known to be potentials for work-related stress. These working conditions correspond to the six stressors of the Management Standards. The employee answers according to how they feel about these aspects of their work.

18.5.   Attention is drawn to the facility for the individual to discuss the completed Stress Risk Assessment with a nominated person other than their Manager if this is appropriate.

18.6.   The responses to the questionnaire can be entered into the HSE online Analysis tool: http://www.hse.gov.uk/stress/standards/pdfs/analysistool.xls The Analysis Tool computes an average figure for each of the six Management Standards.

18.7.   In the event that the identified stress is allegedly caused by the Manager then the nominated Manager supporting the employee should forward the Risk Assessment Tool to the Human Resources Department.

18.8.   A copy of the questionnaire (and results of the online tool if used) should then be placed in the individual's personal file.

MSWRS Step 3: Evaluate the risk and take action

18.9.   The MSWRS approach directs the manager to both evaluate the risk and take action. The manager should:

- Consult with the employee/s to discuss problem area/s in more detail.
- Work in partnership with employees and their representatives to develop an action plan.
- Ensure that issues affecting employee/s are addressed.
- Feedback results to employee/s, with a commitment to follow-up.
- Record what you have done.

MSWRS Step 4: Record your findings

18.10. If the indicator tool results identify area/s of concern, an action plan to address the issues identified as potential stressors by employees or employee groups should be compiled. The online analysis tool will give a 'score' of each area of the management standards. The action plan should include:

- What the problem is
- How the problem was identified
- What will be done in response
- How this solution was arrived at
- Who is responsible for the delivery of the plan/target
- Timescales of the plan/target
- A commitment to provide feedback to employee/s on progress
- A date for reviewing the plan

18.11. The action plan needs to be agreed with employees, senior management and employee representatives. The final plans should be shared with employee/s. There is an action plan template available at www.hse.gov.uk

MSWRS Step 5: Monitor and review

18.12. The action plan should be monitored and reviewed when there is a significant change, an accident and annually to ensure that the actions are being completed. The HSE recommend that one way to measure progress is to use follow up surveys after a period of time. This would be as well as any arrangements that have been established to talk about stress on a regular basis.

What Is Stress?

18.13. There is a difference between stress and pressure. We all experience pressure on a daily basis, and need it to motivate us and enable us to perform at our

best. It's when we experience too much pressure without the opportunity to recover that we start to experience stress.

18.14. The Health and Safety Executive (HSE) define stress as "the adverse reaction people have to excessive pressure or other types of demand placed on them". This makes an important distinction between pressure, which can be a positive state if managed correctly, and stress which can be detrimental to health.

18.15. We can all feel stressed at times when we feel as though everything becomes too much, when things get on top of us, or when we feel as though we are unable to cope. It affects us in different ways at different times and is often the result of a combination of factors in our personal and working lives.

18.16. The HSE breaks down the term stress into 6 key areas or 'potential primary' stressors, these are: -

- Demands: includes issues like workload, work pattern and the work environment;
- Control: includes how much say the person has in the way in which they do their work;
- Support: includes the encouragement, sponsorship and resources provided by the YHCS, line management and colleagues;
- Relationships: includes promoting positive working to avoid conflict and dealing with unacceptable behaviour;
- Role: includes whether people understand their role within the YHCS and whether the YHCS ensures that the employee does not have conflicting roles;
- Change: includes how the YHCS and its line managers manage and communicate the change process. (See Appendix 4 for further details)

18.17. Stress can either be work related or caused by personal circumstances, but in either case this can impact on the workplace and the performance of the individual at work.

References

- Health and Safety at Work Act 1974
- Management of Health and Safety at Work Regulations 1999
- NHS Employers Guidance on Prevention and Management of Stress at Work: NHS Employers
- Health and Safety Executive – Work-Related Stress: www.hse.gov.uk/stress
- Insert link on intranet for access to HR policies on recruitment, managing sickness absence and managing performance.

Appeal Process

18.18. If employees have any concerns about the way in which their case has been dealt with then they have the right to raise a grievance via the Grievance Policy.

19. APPENDIX 4: STRESS IDENTIFICATION AND REFERRAL FLOWCHART FOR MANAGERS

Trigger for using 'HSE Indicator tool', e.g.high sickness absence; issue raised by employee; stress identified on 'fit note'; changes in employee's behaviour etc.

Managers asks employee if they are concerned about any work or non-work related 'stressors'. This may be an ongoing process

Non – work related stressor

Manager to determine whether these stressors are impacting on the employee's job

Manager asks if there are any ways in which work can support with this

No

Yes

No

Manager to make employee aware of other support, e.g. GP, family support etc.

