

MANAGING WORK RELATED STRESS

POLICY

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Associated Documents/ Information			Date Associated Documents/ Information was reviewed

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1.0 INTRODUCTION

- 1.1. This policy is issued and maintained by the Director of People on behalf of the Trust, at the issue defined on the front sheet, which supersedes and replaces all previous versions.
- 1.2. Sherwood Forest Hospitals NHS Foundation Trust recognises that the nature of work undertaken by many of the Trust's employees can be inherently pressured and at times stressful. The Trust therefore acknowledges its legal, moral, and social responsibility for the health, safety and welfare of its employees and recognises that their wellbeing is essential to the delivery of high-quality patient care. The Trust is committed to protecting the health safety and welfare of its employees. The Trust recognises that workplace stress is a health and safety issue and acknowledges the importance of identifying and reducing workplace stressors. Therefore, this policy forms part of an integrated approach to managing a high-quality service-led organisation.

2.0 POLICY STATEMENT

- 2.1 The Trust recognises that colleagues are essential to the provision of high-quality healthcare and is committed to maintaining a working environment that promotes the health and wellbeing of all its colleagues. Colleagues that are physically and psychologically well, are more likely to provide a safe, efficient and effective patient care.
- 2.2 Whilst experiencing challenges at work can be healthy, sustained demands on an individual beyond their ability to cope or being exposed to and or experiencing severe adverse psychological or traumatic events can be harmful and have a negative on both the health and performance of employees.
- 2.1 The Trust recognises that individuals can react differently to work pressures and, whenever possible, will work with the individual to prevent work-related stress. When stress is not prevented or managed well, colleagues can experience burnout.
- 2.2 The Trust will take a proactive and systematic approach to controlling and reducing stress within the workplace through management initiatives, employee support mechanisms, problem identification and solution (risk assessments), and effective organisational policies and procedures.
- 2.3 The Trust will ensure, so far as is reasonably practicable, that excessive stress is minimised from the work environment, and that necessary risk assessments are completed and acted upon in the case of identified workplace stressors.
- 2.4 The Trust encourages a culture where signs of stress are recognised early and appropriately managed.
- 2.5 Colleagues who feel they are suffering from the negative effects of stress should approach their line managers in confidence, in order that necessary support mechanisms can be put in place.

Where the colleague feels that the line manager may be a contributing factor to their suffering from the negative effects of stress, they have the option of contacting [People Operations](#) (Formally Human Resources), [Staff side](#), [Occupational Health](#), [Employee Assistance Programme](#) (VIVUP) or a higher line manager. More Information can be found on the trust website [wellbeing webpages](#)

- 2.6 Managers will ensure adequate rehabilitation of employees returning to work after periods of absence through stress. This may include making adjustments following the stress risk assessment (see appendix 3). Advice can be sort through Occupational Health if required.
- 2.7 This policy serves to promote an organisational culture of individual and peer responsibility for the management of workplace stress, in which stress is positively managed and where colleagues can speak freely about stress and seek help or support.
- 2.8 This policy covers all colleagues employed by the Trust, students working within the Trust and contractors and volunteers working on behalf of the Trust. The guidance in this policy is primarily aimed at protecting colleagues and resources and does not extend to cover patients.
- 2.9 A wide range of policies, procedures and protocols exist to maintain the physical health and safety of employees. Hence, this policy focuses more on enhancing the mental wellbeing of colleagues at work, which includes the effective management of work-related stress and supporting colleagues through traumatic or stressful incidents, grievances, disciplinary actions, complaints, and claims.
- 2.10 In accordance with our Vision and CARE Values, it is acknowledged that colleagues wellbeing is of paramount importance. Wellbeing is an important factor in the job satisfaction and therefore retention of our colleagues and is therefore a management issue for the Trust. This policy is designed to bring existing colleague wellbeing issues to the fore, whilst seeking to create an organisational culture where negative wellbeing issues are identified, minimised and managed before they affect the wellbeing of colleague. We have a clear aim to promote the positive aspects and ideas associated with health and wellbeing at work.

3.0 DEFINITIONS/ ABBREVIATIONS

Term	Definition
The Trust	Means the Sherwood Forest Hospitals NHS Foundation Trust.
Colleague/Colleagues	Means all employees of the Trust including those managed by a third-party organisation on behalf of the Trust.
Stress	The Health and Safety Executive (HSE) define stress as “the adverse reaction people have to excessive pressures or other types of demand placed on them”.

	It is thought that Stress is a result of the ways in which an individual perceives and reacts to pressures and demands. It is therefore important to realise that there are individual differences in susceptibility to stress.
Wellbeing	Is a broad concept and is described as relating to the following areas in particular: personal dignity (including treatment of the individual with respect) physical and mental health and emotional wellbeing, protection from abuse and neglect.
<u>Post-Traumatic Stress Disorder (PTSD)</u>	Post-Traumatic Stress Disorder (PTSD) is a condition that some people develop after experiencing or witnessing a traumatic life-threatening event or serious injury. Types of events that can lead to PTSD include: <ul style="list-style-type: none"> · serious accidents · physical or sexual assault · abuse, including childhood or domestic abuse · exposure to traumatic events at work, including remote exposure · serious health problems, such as being admitted to intensive care · childbirth experiences, such as losing a baby · the death of someone close to you · war and conflict · torture.
<u>Significant life event</u>	Any significant event in a person's life that may have beneficial or detrimental effects on social relationships and status. Disruptive events, such as loss of job, disability, and bereavement, are called life crises. However, both the apparently beneficial events (such as selection for an international team) and the detrimental events may increase stress and anxiety and are implicated in the development of some diseases.

4.0 ROLES AND RESPONSIBILITIES

- 4.1 It is the responsibility of the manager and the individual to recognise both the source and symptoms of work-related stress, and where prevention is not possible, to work together to minimise any adverse effects. When the source of stress is outside of work, it is important to signpost colleagues to support services available.
- 4.2 Managers provide appropriate assistance to individuals recognised as experiencing work-related stress and where diagnosed or symptoms are suggestive of colleague experiencing PTSD.

