

Managing Stress and Enhancing Psychological Wellbeing Policy

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The Trust will not tolerate unlawful discrimination on the grounds of the protected characteristics of: age, disability, gender reassignment, race, religion/belief, gender, sexual orientation, marriage/civil partnership, pregnancy/maternity. The Trust will not tolerate unfair discrimination on the basis of spent criminal convictions, Trade Union membership or non-membership. In addition, the Trust will have due regard to advancing equality of opportunity between people from different groups and foster good relations between people from different groups.

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1. Policy Statement

- 1.1 This document outlines the Policy and Procedures for Managing Stress and Enhancing Psychological Wellbeing in the Workplace for the East of England Ambulance Service NHS Trust (the Trust).
- 1.2 The Trust is committed to maintaining the health and safety of its employees in the work environment. The Trust recognises that this duty of care extends to psychological health as well as physical health. Employees also have a duty of care to report aspects of work that may affect their health and safety as required by the Health and Safety at Work Act 1974. The Trust and its employees have a responsibility to identify and manage work related stress by working in partnership.
- 1.3 The Management of Health and Safety at Work Regulations (1999) imposes a duty on employers to make a suitable and sufficient risk assessment. This duty extends to psychological risks to health and is a statutory duty for all employers.
- 1.4 All employees within the Trust may be exposed to stress; however, the nature of ambulance service work can require employees to be exposed to distressing situations during their work which are not normally experienced by other health care workers. Non-work related stress issues can combine with work related stress to produce pressures which can be detrimental to the physical and/or mental wellbeing of employees and to the smooth running of the Trust.
- 1.5 The Trust meets the recommendations of the Health and Safety Executive's (HSE) Management Standards for Work Related Stress (MSWRS 2005) (see Appendix 1) in identifying and managing work related stress by distribution of the National Staff Survey and the actions arising from feedback. The Trust provides appropriate support mechanisms.

2. Definitions

- 2.1 The Health and Safety Executive defines stress as: "A reaction people have when excessive pressures or demands are placed upon them, and arises when an individual believes they are unable to cope" The common term for these pressures or demands is "stressors" and a person's reactions to stressors are termed "stress responses."
- 2.2 Some pressure is vital to all of us, but when we experience excessive stressors or other types of demands being placed upon us, particularly over a period of time, it can then become detrimental to health. It is important to remember that reaction to stress is a very individual experience. Individual stress can be influenced by our own beliefs, attitudes and unrealistic expectations of others. Individual reaction to stressful situations may also be influenced by our conditioning, cultural background, education, life experiences, states of health and personality type.

3. Scope

3.1 This policy applies to all employees of the Trust and all those carrying out duties on behalf of the Trust.

4. Access To The Policy

- 4.1 All employees are entitled to access to this policy which is located in the HR Policies and Procedures Folders and/or on the Trust's Intranet. Copies are also available from the Human Resources Department and any employee can seek guidance from line management, their trade union representative or the Human Resources Department.
- 4.2 Employees and managers may also wish to consult related Trust policies such as Equal Opportunities, Grievance, No Smoking, Sickness Absence Management, Disciplinary Policy (Managing Staff Conduct and Performance Procedure), Dignity at Work, Occupational Health and Wellbeing, Standards of Business Conduct, Conflicts of Interest and Secondary Employment, Violence and Aggression procedure, Major Incident Plan and EEAST Inquest Guidance.

5. General Principles

- 5.1 To demonstrate the Trusts commitment to the HSE's MSWRS (2005) by the following:
 - 5.1.1 To work in partnership with employees and the staff side to develop working practices that reduce the factors that may lead to stress in the workplace and to ensure that appropriate risk assessments are undertaken so as to reduce and control the risk of stress. These risk assessments will be regularly reviewed in particular during periods of organisational change and changes in work demands.
 - 5.1.2 To manage stress through both effective leadership and management practices by providing mandatory training for managers and supervisors and by encouraging employees to recognise and to be involved in the management of stressors which affect them.
 - 5.1.3 To provide adequate resources to enable the Health and Safety Committee to develop effective procedures to reduce and manage work related stress in order to support individuals who may be affected.
 - 5.1.4 To provide employees with information/training on the management of work related stress (such as being called as a witness, organisational change etc.) and to offer access to immediate support through their line manager, and access to a comprehensive Employee Assistance Programme (EAP)
 - 5.1.5 To provide employees with ongoing support through managers, Human Resources advice, Occupational Health and access to a comprehensive EAP, which provides access to mediation, confidential counselling and legal advice.

6. Roles and Responsibilities

- 6.1 The Chief Executive has a responsibility to ensure that the general principles of this policy are followed and that:
 - They are fully implemented and supported by Directors and Heads of Departments;
 - The duty of care under current legislation is fully complied with;
 - Support mechanisms to aid the promotion of staffs health and wellbeing are in place.