Manager to make employee aware of support mechanisms available, e.g. Occupational Health, flexible working, annual leave etc.

No further action required

Work related stressor

Manager to advise on available support mechanisms, e.g. Counselling, Occupational Health etc

Employee asked about willingness to complete 'Individual Stress Risk Assessment'

No

Yes

Manager to refer to Occupational Health

Employee to complete risk assessment and discuss with manager or nominated person

Manager and employee to agree actions to manage the situation. Record these on the risk assessment tool, set review date and place on the employee's file

If no agreement can be reached, refer to HR for guidance

20. APPENDIX 5: STRESS – WHERE TO GO FOR HELP

Aware of feeling stressed?
e.g. irritable, anxious, difficulty concentrating, increasing use of alcohol etc.

Colleagues, family or friends comment on you appearing stressed, irritable etc.

Take time to consider what you may be finding difficult and sources of support available. Discuss this with somebody

WORK RELATED ISSUES

NON - WORK RELATED ISSUES

Talk to your line manager, or If the source of pressure is your line manager, talk to your trade union representative or employee representative or HR.

Work and non – work related

Take care of yourself and use your support network

Consider completing 'HSE Indicator Tool'

Get good information about stress and sources of support – see attached leaflet

Identify course of action to address stressors, with manager

Consider consulting your GP, Occupational Health or your line manager

Use additional sources of support, eg Occupational Health, Professional Body etc

21.   APPENDIX 6: HSE MANAGEMENT STANDARDS

21.1.   The Management Standards approach has been developed by the Health and Safety Executive (HSE) to reduce the levels of work-related stress reported by British workers.

21.2.   The standards and supporting processes are designed to:

- Help risk assessment for stress
- Encourage employers, employers and their representatives to work in partnership to address work – related stress throughout the organisation
- Provide a yardstick by which organisation can gauge their performance in tackling the key causes of stress

21.3.   The Management Standards define the characteristics, or culture, of an Organisation where stress is the being managed effectively. They are listed here and can also be found on www.hse.gov.uk/stress/standards along with a comprehensive tool kit.

21.4.   The Management Standards cover six key areas of work design that, if not properly managed are associated with poor health and wellbeing, lower productivity and increased sickness absence. In other words, the six Management Standards cover the primary sources of stress at work. These are:

Demands: Includes issues like workload, work patterns and the work environment

21.5.   The standard is that:

- Employees indicate that they are able to cope with the demands of their jobs; and
- Systems are in place locally to respond to any individual concerns.

21.6.   What should be happening/states to be achieved?

- YHCS provides employees with adequate and achievable demands in relation to the agreed hours of work; People's skills and abilities are matched to the job demands; Jobs are designed to be within the capabilities of employees; and
- Employees' concerns about their work environment are addressed.

Control: How much say the person has in the way they do their work

21.7.   The standard is that:

- Employees indicate that they are able to have a say about the way they do their work; and
- Systems are in place locally to respond to any individual concerns.

21.8.   What should be happening/states to be achieved?

- Where possible, employees have control over their pace of work;
- Employees are encouraged to use their skills and initiative to do their work;

- Where possible, employees are encouraged to develop new skills to help them undertake new and challenging pieces of work;
- The organisation encourages employees to develop their skills;
- Employees have a say over when breaks can be taken; and
- Employees are consulted over their work patterns.

Support: Includes the encouragement, sponsorship and resources provided by the organisation, line management and colleagues

21.9. The standard is that:

- Employees indicate that they receive adequate information and support from their colleagues and superiors;
- Systems are in place locally to respond to any individual concerns.

21.10. What should be happening/states to be achieved?

- The organisation has policies and procedures to adequately support employees;
- Systems are in place to enable and encourage managers to support their employees;
- Systems are in place to enable and encourage employees to support their colleagues;
- Employees know what support is available and how and when to access it;
- Employees know how to access the required resources to do their job; and
- Employees receive regular and constructive feedback.

Relationships: Includes promoting positive working to avoid conflict and dealing with unacceptable behaviour

21.11. The standard is that:

- Employees indicate that they are not subjected to unacceptable behaviours, e.g. bullying at work; and
- Systems are in place locally to respond to any individual concerns.

21.12. What should be happening/states to be achieved?

- The YHCS promotes positive behaviours at work to avoid conflict and ensure fairness;
- Employees share information relevant to their work;
- The organisation has agreed policies and procedures to prevent or resolve unacceptable behaviour;
- Systems are in place to enable and encourage managers to deal with unacceptable behaviour; and
- Systems are in place to enable and encourage employees to report unacceptable behaviour.