4.3 Divisional Management Teams

4.3.1 Divisional Management Teams will be responsible for ensuring that regular risk (at least quarterly but more often when required) assessments are carried out across service areas and that appropriate actions and strategies are put in place to eliminate/minimise the effects of stressors. Suggestions for action can be found within Appendix 4.

4.3.2 Divisional Management teams should also utilise key information currently available in evaluating and assessing more broadly whether work-related stress may be a particular problem in certain service areas. Such sources of information include:

- High levels of sickness absence.
- Colleague turnover.
- Low productivity.
- Accident rates.
- Occurrence of disputes and complaints.
- Reduced levels of colleague morale.
- The annual Staff Survey

4.3.3 Where common risk patterns are identified across service areas comprehensive and co-ordinated steps should be taken by Divisional Management Teams, in conjunction with the relevant People Business Partner and Head of Health and Safety, to ensure that such risks are addressed in a timely manner.

4.4 Line Managers

Line Managers must ensure that the provisions and requirements set out in this policy and the Recruitment and Selection Best Practice Guide are implemented appropriately including:

- The full range of tasks and demands of the job role are set out clearly in the job description and details sent out to applicants, these should also be fully discussed at the interview stage of the selection process.
- Conducting and implementing recommendations of risk assessments as appropriate.
- Good communication with colleagues, particularly where there are organisational and procedural changes including using appropriate methods for delivering messages about change.
- Colleagues are provided with meaningful development opportunities, identified through the Personal Development Review process ([Appraisal Paperwork & Guidance \(notts.nhs.uk\)](https://www.notts.nhs.uk)).
- Workloads are monitored to ensure that colleague are not overloaded.
- Monitor working hours to ensure that colleague are not overworking and monitor holidays to ensure that colleagues are taking their full entitlement.
- Offer additional support to a colleague who is experiencing excessive pressure due to a significant 'life event' (see 3.0 Definitions and Abbreviations). How these events affect an individual can vary significantly therefore an individualised and person centred approach to support if required.

- Bullying, harassment, aggression and violence from patients, visitors or colleague is not tolerated within their area of jurisdiction. Colleagues should expect respect and not abuse. Colleagues witnessing or experiencing violence and aggression from patients or visitors can access support [here](#).
 - Ensure colleagues are aware of the availability and how to contact of the following support:
 - Employee Assistance Programme via VIVUP
 - Free Counselling via VIVUP
 - Clinical Psychology for Colleagues
 - Support following traumatic work-related incident (TRiM –Trauma Risk Incident Management)
 - Professional Nurse Advocates and Professional Midwifery Advocates
- More information about all support can be found on the [Wellbeing Webpage](#).
- Colleagues involved in traumatic/stressful incidents, grievances, disciplinary actions, complaints, or claims are fully supported (See the Policy on Supporting Colleague involved in Incidents Complaints and Claims).
 - Colleagues are referred to Occupational Health as a matter of urgency where stress has been identified.
 - Discuss issues of stress in their department with the Employee Assistance Programme (VIVUP) and take advice on how it could be reduced via this route.
 - Co-ordinate and assist in the completion of action plans for implementation, following the identification of work-related stressors by colleague or through risk assessments (appendix 3).
 - Monitor colleagues over the following 12 months or longer if required following a traumatic event for signs of Post-Traumatic Stress Disorder (PTSD) as per RCN Working Well Initiative Guidance on traumatic stress management in the health care sector.

4.5 Occupational Health and Wellbeing

- Support individuals who have been absent with work-related stress and advise them and their managers on planned return to work.
- Provide information to colleagues about how they can refer themselves to the Trust's independent confidential counselling service via VIVUP as required.
- Promote the health and wellbeing of colleague through contribution to the Trust's general wellbeing and health promotion activities.
- Signposting colleagues to external services as appropriate.

4.6 Employee Assistance Programme

- Providing advice to individuals and aggregated anonymous advice on trends.
- Providing one to one self-referral counselling services

- Provision of a regular reports to the Head of Occupational Health as contract manager, identifying key factors of their services, including extent of services, key findings, demands on the service and issues raised.

4.7 Human Resources

- Provide guidance to managers on the effective management of colleagues involved in complex incidents or cases.
- Assist in the collation, monitoring and reporting of wellbeing indicators.
- Provide continuing support to managers and individuals with sign posting to the appropriate range of services.
- Providing a framework for the management of sickness absence including return to work interviews
- Supporting the work of the People Wellbeing and Belonging Sub-cabinet .

4.8 Colleague Clinical Psychology Service

- Provide a Clinical Psychology Service for colleagues is available to colleagues across the Trust – including those employed by Medirest and Skanska – who are experiencing emotional distress or mental health difficulties related to their work or that are impacting work, e.g. anxiety, depression, or traumatic experiences due to events that have happened at work.
- More details on inclusion criteria and the referral form can be found here: [here](#)

4.9 Traumatic Incident Management

- Once a manager or leader identifies a traumatic or potentially traumatic event has occurred, they should complete the referral form at the end of this document immediately (ideally within 24 hours of the incident) with as much detail as possible
- Queries and referrals can be sent to the Trauma Risk Incident Management (TRiM) team e-mail inbox: sfh-tr.stafftrimreferrals@nhs.net
- More details on can be found [here](#)

4.10 Professional Nurse Advocates and Professional Midwifery Advocates

- Provide confidential support with issues relating to, or that affect practice as a registered Midwife or Nurse. For information on how to contact [click here](#)

4.11 Role of Committees/Groups with Responsibilities for Stress Management

4.11.1 People Wellbeing and Belonging Sub-Cabinet

- A focus for colleague consultation and the development of this policy and any associated documents.
- Monitoring information on the state of colleague wellbeing within the Trust.
- Receiving reports on initiatives to improve colleague wellbeing within the Trust.
- Acting as the steering group for the implementation of the Management Standards for Work Related Stress.

- Receiving reports from Focus Groups and assisting in the development of action plans and reviewing the results of risk assessments.
- Providing progress reports to the People Cabinet or other cabinets or committees as appropriate.