6.2 Managers responsibilities are to:

- Attend training and updates as required by the Trust in order to raise personal awareness and deliver effective management practices and implementation of specific action plans and interventions for reducing and managing work related stress;
- At the request of Occupational Health, the employee or as identified by the manager, undertake work related stress risk assessments in a timely manner within their working areas and act on their recommendations where possible;
- Ensure that employees have had appropriate training to carry out their duties;
- Monitor planned workloads;
- Monitor working hours, overtime working and the taking of annual leave to ensure that employees comply with the current policies relating to annual leave and working hours management;
- Offer support to employees that maybe experiencing identified stress outside of work e.g. bereavement or family issues;
- Ensure that the EAP contact information is available to employees;
- Ensure that all employees declaring/identifying anxiety/stress/depression are referred immediately to OH.

6.3 The responsibilities of the Human Resources Department are to:

- Provide guidance to managers and employees on the Trust's policies related to the management of work related stress;
- Assist and support the implementation of the stress management standards within the Trust;
- Monitor the effectiveness of measures to address stress by collating statistical sickness absence evidence:
- Provide, in conjunction with the Occupational Health Services, continuing support to managers and employees in a changing environment and encourage access to confidential EAP helpline which provides counselling and other support services as appropriate;
- Keep the provisions within this policy in line with employment legislation and best practice people management principles.

The responsibilities of the Health and Safety Committee are to:

- Contribute to arrangements to ensure this policy is implemented across the Trust;
- Monitor and review the effectiveness of measures to reduce stress at work:
- Contribute to the provision of information to the Staff Partnership Forum, Executive Team and the Trust Board regarding the implementation of this policy and the stress management standards;
- Contribute to the provision of information to the Staff Partnership Forum, Executive Team and the Trust Board on the efficacy of this policy and the

measures in place within the Trust to reduce and manage work related stress.

- 6.5 The responsibilities of the Health and Wellbeing Department are to:
 - Provide specialist advice and training as required including training on stress awareness in self and others;
 - Contribute to training and support of managers in the implementation of the stress management standards;
 - Provide, in conjunction with the Human Resources Department, monitoring of levels of occurrence of stress and other illnesses associated with stress as well as identifying trends including statistical evidence of related counselling referral;
 - Contribute to sickness absence management by engagement with employees who have been off sick with stress and their managers to provide advice and/or recommendations for a planned return to work;
 - Advice on support services such as EAP helpline, mediation, the Human Resources Department, Primary Care providers and external agencies as required;
 - Work in conjunction with the Health and Safety Committee and where applicable Integrated Governance Committee on developments in stress at work activity;
 - Support the Trust in ensuring that all relevant legislation and standards are adhered to.
- 6.6 The responsibilities of all employees and all those carrying out duties on behalf of the Trust are to:
 - Familiarise themselves with information regarding the management of stress at work and Trust policies and procedures provided at induction and in the local work environment;
 - Be aware of their own responsibility for health and safety at work;
 - Inform their manager and where applicable the Human Resources
 Department and the Health and Wellbeing Department if they are
 experiencing difficulties at work which are or could result in work related
 stress.

In addition to this, they should recognise that they are able to:

- Raise concerns with their line manager, the Health and Wellbeing Department or the Human Resources Department regarding any physical or psychological stress symptoms which affect them at work;
- Avail themselves of support mechanisms when recommended e.g. EAP mediation and should accept opportunities for counselling/ therapy when recommended.
- 6.7 The responsibilities of the Safety/Staff side Representatives are to:
 - Work in partnership with management to ensure that the general principles of this policy are adhered to;
 - Be involved in the risk assessment process when applying the stress management standards:
 - Conduct joint workplace inspections with management enabling the reduction where possible of environmental stressors;
 - Be allowed access to statistical and anonymous data concerning stress related issues;

- Attend training and updates as required by the Trust in order to raise personal awareness and contribute to the development and implementation of this policy.
- 6.8 Managers, the HR department and trade union representatives are responsible for providing advice and guidance to employees on the application of this policy and procedure, as well as bringing any mutually beneficial improvements to this policy to the attention of the Trust.

7. Bench-Marking

7.1 To provide a good bench mark by which to assess the Trust's current position and to measure the effectiveness of its training and the support mechanisms the Trust will use any anonymised information such as annual staff survey data, return to work interviews, Personal Development Reviews and previous support initiatives achieved in compliance with Improving Working Lives and Standards for Better Health requirements.