Role: Whether people understand their role within YHCS and whether the YHCS ensures that the person does not have conflicting roles

21.13. The standard is that:

- Employees indicate that they understand their role and responsibilities; and
- Systems are in place locally to respond to any individual concerns.

21.14. What should be happening/states to be achieved?

- The organisation ensures that, as far as possible, the different requirements it places upon employees are compatible;
- The organisation provides information to enable employees to understand their role and responsibilities;
- The organisation ensures that, as far as possible, the requirements it places upon employees are clear; and
- Systems are in place to enable employees to raise concerns about any uncertainties or conflicts they have in their role and responsibilities.

Change: How organisational change (large or small) is managed and communicated in the organisation

21.15. The standard is that:

- Employees indicate that the organisation engages them frequently when undergoing an organisational change; and
- Systems are in place locally to respond to any individual concerns.

21.16. What should be happening/states to be achieved?

- The organisation provides employees with timely information to enable them to understand the reasons for proposed changes;
- The organisation ensures adequate employee consultation on changes and provides opportunities for employees to influence proposals;
- Employees are aware of the probable impact of any changes to their jobs. If necessary, employees are given training to support any changes in their jobs;
- Employees are aware of timetables for changes;
- Employees have access to relevant support during changes.

22.   APPENDIX 7: POSSIBLE SIGNS, SYMPTOMS AND CONSEQUENCES OF STRESS

22.1.   Stress can show itself in many different ways and the signs and symptoms of stress vary from one individual to another. Some of the signs and symptoms may include the following:

Behavioural

Short term	**Long term**
Over indulgence in smoking/alcohol/drugs	Marital/family breakdown
Impulsive behaviour/apathy	Smoking/alcohol/drugs abuse
Errors/accidents	
Negative effect on inter-personal skills	
Reduced work performance/job loss	

Physical

Short term	**Long term**
Headaches	Heart disease
Backaches	Hypertension
Disturbed sleep patterns/tiredness	Ulcers
Nausea/dizziness	Poor general health
Indigestion	Insomnia
Chest pain	

Emotional

Short term	**Long term**
Anxiety/depression anxiety	Chronic depression &
Lack of motivation	Neurosis
Difficulty in concentrating	Mental breakdown
Boredom	Irritability
Low self esteem	
Panic attacks	

Possible consequences of stress in the workplace:

- Reduced motivation & commitment to work
- Reduced morale
- Decreased productivity
- Poor judgement
- Reduced quality of patient care
- Increase in errors and accidents
- Tension & conflict between colleagues

- Increased absenteeism
- High employees turnover
- Effects on home / family life
- Whole teams, department and organisations can suffer from stress in the same way as individuals do.

23.   APPENDIX 8: HINTS & TIPS WHICH MAY HELP PEOPLE TO COPE BETTER WITH STRESS

If there's a problem that's worrying you, whether personal or professional, our occupational health services may be able to help (see Part 1, section 12). These services are available to all staff on a self-referral basis. You can download the self-referral form from the CCG's intranet. In addition to support available from the Occupational Health department, the following ideas may also help:

- Rest & relaxation – learning to relax
- Take a lunch break away from your work place
- Exercise – take regular exercise.
- Lifestyle – making time for leisure activities and interests
- Talking – talking things through with friends or relatives can help
- Take time to think – thinking time each day can help to manage time and priorities
- Good health – eating sensibly, getting enough rest & avoiding harmful effects of alcohol and tobacco
- Not being afraid to ask for help

Other help is available from the following organisations:

Shift: **www.shift.org.uk**

Mind: **www.mind.org.uk**

Sainsbury Centre for Mental Health: **www.scmh.org.uk**

Mental Health Foundation: **www.mentalhealth.org.uk**

Rethink: **www.rethink.org**

PsychologyOnline is free for UK NHS patients in many areas. Alternatively, you can purchase therapy sessions directly through our private service Thinkwell™. They deliver Cognitive behavioural therapy (CBT) over the internet. CBT helps people look at:

- How they think about themselves, the world and other people
- How their actions affect their feelings and thoughts

Samaritans: www.samaritans.org Telephone 08457 90 90 90 (24 hours a day) or email jo@samaritans.org . Samaritans provide confidential, non-judgemental emotional support for people experiencing feelings of distress or despair, including those that could lead to suicide. You can phone, email, write a letter or in most cases talk to someone face to face

24.   APPENDIX 9: HSE MANAGEMENT STANDARDS STRESS INDICATOR TOOL

http://www.hse.gov.uk/stress/standards/downloads.htm