4.11.2 Health and Safety Committee

- Acting as a forum for consultation between Trust management and colleague safety representatives on all aspects of health, safety and welfare including work related stress.

4.12 Colleagues

- Raise issues of concern with their line manager, Occupational Health or a Health and Safety representative.
- Work with managers to reduce any associated risks.
- Accept opportunities for support including counselling where identified.
- Be aware of the HSE's Management Standards for Work related Stress and how these assist the Trust to proactively manage workplace stressors.
- Avoid creating stress for others
- Participating in initiatives to reduce work related stress

5.0 APPROVAL

The latest version of this Policy was approved by the Trust Health and Safety Committee in August 2024.

6.0 DOCUMENT REQUIREMENTS

6.1 Scope of the policy

6.1.1 This Policy applies to all those colleagues directly employed by the Trust including those managed by a third party under a retained employee agreement. Colleagues working under a retained colleague agreement as part of the PFI scheme will have access to the same support mechanisms as those employed directly by the Trust.

6.1.2 The policy should be read in conjunction with the following Trust policies and guidance:

- The Risk Management Policy
- Sickness Absence and Wellbeing Policy
- Dignity at Work Policy to support bullying, harassment, violence and aggression
- Speaking Up Policy
- TRiM Procedure

6.2 General Requirements

6.2.1 The Trust will ensure that appropriate support mechanisms are in place for all employees. This will be as soon as practicable and proportionate and involve internal or external support as appropriate. Appendix 4 contains advice for colleagues on the issue of work-related stress and the actions that they can take as individuals to help address the problems they may be experiencing.

6.2.2 The Trust believes that increasing awareness of work-related stress for both managers and employees is important. The Trust will look to maximise the opportunities available to ensure that levels of awareness are increased and maintained.

6.2.3 Where possible, the Trust will help provide employees with 'coping skills' in order that they have the capacity to deal with pressures of work. This will be achieved through the provision of a wide range of training and development programmes including Coping Under Pressure Workshop, Time management and Assertiveness courses available either on the [e-academy](#) or [course booking](#).

6.2.4 In cases where work-related stress is an identified concern, managers will, in the first instance, discuss this with the individual, identifying the potential causes of work-related stress, how the effect of these 'stressors' may be minimised, and what support is available for the individual.

6.2.5 The involvement of Occupational Health is essential in terms of support and advice in the workplace and the individual, with their consent, should be referred to them.

6.2.6 Managers should also make colleagues aware of the expert and confidential assistance from the Employee Assistance Programme via VIVUP. This will allow for home and work stressors to be explored, how resilience to excessive pressures can be improved, and how the support available can be most effectively used.

6.2.7 The Legal Services Department provides legal advice and support for staff across the Trust. This includes dealing with requests from the Coroner, managing clinical negligence claims and representing the Trust at inquests and other court proceedings.

The team are also available to provide ad hoc legal advice when needed, including in relation to mental capacity, best interests, serious medical treatment decisions, the Court of Protection and the Mental Health Act. Where colleagues are involved in a legal claim or court hearing, where appropriate the team will explain the process involved, support colleagues in drafting reports, provide support if needed to give evidence, and signpost other resources where necessary.

For routine enquiries the team can be contacted at sfh-tr.Legal@nhs.net , or through switchboard for urgent matters.

6.2.8 The Patient Experience Team provide feedback on the progress of complaints and/or claims to keep managers and colleague as informed as possible.

There is a system of link people within each Division who receive information on the progress of complaints and claims. The Patient Experience Department will keep colleagues informed and updated regarding complaints made about individuals to regulatory bodies such as the Care Quality Commission (CQC).

6.2.9 Colleagues will be represented at complainant meetings, usually by line managers and are not normally expected to attend face-to-face meetings with complainants unless it is with the colleague's agreement.

6.2.10 The Trust is accredited as a Carer Friendly Organisation by the Carers Association and is committed to the welfare of its through balancing the organisational needs of work with personal and family caring commitments. This can include looking at; innovative solutions to assist employees with their caring responsibilities for dependants and valuing employee's individual caring needs.

6.2.11 The Trust have range of measures in place to support colleague with caring responsibilities these include:

- Option to complete the [Carers Passport](#) document with a line manager detailing a colleagues caring responsibilities and needs for adjustments
- Flexible working arrangements
- [Carers Guidance](#) for information about supporting colleagues with caring responsibilities.
- [Carers Leave Guidance](#) seeks to ensure that a person-centered approach is taken when considering Carers leave, including looking at individual circumstances.
- Peer support through the [Carers Network](#).
- On site Nurse provision, [Little Millers](#) based at Kings Mill Hospital.
- Signposting to [Tax Free Childcare Scheme](#) helping colleagues to save money on childcare costs

6.3 Preventing work Related Stress Through Appropriate Design

6.3.1 The most effective way of managing stress is through 'prevention at source', by taking steps to address the root causes, rather than simply treating the symptoms. Therefore, the greatest priority will be given to the prevention of work-related stress across the Trust. The following best practice guidance should be applied across all units /wards /departments:

6.3.2 Demands

- Workload should be regularly monitored and reviewed by colleagues and their line manager within regular one to one meetings to ensure that it does not become excessive.
- Three specific factors are important for managers to consider when reviewing the demand placed on employees, these are:
 - The way the job is designed – in terms of specific goals and structure of the workflow.
 - The level of training required to carry out the role.

- The opportunity that may exist for increased flexibility in the employee's working patterns.

6.3.3 Control

- Employees should be involved in decisions affecting their working lives and the jobs that they undertake.
- Managers can facilitate colleagues to take more control in their working lives by:
 - Involving employees in decision making and determinations concerning the way that work and specific tasks are carried out.
 - Building effective teams in which colleagues are given responsibility for outcomes.
 - Reviewing individual and team performance with employees to identify strengths and weaknesses through the appraisal process as well as through ongoing coaching and mentoring whereby personal objectives, training and development plans are agreed.
 - Individual coaching can be accessed by contacting sfh-tr.coaching@nhs.net

6.3.4 Support

- Managers are not expected to take on the role of counsellors, but should display effective and sympathetic communication skills when addressing stress-related issues. Regular meetings can help to defuse stressful situations and address underlying problems.
- Many of the outward signs of stress in colleagues may often be noticed by managers and other colleagues. Managers should be particularly sensitive to changes in an individual's behaviour, such as worsening relationships, colleague's indecisiveness, absenteeism and inability to delegate, or a general deterioration in performance.
- It is acknowledged that a significant level of support can often be provided by an employee's colleagues, particularly at times when workload increases. Manager should seek to harness this support as a way of reducing the occurrence of work-related stress.