8. Risk Assessment

- 8.1 The Health and Safety Executive requires every employer to conduct risk assessments for health and safety hazards including work related stress.
- 8.2 Risk management is part of every managers day to day responsibilities, it should inform judgements about the appropriateness of policy options and/or service delivery methods, and as such should be integral to both strategic and operational management.
- 8.3 Stress risk assessments should be carried out by managers on the identification or notification of a hazard (see Appendix 5).
- 8.3 Work related stress should be assessed by using the risk assessment template and National Patient Safety Agency (NPSA) Risk Grading Tool (Refer to the Risk Management Procedure for details).
- 8.4 The Trust is committed to adhering to these HSE requirements in carrying out risk assessments and following the HSE recommendations of a five step approach when implementing risk assessments:
 - Step 1 identify hazards
 - Step 2 assess the risks to health who might be harmed and how
 - Step 3 evaluate the risk and identify actions develop control measures
 - Step 4 record findings and implement action plan
 - Step 5 monitor and evaluate effectiveness, communicate results

Specific guidance to the five step risk assessment as related to work related stress is given as Appendix 2

9. Identification, Analysis and Evaluation of workplace stressors

- 9.1 The Trust can identify workplace stressors by examining existing information, for example;
 - Sickness absence information

- Accidents at work
- Occupational Health information
- Turnover/workforce data
- 9.2 The Trust can evaluate the effectiveness of any risk reduction measures by collating data on turnover, sickness absence and productivity together with statistical evidence of accessing support services such as EAP, and mediation. Progress can be measured against emerging trends or changes in this data.
- 9.3 The published responses to the National Staff Survey enables the Trust to monitor its own performance against other organisations nationwide and to suggest interim and longer term targets for action.

10. Managing Stress Related Illness

- 10.1 Stress related illnesses can be managed from three perspectives, by way of organisational, managerial and/or personal self-management (see Appendix 3).
- 10.2 When carrying out a risk assessment management and employees can identify any work related stress using the non-exhaustive list of stressors at Appendix 2.
- 10.3 Once a stress related illness has been identified, it is important that managers, employees and all those carrying out duties on behalf of the Trust which could include normal day to day responsibilities or the requirement to attend an inquest as a witness or other similar event, are aware of what sources of support are available and where they can be found (see Appendix 4).
- 10.4 As stress is an individual response to a perceived pressure people will have different coping thresholds and it can be difficult to predict who is likely to suffer with stress. A further complication is that people have different coping thresholds depending on other circumstances in their lives. It should therefore be remembered that stress can be accumulative and is not necessarily predictable.
- 10.5 Good management techniques should alert managers to changes in their employees, such as, personality changes, performance etc. that may indicate that an individual is unable to cope with the workload. However some people will not display overt signs and managers cannot always predict when someone is stressed. Often the first indication is when an episode of sickness occurs with stress/anxiety or depression on the certificate. Once alerted to a potential issue managers should discuss this with the employee concerned and if necessary complete a referral to the EAP for ongoing support. Referral forms can be found on the Trust's intranet.

11. Monitoring

11.1 The Staff Partnership Forum will ensure that agreed monitoring processes are in place. See Appendix 6.

12. Review

12.1 This policy will be reviewed on a three yearly basis or amended in the light of new employment legislation and/or relevant case law.

THE HSE MANAGEMENT STANDARDS FOR WORK RELATED STRESS STATE:

Demands

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.

Control

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.

Support

The standard is that:

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

Relationships

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.

Role

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.

Change

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.

FIVE STEPS TO RISK ASSESSMENT RELATED TO WORK RELATED STRESS

Step 1 – Identifying the Hazards

Examine existing information - Information may exist which can assist in identifying potential problems, such as:

- Sickness absence information. Look at records of absence generally and stress related absence in particular. Is sickness absence increasing? Are there trends emerging? Is stress cited as a reason for absence? Do some groups of staff have more stress related absence than others? Does gender/ethnicity/age/race or religion affect stress related absence?
- Accidents at work. Identify through recognised incident reporting channels.
 Are there any increases in accidents/near misses? Do some teams/departments have more incidents than others?
- Staff surveys. Checking the results of staff surveys may also help to identify areas of concern.
- Occupational Health. Have the Occupational Health Advisors alerted you to any potential stress related issues affecting your staff in general?
- Ask staff. Managers should engage their staff in the risk assessment process by having group discussions and/or individual discussions to help identify potential hazards. However this process should not be used in isolation and an assessment of the local environment should also be included.
- Turnover. Are these staff turnover figures high in some areas without any obvious reason? Is it attributable to stress related absence?
- Human Resources Department. Employee relations data kept by Human Resources?

Step 2 – Assess the risk to health

This non-exhaustive checklist (not in any order of priority) highlights the stressors identified above and can be used by managers and supervisors to assist in the risk assessment process. Non-work based stressors are also included as the combined effect can have a detrimental effect on mental health.