6.3.5 Relationships

- It is also important that good communication is maintained between the managers and colleagues always. This should be 'face-to-face' whenever possible. Good communication reduces uncertainty and helps to reduce or avoid stress.
- Positive feedback should be encouraged, and concerns should always be constructive and focused on supporting improvement/development.
- The [Organisational Development Team](#) can support with team dynamics, communication and meditation

6.3.6 Role

- Managers should ensure that colleagues are clear about the dimensions, tasks and responsibilities required by their role and how it fits into the overall aims and objectives of the unit/department/ward and the wider organisation.

- Managers should also be aware of an employee's training and development needs, especially when an employee is taking on a new or changed role.

6.3.7 Change

- Change is one of the more obvious sources of stress. Therefore, where possible changes to colleagues' job roles are imminent managers need to ensure:
 - Appropriate planning – so that change does not cause undue anxiety and those involved can be well prepared.
 - Consultation with colleagues, as appropriate to the circumstances, about the changes.
 - The employees concerned are involved and can identify potential problems associated with introducing the change(s) and that timely and appropriate steps are taken to address such issues immediately.
 - Uncertainty can cause colleagues to feel particularly stressed therefore effective, clear, honest and timely communication about change is essential.

6.4 Management of Stress-Related Absence

6.4.1 Managers should manage performance and attendance effectively to prevent unnecessary pressures on colleagues.

6.4.2 Where stress arising from work causes deterioration in job performance, this will be treated as a health issue in the first instance, and the line manager will support the employee as appropriate, in line with the principles outlined in this procedure and the Sickness Absence Management Policy.

6.4.3 Managers should encourage open discussion with colleagues regarding sources of pressure at team meetings and one to ones. They should adopt an 'open door', judgement free approach for the purposes of assisting in the identification of stress-related problems at an early stage, therefore facilitating early intervention and action.

6.4.4 In all instances of sickness absence, the Trust's policy for Sickness Absence Management should be applied. In particular managers should ensure that:

- Return-to-work meetings are conducted with all colleagues following a period of sickness absence. The purpose of this meeting is to identify the reason for absence and whether any underlying cause, such as stress exists.
- Where an absence may be stress related, the manager should identify, with the colleague concerned where possible stressors exist, whether work-related or personal, and agree appropriate actions.
- Managers should also agree with the colleague concerned that an immediate management referral to the Occupational Health Department is completed. The purpose of this referral is to seek specific advice and guidance concerning whether additional support is required to facilitate the colleague's return to work.

- A suitable return-to-work plan should be agreed with the employee concerned. Managers should be sympathetic to the individual's circumstances and make the colleague's return to the workplace as stress-free as possible.
- After returning to work the manager should meet with the employee regularly to ensure that existing stressors are being addressed appropriately.

6.4.5 It is the responsibility of line managers to take all reasonable steps to support employees, as far as reasonably possible, when returning to work following a period of sickness absence. This may include measures such as agreeing a phased return to work, a temporary /permanent reduction in hours or a period of part time working.

6.5 Recognising Stress in the Workplace

6.5.1 In this challenging, busy climate with pressures around capacity and demand as well as financial pressure faced by the organisation and at home due to the cost of living, people may find it harder than ever to cope with challenges. Both the stress we take with us when we go to work and the stress that awaits us on the job are on the rise; and employers, managers, and colleagues all feel the added pressure. While some stress is a normal part of life, excessive stress can interfere with people's productivity and reduces people's physical and emotional health, so it's important to find ways to keep it under control. Fortunately, there is a lot that people can do to manage and reduce stress at work.

6.5.2 When people feel overwhelmed, they can lose confidence and become irritable or withdrawn, making them less productive and effective and their work less rewarding. If the warning signs of work stress go unattended, they can lead to bigger problems. Beyond interfering with job performance and satisfaction, chronic or intense stress can also lead to physical and emotional health problems.

6.5.3 Signs and Symptoms of Excessive Stress

- | | |
|--|----------------------------------|
| ➤ Feeling anxious, irritable, or depressed | ➤ Muscle tension or headaches |
| ➤ Apathy, loss of interest in work | ➤ Stomach problems |
| ➤ Problems sleeping | ➤ Social withdrawal |
| ➤ Fatigue | ➤ Loss of sex drive |
| ➤ Trouble concentrating | ➤ Using alcohol or drugs to cope |

6.5.4 Common Causes of Excessive Workplace Stress

- Fear of losing your job
- Pressure to perform to meet rising expectations but with no increase in job satisfaction
- Pressure to work at optimum levels – all the time!

7.0 MONITORING COMPLIANCE AND EFFECTIVENESS

Minimum Requirement to be Monitored (WHAT – element of compliance or effectiveness within the document will be monitored)	Responsible Individual (WHO – is going to monitor this element)	Process for Monitoring e.g., Audit (HOW – will this element be monitored (method used))	Frequency of Monitoring (WHEN – will this element be monitored (frequency/ how often))	Responsible Individual or Committee/ Group for Review of Results (WHERE – Which individual/ committee or group will this be reported to, in what format (eg verbal, formal report etc) and by who)
Incident Statistics	Head of Health and Safety	Reported on Datix	Quarterly	Trust Health and Safety Group
Sickness Absence	Line Manager	Sickness Absence Monitoring	Monthly	Trust Board & within divisions at Monthly divisional performance reviews
Legal Actions Cases	Head of Health and Safety	Report following Legal action	As required	Trust Health and Safety Committee
Staff Survey	Head of Health and Safety	Review findings of Survey	Annually	People Cabinet
Compliance with policy	Head of Health and Safety	Meridian Health and Safety Audit	6 Monthly	Trust Health and Safety Group

8.0 TRAINING AND IMPLEMENTATION

- 8.1 Training on the management of work-related stress and other employee wellbeing issues is available for Line Managers. The Trust has developed an e-learning programme for managing work related stress and this is available on the [E-acadmeny e-learning platform](#).
- 8.2 The Wellbeing Team provide a workshop for Individuals called Coping Under Pressure which supports a colleague with some coping strategies including mindfulness techniques. The course is bookable via the [SFH Course Booking \(notts.nhs.uk\)](#) .
- 8.3 The Wellbeing Team provide line manager training on Wellbeing conversations to improve the effectiveness of Wellbeing Conversations and proactively identify challenges and stressors that colleagues face. The course is bookable via the [SFH Course Booking \(notts.nhs.uk\)](#)

9.0 IMPACT ASSESSMENTS

- 9.1 This document has been subject to an Equality Impact Assessment, see completed form at Appendix 1
- 9.2 This document has been subject to an Environmental Impact Assessment, see completed form at Appendix 2

10.0 EVIDENCE BASE (Relevant Legislation/ National Guidance) AND RELATED SFHFT DOCUMENTS

Evidence Base:

- [HSG218](#) Tackling Work-related Stress. A Manager's Guide to Improving and Maintaining Employees' Health and Wellbeing
- [HSG249](#) Managing Sickness Absence at Work. An Employer's and Manager's Guide
- [INDG424](#) Working together to reduce stress: A Short Guide
- [IND G 430](#) How to tackle work-related stress: A guide for employers on making the Management Standards work
- RR138 Best Practice in Rehabilitating Employees Following Absence Due to Work-related Stress
- HSE (2002) Interventions to Control Stress at Work in Hospital Colleague, Contract Research Report 435/2002 HSE Books
- RCN (2005) Managing Your Stress [online] RCN.
- HS(G) 48 Reducing Error and Influencing Behaviour
- ACAS A Guide to Stress in the Workplace
- NHS Confederation/NHS Employers (2005) The Stress Campaign [online]. Available from: www.nhsemployers.org/stress/

- Royal College Nursing (RCN) website provides further information and resources in relation to stress for nurses: www.rcn.org.uk
- *Managing Your Stress: A guide for nurses* (2005)
- *RCN Working Well Initiative Guidance on traumatic stress management in the health care sector* (2007)
- *Work-related stress: A good practice guide for RCN representatives* (2009)

11.0 KEYWORDS

Welfare
Health and Wellbeing
Work related stress

12.0 APPENDICES

APPENDIX 1 Equality Impact Assessment Form
APPENDIX 2 Environmental Impact Assessment
APPENDIX 3 Stress Risk Assessment - Individual Person
APPENDIX 4 Information Sheet Stress in the Workplace
APPENDIX 5 Stress Risk Assessment template

APPENDIX 1 EQUALITY IMPACT ASSESSMENT FORM (EQIA)

Name of service/policy/procedure being reviewed: Management of Work-Related Stress			
New or existing service/policy/procedure:			
Date of Assessment: 18th July 2024			
For the service/policy/procedure and its implementation answer the questions a – c below against each characteristic (if relevant consider breaking the policy or implementation down into areas)			
Protected Characteristic	a) Using data and supporting information, what issues, needs or barriers could the protected characteristic groups' experience? For example, are there any known health inequality or access issues to consider?	b) What is already in place in the policy or its implementation to address any inequalities or barriers to access including under representation at clinics, screening?	c) Please state any barriers that still need to be addressed and any proposed actions to eliminate inequality
The area of policy or its implementation being assessed:			
Race and Ethnicity	None	This policy will encourage a culture that does not tolerate any form of abuse including abuse rooted in discrimination that can lead to stress in the workplace	None
Gender	None	This policy will encourage a culture that does not tolerate any form of abuse, however, some colleague may mistakenly view a particular gender as being more vulnerable to abuse	None
Age	None	This policy will encourage a culture that does not tolerate any form of abuse including abuse rooted in discrimination that can lead to stress in the workplace	None

Religion / Belief	None	This policy will encourage a culture that does not tolerate any form of abuse including abuse rooted in discrimination. There is a need for a clear system for reporting hate incidents	None
Disability	None	Produced in font size 12. Use of suitable technology to view electronically. Alternative versions can be created on request	None
Sexuality	None	This policy will encourage a culture that does not tolerate any form of abuse including abuse rooted in discrimination. There is a need for a clear system for reporting hate incidents	None
Pregnancy and Maternity	None	An individual risk assessment will be carried out on the pregnant worker and any potential for work related stress will be considered and controlled accordingly	None
Gender Reassignment	None	This policy will encourage a culture that does not tolerate any form of abuse including abuse rooted in discrimination. There is a need for a clear system for reporting hate incidents	None
Marriage and Civil Partnership	None	This policy will encourage a culture that does not tolerate any form of abuse including abuse rooted in discrimination that can lead to stress in the workplace	None
Socio-Economic Factors (i.e. living	None	The social profile of some patients attending certain departments may	None

<p>in a poorer neighbourhood / social deprivation)</p>		<p>mean colleague are exposed to a higher risk of abuse including abuse rooted in discrimination that can lead to stress in the workplace</p>	
<p>What consultation with protected characteristic groups including patient groups have you carried out? None for this version, in that all previous principles remain in accordance with previous version (which was subject to consultation) and this version is primarily a reformat and codification of agreed practices.</p>			
<p>What data or information did you use in support of this EQIA? Trust policy approach to availability of alternative versions.</p>			
<p>As far as you are aware are there any Human Rights issues be taken into account such as arising from surveys, questionnaires, comments, concerns, complaints or compliments? No.</p>			
<p>Level of impact</p> <p>From the information provided above and following EQIA guidance document Guidance on how to complete an EIA (click here), please indicate the perceived level of impact:</p> <p>High Level of Impact/Medium Level of Impact/Low Level of Impact (<i>Delete as appropriate</i>)</p> <p>For high or medium levels of impact, please forward a copy of this form to the HR Secretaries for inclusion at the next Diversity and Inclusivity meeting.</p>			
<p>Name of Responsible Person undertaking this assessment: Robert Dabbs</p>			
<p>Signature: <i>Robert Dabbs</i></p>			
<p>Date: 5.08.2024</p>			

APPENDIX 2 ENVIRONMENTAL IMPACT ASSESSMENT

The purpose of an environmental impact assessment is to identify the environmental impact, assess the significance of the consequences and, if required, reduce and mitigate the effect by either, a) amend the policy b) implement mitigating actions.