Work-based

- Lack of clear organisational objectives, values or role
- Failure to meet objectives or deadlines and to prioritise work
- Poor communication, information, consultation or involvement in change
- Inadequate management support
- High level of responsibility for people
- Career uncertainty or frustration over career ambitions

- Lack of competence or over-promotion
- Poor status or lack of recognition
- Threat to job security (including threat of redundancy)
- Uncertainty in work or restructuring of role
- Low participation in decision making
- Lack of control over workload and pace
- Social or physical isolation
- Interpersonal conflict and poor relationship with peers
- Harassment
- Constant dealing with conflict and complaints
- Sustained work overload (including excessive overtime) or under load (including boring or repetitive work)
- Unsociable work hours and shift working
- Dealing with death and major trauma (including breaking bad news)
- Attending external events as a witness

Non- work based

- Personal stress events at home (e.g. divorce or bereavement)
- Change in living conditions (e.g. moving house)
- Social isolation (e.g. lack of friends)
- Low level support at home
- Long distance commuting
- Sudden change to health
- · Conflicting demands of work and home
- Problems caused by both partners following their careers
- Family care responsibilities and pressures
- Financial pressures

Step 3 – Implement the control measures

Having identified potential areas of harm, the next step is to identify who is at risk and find ways of reducing the risk. Control measures will vary depending on the risk identified. Examples might include:

- Ensure all staff have access to information/training on work related stress.
- Ensure staff have clear job descriptions and understand their role.
- Have a system of setting objectives that are achievable and monitor performance.
- Involve staff in the decision making process where possible.
- Identify any training needs and ensure training takes place.
- Where high pressure tasks or repetitive work are identified, consider job rotation.
- Consider flexible working options.
- Offer training or support in coping mechanisms.

Step 4 – Record your findings

Develop and implement the action plan. This may include prioritising, setting goals to work towards, demonstrating the Trust's commitment to address staff concerns. An action plan should include;

- · What the problem is
- How the problem was identified
- What the Trust is going to do in response
- How the Trust arrived at this solution
- Who is responsible for delivery of action plan
- Review date/milestones
- · Method of feedback to staff

Step 5 - Monitor and Review

Monitor the control measures put in place and revise them as necessary. Review the risk assessment when changes in staffing or process occur. Ensure accurate records are kept.

APPENDIX 3

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SUGGESTED WAYS TO TRY TO REDUCE THE EFFECTS OF WORKPLACE PRESSURES AND DEMANDS

Organisational Approach

- Work towards improving communication to all levels of staff, so that individuals will be more informed of forthcoming changes and those which have already taken place.
 All individuals should play their part in disseminating information and knowledge which in turn should assist in improving communication.
- Ensure that risk assessments include the potential risks to individuals of "work" related stress.
- Provide training and support to allow individuals to be able to understand their role and cope with their responsibilities.
- Aim to manage existing staff levels appropriately, in a fair and equitable manner, whilst observing the need to meet service demands.
- Acknowledge that individuals are different and respond to stress differently. The
 Trust will be sympathetic and supportive to individuals who are having difficulty in
 coping, and to not foster a culture which links inability to cope with failure.
- Enable that support is provided to individuals following stressful work incidents.
- Enable individuals to report to their line manager or Occupational Health Services (OHS) if they are finding their workplace stressful. Individuals under stress are often Managing Stress and Enhancing Psychological Wellbeing Policy: V5.

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worst placed to recognise stress in themselves and to do something about it. Managers and colleagues should feel able to gently prompt people if they feel someone is suffering as a result of stress from whatever source.

 Enable individuals to know they can access initial confidential consultations with the OHS, or seek advice from the Human Resources Department, a trade union representative. This can be done directly by the individual themselves or via a Manager, to discuss any problems whether work related or personal. If necessary referral can be made to an external counsellor.

Managerial Approach

- Enable support/supervision sessions that allow two way communications between manager and individual and from which information and/or indicators in respect of any work related stress issues should be addressed.
- Ensure that stress at work issues are understood and taken seriously.
- Discuss and agree the most appropriate pathway to progress the issue, i.e. OHS, Dignity at Work, or other relevant Trust policies.
- Keep in regular contact through agreement with the staff in particular if it is a long term absence. If the issue has resulted in absence from work, an appropriate level of mutually acceptable contact should be discussed.
- Whenever appropriate, hold case conferences to try to resolve individual issues as soon as there is an awareness that they may cause stress related health issues amongst individuals.
- Involving individuals when changes to jobs/work environments are taking place and ensuring that training is adequate to maintain the individual's competence to perform.
- Taking action to reduce any uncertainty in respect of changes and job security through prompt and open communications systems.
- Give credit for a job well done!