Area of impact	Environmental Risk/Impacts to consider	Yes/No	Action Taken (where necessary)
Waste and materials	<ul style="list-style-type: none"> Is the policy encouraging using more materials/supplies? Is the policy likely to increase the waste produced? Does the policy fail to utilise opportunities for introduction/replacement of materials that can be recycled? 	No	Not Applicable
Soil/Land	<ul style="list-style-type: none"> Is the policy likely to promote the use of substances dangerous to the land if released? (e.g., lubricants, liquid chemicals) Does the policy fail to consider the need to provide adequate containment for these substances? (For example, bunded containers, etc.) 	No	Not Applicable
Water	<ul style="list-style-type: none"> Is the policy likely to result in an increase of water usage? (Estimate quantities) Is the policy likely to result in water being polluted? (e.g., dangerous chemicals being introduced in the water) Does the policy fail to include a mitigating procedure? (e.g., modify procedure to prevent water from being polluted; polluted water containment for adequate disposal) 	No	Not Applicable
Air	<ul style="list-style-type: none"> Is the policy likely to result in the introduction of procedures and equipment with resulting emissions to air? (For example, use of a furnace, combustion of fuels, emission or particles to the atmosphere, etc.) Does the policy fail to include a procedure to mitigate the effects? Does the policy fail to require compliance with the limits of emission imposed by the relevant regulations? 	No	Not Applicable
Energy	<ul style="list-style-type: none"> Does the policy result in an increase in energy consumption levels in the Trust? (estimate quantities) 	No	Not Applicable
Nuisances	<ul style="list-style-type: none"> Would the policy result in the creation of nuisances such as noise or odour (for colleague, patients, visitors, neighbours, and other relevant stakeholders)? 	No	Not Applicable

APPENDIX 3 INDIVIDUAL STRESS RISK ASSESSMENT

Note: This document is intended to aid the return-to-work discussion and provide a document for recording if the source of stress was a problem for you and if it was what can be done to help. The document can also be used by managers to aid their discussions with colleague that have not been off sick with stress or a stress related illness but the manager is concerned that they could be. The assessment should normally be carried out by the line manager but may require an independent manager or an [People Partner](#) depending on the nature of the sources of stress.

Name:

Ward/Dept/Unit:

Line Manager:

Date:

SOURCES OF STRESS	QUESTIONS TO ASK	YES/NO	Actions already taken & Comments
Demands	• Do you feel you have the right amount of work to do (i.e. not too much or not too little)		
	• Have you had sufficient training to do your job?		
	• Are there any problems with your work environment?		
Control	• Are you able to have any say about how your job is done?		
	• Do you feel included in decision making in the team?		
	• Do you feel you are using the skills you have got to full effect?		
Support	• Do you feel that you get enough support from your line manager?		
	• Do you feel you get enough support from colleagues?		

	<ul style="list-style-type: none"> Do you take the breaks you are entitled to at work? 		
	<ul style="list-style-type: none"> Do you feel you have a healthy work-life balance? 		
Relationships	<ul style="list-style-type: none"> Are you affected by any conflict in the team? 		
	<ul style="list-style-type: none"> Are you subjected to any bullying or harassment at work? 		
	<ul style="list-style-type: none"> Do you feel the team works well together? 		
Role	<ul style="list-style-type: none"> Are you clear about your roles and responsibilities at work? 		
	<ul style="list-style-type: none"> Do you feel that there is any conflict in your role? 		
	<ul style="list-style-type: none"> Do you understand others roles in the team? 		
Change	<ul style="list-style-type: none"> Are you made aware of any changes that are happening at work? 		
	<ul style="list-style-type: none"> Do you understand why the change is happening? 		
	<ul style="list-style-type: none"> Do you understand the impact on your job of any change? 		
	<ul style="list-style-type: none"> Do you feel well supported during change at work? 		
Personal Outside of Work	<ul style="list-style-type: none"> Are there any outside of work factors that could affect the way you currently feel such as a recent Bereavement in the family or to a close friend 		
	<ul style="list-style-type: none"> Have you or a close family member suffered ill health or an injury recently 		

	<ul style="list-style-type: none"> • Do you have trouble relaxing and sleeping at night 		
	<ul style="list-style-type: none"> • Are there any other factors that may be affecting the way you feel such as financial pressures, relationships, caring commitments? 		

***Notes on Factors outside work for the Assessor**

This list of questions for this risk assessment has mainly focused on factors at work. However, there may be factors outside work, for example in the individual’s family life, which may have contributed to or added to the pressures at work. These may have made it harder to cope with demands at work that they would normally be able to cope with.

They may want to share these issues with their manager – they may be able to help at work and make adjustments, for example, being more flexible with working hours or just being sympathetic to the pressures they are under.

If they do not feel happy telling their manager about these things, is there anyone else they can turn to, for example, the human resources department.

If they require further advice or help they can talk in confidence to the Occupational Health Department.

Occupational Health Department: Extension 3780/1

For latest information on services and resources available for colleague wellbeing and welfare see the [Wellbeing Webpages](#) or email the Wellbeing team on sfh-tr.wellbeing@nhs.net.

If the colleague is in acute distress and require immediate mental health support there is a dedicated Mental Health Crisis line on **0808 196 8886** A manager or any person can call this phone line on behalf of the colleague or if they have concerns for them.