- Discuss a rehabilitation plan with Occupational Health. It may be necessary to alter hours or duties for a short period on the person's return to work or consider suitable alternative duties for a period of time.
- Where appropriate, meet with the person before their return to work to ensure any workplace stressors are identified.
- Review the stress risk assessment and review if any additional control measures are required.

Individual Approach

- Acknowledge and try to identify the causes of the stress.
- Talk to colleagues, friends or family about how you are feeling. They may be able to give you a different perspective on how to tackle your problems.
- Seek professional help if you feel out of control.
- Manage your time effectively. Try to prioritise work. Make time to think about this.
- Be assertive and learn to say no if you cannot cope.
- Take advantage of training opportunities to extend your knowledge and skills for personal and professional development.
- Learn to delegate. Try not to control every aspect of work processes this can be stressful to both you and other work colleagues.
- Celebrate your successes.
- Take care of your physical health. Exercise even for half an hour each day can have significant benefits to both physical and mental health. You do not have to join a gym!
 Walking, cycling or swimming are all very effective and convenient ways of taking regular exercise.
- Avoid depending on caffeine, alcohol, cigarettes or other stimulants to get you through the day. They can often make stress symptoms much worse.
- Enjoy your time away from work. Make time for activities you enjoy and which you find relaxing. Plan regular treats to give yourself something to look forward to.

APPENDIX 4

Sources of Support at Work

- Occupational Health Service
- Human Resources Department
- Trade union representatives
- External counselling services
- Staff support (diffusers/mediators)

See below:

1. Human Resources Department by locality:

Bedfordshire, Hertfordshire and Cambridge – 01234 243200

Essex - 01245 443344

Norfolk and Suffolk - 01603 424255

2. Occupational Health Services:

Bedfordshire and Cambridge - 01638 718439

Essex and Hertfordshire – 01245 444437

Norfolk and Suffolk - 01638 718439

3. Tackling Work Related Stress, A Guide for Employees, HSE Books

Health and Safety Executive Management Standards for Work Related Stress (2003)

NHS publications:

Working Together

Health at Work in the NHS

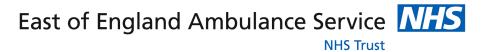
The Provision of Counselling Services for Staff in the NHS (2000)

Improving Working Lives

Standards for Better Health

HSE: Stress Management Standards and Risk Assessment

4. Employee Assistance Programme



Appendix 5

Managers Guide to undertaking Stress Risk Assessments

For an Individual member of staff

1.0 Introduction

- 1.1 Work Related Stress (WRS) exists where people perceive they cannot cope with what is being asked of them at work. As managers you have an obligation to assess and manage the risk of stress, as you would with any Health and Safety at work issue.
 - 1.2 Before undertaking an individual stress risk assessment, it is important that you have completed the Trust's mandatory stress management for managers training programme. This is an e-learning package and takes approx. 30 minutes to complete. You can register for this course through the intranet by clicking http://nww.eastamb.nhs.uk/hr-directorate/education-and-training/cpd/cpd-2008-2009/e-learning-and-workbooks/stress-training-for-managers. You should also make yourself familiar with the Trust's Managing Stress and Enhancing Psychological Wellbeing Policy also available via the intranet.

What do I need to do now?

- 1. Complete stress management e-learning module for managers
- 2. Read the Managing Stress and Enhancing Psychological Wellbeing Policy

2.0 Risk Assessment Process

- 2.1 As with any risk assessment there are 5 key steps in the process. These are:
 - a. Identify the hazard (stressors)
 - b. Decide who might be harmed and how
 - c. Evaluate the risk by
 - i. Identifying what actions have already been taken
 - ii. deciding whether it is enough
 - ii. if it is not, deciding what further actions are appropriate
 - d. Record the findings
 - e. Review the assessment at appropriate intervals

3.0 Identifying the Stressors

3.1 First of all using the template letter in Appendix A invite the member of staff to a meeting to identify the stressors. Please organise the meeting so the staff member has sufficient time to prepare their list of stressors.

- 3.2 The member of staff can bring someone along for support if they wish, either a colleague or a staff side representative.
- 3.3 Hold the meeting with the individual. Together, you should complete the individual stress risk assessment form in Appendix B

What you need to do now?	What y	you	need	to c	ok	now?
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Invite the member of staff to meeting to discuss stressors using template letter Appendix A.

Hold the meeting and complete the individual stress risk assessment form (Appendix B).

- 3.4 The outcome of the meeting should identify:
 - a) the areas of high concern to the member of staff
 - b) what existing controls are in place to reduce the stressor
 - c) their effectiveness,
 - d) any actions required to further reduce the stress,
 - e) who is responsible for those actions
 - f) and any cost to the Trust.
- 3.5 Both the individual and the line manager should sign the individual risk assessment and it should be reviewed in six months time.
- 3.6 The Management of Health and Safety at Work Regulations 1999 requires that, in controlling risks, a hierarchy of controls must apply. These are:
 - Avoid the risks (Examples are: Can you make the work environment safer so that staff are not anxious about the risks of violence or aggression; is it possible to plan the work better so that deadlines are achievable or consider the implications on staff at the planning stage etc);

- Combat the risk at source (by organising the work sensibly and giving people clear roles);
- Adapt the work to the individual, especially in workplace design, the choice of work equipment and the choice of working methods, to alleviate monotonous work and work at a pre-determined rate, and to reduce their effects on health;
- Develop a coherent overall prevention policy which covers technology, organisation of work, staff consultation, working conditions, social relationships and the influence of factors relating to the working environment:
- Give collective protective measures (by tackling stress at source, rather than just providing information and training to individuals, or access to external counsellor); and
- Give appropriate instruction to employees.

4.0 Record the Significant Findings

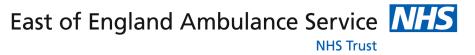
- 4.1 There is a requirement to record the findings of the individual stress risk assessment. Please send a copy to HR for personnel file, if under care of Occupational Health a copy to Occupational Health and please give the person their own copy for their records.
- 4.2 In the case of this type of assessment there may only be significant problems if a large change is planned or there are certain times in the year when pressure is placed on staff to meet deadlines, whether these are organisational or statutory.

5.0 Review the Assessment

- 5.1 Initially it may be prudent to undertake a review after a period of six months or if for some reason the assessment is no longer valid. If after a year this period is too frequent then move to a bi-annual review period.
 - 5.2 The assessment should also be revised if an event on the horizon is brought to your attention that could affect the employee. For example, a change of senior management, a move to another location or a merger with another department.
 - 5.3 Where a domestic situation could impinge on a member of staff, consideration should be given as to how this may affect the risk assessment.

Author: Stress Management Group

Dated: July 2009



Date
Dear XXXXX,
Individual Stress Risk Assessment
The Trust is committed to reducing work related stress wherever possible. It has been identified by yourself/myself/Occupational Health/? that it would be beneficial for the Trust to conduct an individual stress risk assessment with you to try and identify your stressors and to develop an action plan to address them. Please can you attend a meeting with myself on X date at X time, at X venue. You may wish to bring along a colleague or staffside representative for support.
At the meeting we will list your stressors in priority order so it would be useful if you could consider what is the root cause of your stress at work and bring this information along with you to the meeting. Please be re-assured that the information shared at this meeting will be treated with the strictest confidence.
Please do not hesitate to contact me should you need further information.
Yours sincerely
xxxxxxxxxx
Cc: HR, Occupational Health

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December 2015

Appendix B Stress Risk Assessment for an Individual

EAST OF ENGLAND AMBULANCE SERVICE INDIVIDUAL STRESS RISK ASSESSMENT FORM

ASSESSMENT OF RISK DETAILS				
Name of person being stress risk assessed:- Job role:- Name of line manager responsible for stress risk assessment:-				
SITE				
DEPARTMENT				
DIRECTORATE				
DATE OF ASSESSMENT				
TYPE OF RISK	Individual Stress risk assessment			
DETAILS				
LIKEIHOOD				
CONSEQUENCES				

Stressor as identified by Individual	Existing controls in place	Effectiveness of existing controls Adequate Inadequate No controls Uncertain	Action required to eliminate or reduce stressor	Name of person responsible for action	Cost to Trust	Date action to be completed by
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						

9.							
10.							
Overall risk assessment	score	Level of risk					
Date of review of risk assessment							
Signed by individual							
Signed by line manager							

Please send HR a copy for Personnel File. If person is under care of Occupational Health, please send OH copy for OH file.

Risk Scoring System

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December 2015

TABLE 1 – CONSEQUENCE SCORE

	1	2	3	4	5
Descriptor	Insignificant	Minor	Moderate	Major	Catastrophic
Injury (To anyone)	Minor injury not requiring first aid	Minor injury or illness, first aid treatment needed	Reportable to external agencies/statutory bodies (e.g. RIDDOR, HSE, NPSA., etc.)	Major injuries, or long term incapacity / disability (loss of limb)	Death or major permanent incapacity
Patient Experience	Unsatisfactory patient experience no injury	Unsatisfactory patient experience involving first aid treatment – readily resolvable	Mismanagement of patient care requiring more than first aid treatment and is likely to take more than one month to recover / breach of working practices	Serious mismanagement of patient care – major permanent harm / breach of working practices	Totally unsatisfactory patient care / working practices
Complaint / Claim Potential	Locally resolved complaint	Justifiable complaint peripheral to clinical care / management	Justifiable complaint involving lack of appropriate care / management. Claim below excess	Multiple justifiable complaints. Claim above excess	Multiple claims or single major claim