You can also visit the [Suicide Prevention webpage for support when a colleague is in distress or crisis](#)

Assessor: Signature: Date:	Member of Colleague: Signature: Date:
Review date:	

Stress Risk Assessment - Part B

(Manager & Employee to complete)

Action Plan for Individual/Team/Ward/Dept:

Manager: **Date completed:**

Review date: *(Please add review dates to your Outlook tasks, calendar or equivalent tracking system)*

Type of Stressor	Existing workplace measures already in place	Further action to be taken	Who will ensure the action is done?	Target Date	Review
Demands					
Control					
Support					
Relationships					
Role					

Type of Stressor	Existing workplace measures already in place	Further action to be taken	Who will ensure the action is done?	Target Date	Review
Change					
Personal					

Manager Signature: -----

Employee Signature: -----

Date: _____

Copy given to employee please

APPENDIX 4

Sherwood Forest Hospitals

NHS Foundation Trust

TITLE: UNDERSTANDING AND DEALING WITH STRESS IN THE WORKPLACE AS PART OF MAINTAINING COLLEAGUE WELL BEING AT SHERWOOD FOREST HOSPITALS NHS FOUNDATION TRUST

What is stress?

The Health and Safety Executive (HSE) define stress as "the adverse reaction people have to excessive pressures or other types of demand placed on them".

Don't confuse positive pressure, which can create a 'buzz', and the harmful effects of pressure that is beyond a person's ability to cope.

Why do people talk about stress so much today?

There is a growing awareness of the importance of health and safety and recognition that healthy employees make a greater contribution to a business. People are more aware of the harmful effects of stress in workplaces but it is not new - psychologists have been studying stress since the 1950s.

Why do we need to tackle stress?

Stress is costly, especially for the NHS where cover for sick employees can be difficult to arrange. Stress can reduce the effectiveness of employees and lead to higher rates of absence. Research estimates that 12.8 million working days are lost to stress, depression and anxiety annually. Each new case of stress leads to an average of 29 days off work. Work-related stress is estimated to cost society about £3.7 billion every year.

Work-related stress is widespread. About one in five people in a stress study said that they found their work either very stressful or extremely stressful.

What form does stress take?

Work-related stress is not an illness but it can contribute to problems with ill health. As well as anxiety and depression, stress has been associated with heart disease, back pain and gastrointestinal illnesses.

Is the Trust required by law to tackle stress?

As an employer you have duties under health and safety law to assess and take measures to control risks from work-related stress.

You also have a duty under common law to take reasonable care to ensure the health and safety of your employees. If one of your employees suffers from stress related ill-health and the court decides that you should have been able to prevent it, then you could be found to be negligent. There is no limit to the compensation your employee could get from this.

HSE Management Standards and supporting guidance aim to help and encourage employers to meet their legal obligations.

If you dismiss an employee because they have work-related stress, then an employment tribunal will treat this as unfair dismissal unless you can show that you acted reasonably.

Can stress be cured?

Some forms of stress can be prevented - for example, the kind of organisational stress caused by poor management or the lack of policies for dealing with bullying or discipline. Individual stress - relating to relationships or personal problems outside work - can also be reduced with the right kind of understanding and support.

What are the main causes of stress and what can I do about them?

The table below is a brief summary of how advice on good employment relations relates to the main causes of stress identified by the HSE. The full list of standards and advice on how to achieve them is available on the HSE website.

Main causes of stress:	What you can do about it:
<p>Demands: employees often become overloaded if they cannot cope with the amount of work or type of work they are asked to do</p>	<ul style="list-style-type: none"> • make sure employees understand what they have to do and how to do it • meet training needs • consider whether working flexible hours would help employees to manage demands
<p>Control: employees can feel disaffected and perform poorly if they have no say over how and when they do their work</p>	<ul style="list-style-type: none"> • involve employees in the way work is carried out • consult employees about decisions • build effective teams with responsibility for outcomes • review performance to identify strengths and weaknesses
<p>Support: levels of sick absence often rise if employees feel they cannot talk to managers about issues that are troubling them</p>	<ul style="list-style-type: none"> • give employees the opportunity to talk about issues causing stress • be sympathetic and supportive • keep employees informed about what is going on in the organisation

<p>Relationships: a failure to build relationships based on good behaviour and trust can lead to problems related to discipline, grievances and bullying</p>	<ul style="list-style-type: none"> • have clear procedures for handling misconduct and poor performance • have clear procedures for employees to raise grievances • tackle any instances of bullying and harassment and make it clear such behaviour will not be tolerated
<p>Role: employees will feel anxious about their work and the organisation if they don't know what is expected of them</p>	<ul style="list-style-type: none"> • carry out a thorough induction for new employees using a checklist of what needs to be covered • provide employees with a written statement of employment particulars • give employees clear job descriptions • maintain a close link between individual objectives and organisational goals
<p>Change: change needs to be managed effectively or it can lead to uncertainty and insecurity</p>	<ul style="list-style-type: none"> • plan ahead so changes can be signposted and managers and employees are prepared • consult with employees about prospective changes so they have a real input and work together with you to solve problems

If you require further advice or help you can talk in confidence to the Trust Health and Safety Manager by calling extension 4172 or the Occupational Health Department on extension 3780/1

For latest information on services and resources available for colleague wellbeing and welfare see the [Wellbeing Webpages](#) or email the Wellbeing team on sfh-tr.wellbeing@nhs.net.

If the colleague is in acute distress and require immediate mental health support there is a dedicated Mental Health Crisis line on **0808 196 8886** A manager or any person can call this phone line on behalf of the colleague or if they have concerns for them.