TABLE 2 – LIKELIHOOD SCORE

	1	2	3	4	5
Descriptor	Rare	Unlikely	Possible	Likely	Almost Certain
Frequency	Not expected to occur annually	Expected to occur at least annually	Expected to occur at least every 6 months	Expected to occur at least monthly	Expected to occur at least weekly
Probability	< 1%	1 – 5%	6 – 25%	26 – 60%	> 60%
	Will only occur in exceptional circumstances	Unlikely to occur	Reasonable chance of occurring	Likely to occur	More likely to occur than not

			CONSEQUENCES									
LIKELIHOOD		Insignificant 1	Minor 2	Moderate 3	Major 4	Catastrophic 5						
Rare	1	1	2	3	4	5						
Unlikely	2	2	4	6	8	10						
Possible	3	3	6	9	12	15						
Likely	4	4	8	12	16	20						
Almost Certain	5	5	10	15	20	25						

Management Level

LOW (Green) 1 TO 3 (Unit)

MODERATE (Yellow) 4 TO 6 (Department)

SIGNIFICANT (Orange) 8 TO 12 (Directorate)

HIGH (Red) 15 TO 25 (Corporate)

Appendix 6

What	Who	How	Frequency	Evidence	Reporting arrangeme		Acting on recommendations	Change in practice and lessons to be shared
NHSLA 1.3.9 The organisation has an approved documented process for ensuring that all staff involved in traumatic/stressful incidents, complaints or claims are adequately supported that is implemented and monitored.							l incidents, complaints	
duties	Director of	Policy	Annually	Policy	EMT b	y minuted	Director of Business	Monthly during case

duties	Director of Business Transformatio n	Policy implementa tion EAP usage statistics Sickness absence data	Annually Quarterly At least 3 monthly	Policy implementation EAP usage statistics Sickness absence data	EMT by minuted meetings	Director of Business Transformation disseminating to all relevant stakeholders	Monthly during case review meetings and disseminated via Local Partnership Forums and HRBP meetings and health and safety committee meetings
immediate support offered to staff (internally and, if necessary , externally)	Occupational Health Nurse Advisors HRBP's Managers	Case review meetings	At least 3 monthly	Sickness absence reports and Employee assistance referrals	Health and Wellbeing Manager	Health and Wellbeing Manager and Employee Assistance Programme account manager	Monthly during case review meetings and disseminated via Local Partnership Forums and HRBP meetings
ongoing support offered to staff (internally	Occupational Health Nurse Advisors HRBP's	Case review meetings	At least 3 monthly	Sickness absence reports and Employee assistance referrals	Health and Wellbeing Manager	Health and Wellbeing Manager and Employee Assistance Programme account	Monthly during case review meetings and disseminated via Local Partnership Forums and HRBP meetings

and, if necessary , externally)	Managers					manager	
advice available to staff in the event of their being called as a witness (internally and, if necessary , externally)		Tracking of policy updates and forms via intranet	At least 6 monthly	Intranet access audit trails	Governance to decide	Governance to decide	Governance to decide

What	Who	How	Frequency	Evidence	Reporting arrangements	Acting on recommendations	Change in practice and lessons to be shared
	The organisa d and monitor		approved docu	ımented process fo	or managing the risks a	ssociated with work-	related stress that is
duties	Director of business transformatio	Policy implementa tion	Annually	Policy implementation EAP usage	EMT by minuted meetings	Director of business transformation disseminating to all relevant stakeholders	review meetings and disseminated via Local

		statistics Sickness absence data	Quarterly At least 3 monthly	statistics Sickness absence data			and HRBP meetings and health and safety committee meetings
process for accessing information on the managemen t of work-related stress	Stress Working Group Health and Safety Manager	Policy implementa tion	Annual review	GRS report	SLT by minuted meetings	Stress working group by minuted meetings	Managers and HRBP's in conjunction with OHNA's
process for identifying workplace stressors	Stress Working Group Health and Safety Manager	HSE recommend ations Internal assessmen t tool	Annual review	Stress working group minutes Email correspondence from managers regarding effectiveness of assessment tool	SLT by minuted meetings	Stress working group	Managers and HRBP's in conjunction with OHNA's
requirement to undertake appropriate risk assessment s for the prevention and managemen	Stress Working Group Health and Safety Manager Health and Wellbeing	HSE recommend ations Staff survey findings	Annual	Staff survey findings	EMT	Stress Working Group Health and Safety Manager Health and Wellbeing Department	Health and Safety Manager disseminated to relevant stakeholders

t of work-	Department			
related				
stress				

Document Reference:	Document Title: Managing Stress and Enhancing Psychological Wellbeing Policy
Assessment Date: 20 June 2012	Document Type: HR Agreement
Responsible Director: Leslie Bradley	Lead Manager: Tracey Leghorn

Step 1: Identify main aims of policy

Describe the main aim, objectives and intended outcomes of the proposed project/policy

Aim:

The document outlines the Policies and Procedures for Managing Stress and Enhancing Psychological Wellbeing in the workplace.

Objectives:

Trust is committed to maintaining the health and safety of its staff in the work environment and this policy discusses the arrangements as to how the Trust will implement the HSE Management standards for work related stress 2005.

Intended Outcomes:

See above

Step 2: Collect and Analyse Information

Has any previous work or research been done on equality issues in the area of the proposed project/policy? If so, what were they?

None known

You should ask relevant questions in relation to all the strands equality & diversity, but information gathered should be relevant to your needs that will inform your decisions around the topic you are reviewing. If you identify a need for information that is not available you should consider and plan with the relevant others how this information could be obtained.¹

Gender including transgender	Do you have enough information?	Yes	No
Gender including transgender	What else do you need to know?		
Race	Do you have enough information?	Yes	No
	What else do you need to know?		
Disability	Do you have enough information?	Yes	No
	What else do you need to know?		
Sexual Orientation	Do you have enough information?	Yes	No
	What else do you need to know?		
Age	Do you have enough information?	Yes	No
9.	What else do you need to know?		
Religion & Belief	Do you have enough information?	Yes	No
	What else do you need to know?		

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¹ Refer your need for information and proposal to the Equality & Diversity Steering Group using a copy of this page with your information before proceeding to ensure all similar requests can be coordinated

Step 3:

Identify the level of impact

To help you think about this, you should complete the High, Medium, Low table and give reasons/comments for where:

- (a) The policy/strategy/project could have a positive impact on any of the equality target groups or contributes to promoting equality, equal opportunities and improving relations within equality target groups.
- (b) The policy/project/procedure could have a negative impact on any of the equality target groups, i.e. disadvantage them in any way. If the impact is high, a full Equality Impact Assessment should be completed.

	a. Pos	itive impact		b. Neg	ative impact	t	c. If NONE how did you evidence this?
Equality target group	Low	None	High	Low	None	High	
Gender (including transgender)			X		X		Applies to all equally
Race			X		X		As above
Disability			X		X		As above
Sexual orientation			X		X		As above
Age			X		X		As above
Belief and Religion			X		X		As above

Step 3^a:

Decide if policy is equality relevant

Does the proposed project/policy have an explicit focus on inequalities, human rights and diversity? If so, how?

No. The policy applies to all staff and acknowledges that reaction to stress is an individual response affected by many factors.									
Is there a risk that the proposed project/policy may unintentionally mask or cause a negative impact on equality and diversity?									
No									
Is there a risk of adverse impact? If yes, please list the specific risks. If no, please explain the basis of your judgement.									
No – it applies to all equally									
Step 3 ^b :	ecord findings and produce	action plan							
If there are any potential or actual risks, what action will be undertaken to mitigate the specified risks, or to minimise the adverse impact. Within what timescales will this be done, what are the implications on resources and who will be responsible?									
Findings	Proposed action	Timescale	Implications on resources	Responsible lead					
Please state how the policy	, procedure or process will be monitore	ed for inequalities that r	may arise after the impler	mentation:					
Monitored three yearly									
Summary:									

On the basis of the information/evidence/consideration so far, do you believe that the proposed project/policy will have a positive or adverse impact on equality or diversity? (please circle one)

Positive Impact		Adverse Impact	
Yes	No	Yes	No

Has a significant adverse im	pact been identified that requires a F	full Equality Impact Assessment?
YES	Some Impact Identified Local Actions set out to resolve the imp	pact ² NO
lame of the project/policy lead com	pleting this assessment:	
lame: S Greatorex		I & Wellbeing Manger
Signature:	Date:20 June	2012

Executive Summary Page for Equality Impact Assessment:

² Please ensure that the arrangements for monitoring the implementation and outcomes are stated in the executive summary Managing Stress and Enhancing Psychological Wellbeing Policy: V5.

Document Reference:	Document Title: Managing Stress and Enhancing Psychological Wellbeing Policy		
Assessment Date:	Document Type: HR Agreement		
Responsible Director:	Lead Manager:		
Conclusion of Equality Impact Assessment:			
Recommendations for Action Plan:			
Risks Identified:			
Approved by a member of the executive team:			
YES	NO		
Name:	Position:		
Signature:	Date:		
This whole document should be stored with the master document and a final approved copy must be sent to the Equality & Diversity Lead at Bedford Office			