You can also visit the [Suicide Prevention webpage for support when a colleague is in distress or crisis](#)

Appendix 5- Health and Safety Stress Risk Assessment Template Form

SHERWOOD FOREST HOSPITALS NHS TRUST

STRESS RISK ASSESSMENT

Division	Department/Ward	Date
Work Activity	Individuals Name	

Assessor	Review Date
----------	-------------

No.	Identified Hazard (as Applicable) Delete where not applicable to individual or group being assessed			Initial Risk Rating			Target Risk Rating		
	Hazard (the potential to cause harm)	How harm can occur and who could be harmed (As applicable)	Control Measures or Safeguards to put in place	Consequence (C)	Likelihood (L)	Risk Rating (C x L)	Consequence (C)	Likelihood (L)	Risk Rating (C x L)
1.	Excessive Demands of Work	<ul style="list-style-type: none"> Exposing colleague to long hours Excessively busy periods, placing additional demands on colleague. Inadequate rest and holidays, poor planning, poor management of colleague. Inadequate number of colleagues, poor resource management, 	<ul style="list-style-type: none"> Look at job design and working practices. Check all leave is being taken Is work being taken home? Is there constant communication during off-duty time by e-mail, text, what's app and phone? Cut out unnecessary work and communications. 	3	2	6			

No.	Identified Hazard (as Applicable) Delete where not applicable to individual or group being assessed			Initial Risk Rating			Target Risk Rating		
	Hazard (the potential to cause harm)	How harm can occur and who could be harmed (As applicable)	Control Measures or Safeguards to put in place	Consequence (C)	Likelihood (L)	Risk Rating (C x L)	Consequence (C)	Likelihood (L)	Risk Rating (C x L)
			<ul style="list-style-type: none"> Review workloads and resources (including colleague levels), and allow sufficient time for individuals to plan their work Schedule work in a way that allows recovery time after unavoidable busy periods. 						
2.	Excessive Demands of Work	<ul style="list-style-type: none"> Inappropriately qualified for the job, poor or lack of suitable and sufficient training, instruction Over promotion, lack of competence and experience to do the role allocated Skills not recognised – promotion prospects not fulfilled, inadequately appraised, possible personality clash with manager. 	<ul style="list-style-type: none"> Make sure individuals are matched to jobs people can be over and under qualified Analyse skills alongside the tasks Provide training for those who need more, e.g. when introducing new technology Review and consider selection, skill criteria, job summaries, training and supervision Career planning discussion, training needs evaluation Monitor workplace policies in practice: discrimination 	3	3	9			

No.	Identified Hazard (as Applicable) Delete where not applicable to individual or group being assessed			Initial Risk Rating			Target Risk Rating		
	Hazard (the potential to cause harm)	How harm can occur and who could be harmed (As applicable)	Control Measures or Safeguards to put in place	Consequence (C)	Likelihood (L)	Risk Rating (C x L)	Consequence (C)	Likelihood (L)	Risk Rating (C x L)
3.	Excessive Demands of Work	<ul style="list-style-type: none"> Boring or repetitive work, poor organisation of the workload, poor management of work programme, lack of variety and not challenging enough Too little to do, poor work load programming, poor management of workload by not providing sufficient, work not challenging enough. 	<ul style="list-style-type: none"> Job enrichment/job rotation/role review Consider changing the way jobs are done by moving people between jobs, giving individuals more responsibility, increasing the scope of the job, increasing the variety of tasks, or giving a group of workers greater responsibility for effective performance of the group 	3	2	6			
4.	Excessive Demands of Work	<ul style="list-style-type: none"> Employees experiencing excessive workloads, poor management Employees working under excessive pressure, poor planning and lack of suitable manage Employees experiencing or being witness to traumatic work-place incident(s) 	<ul style="list-style-type: none"> Review workload and demands regularly and as an integral part of the performance management process Support colleague in planning and prioritising their work. Try to establish what aspects of their job they find challenging. Redistribute work or set different work priorities if they are not coping Check management skills and assess training needs 	3	3	9			

No.	Identified Hazard (as Applicable) Delete where not applicable to individual or group being assessed			Initial Risk Rating			Target Risk Rating		
	Hazard (the potential to cause harm)	How harm can occur and who could be harmed (As applicable)	Control Measures or Safeguards to put in place	Consequence (C)	Likelihood (L)	Risk Rating (C x L)	Consequence (C)	Likelihood (L)	Risk Rating (C x L)
			<ul style="list-style-type: none"> Undertake risk assessments of workplace. Refer for TRiM (or an assessment of the impact of the traumatic incident). Support staff to access specialist support and advice as needed, when they experience, or are exposed to traumatic work-place incidents. Investigate trends in work-place incidents. 						
5	The physical working environment	<ul style="list-style-type: none"> Poor temperature control Excessive Noise Lack of facilities for rest/breaks Poor lighting Poor ventilation Badly placed or designed workstations 	<ul style="list-style-type: none"> Make sure workplace hazards are properly controlled. Undertake risk assessments of workspace and significant tasks. Carry out suitable DSE Workstation assessments. Ensure the working atmosphere is suitable for the processes taking place, suitable lighting, ventilation, temperature control, meet DSE legal requirements in offices 	2	3	6			

No.	Identified Hazard (as Applicable) Delete where not applicable to individual or group being assessed			Initial Risk Rating			Target Risk Rating		
	Hazard (the potential to cause harm)	How harm can occur and who could be harmed (As applicable)	Control Measures or Safeguards to put in place	Consequence (C)	Likelihood (L)	Risk Rating (C x L)	Consequence (C)	Likelihood (L)	Risk Rating (C x L)
6.	The physical working environment	<ul style="list-style-type: none"> Threat of aggression or violence to colleague from patients and visitors Verbal abuse from patients and visitors Poor management practices 	<ul style="list-style-type: none"> Report violence to line manager or other appropriate person. Use Datix incident reporting system form. Assess risks, implement controls including investigation of complaints and appropriate training Monitor absence levels and trends. Compare with other departments, other businesses Look at the individual and any risk factors that apply to this particular person Look at violence and aggression assessment to identify any risks and put in place suitable controls to eliminate/reduce the risks 	4	2	8			
7.	Lack of suitable controls	<ul style="list-style-type: none"> Not being able to balance the demands of work and life outside work 	<ul style="list-style-type: none"> Encourage a healthy work-life balance Ensure colleague to distribute holidays across the year 	3	2	6			

No.	Identified Hazard (as Applicable) Delete where not applicable to individual or group being assessed			Initial Risk Rating			Target Risk Rating		
	Hazard (the potential to cause harm)	How harm can occur and who could be harmed (As applicable)	Control Measures or Safeguards to put in place	Consequence (C)	Likelihood (L)	Risk Rating (C x L)	Consequence (C)	Likelihood (L)	Risk Rating (C x L)
			<ul style="list-style-type: none"> Develop a communications protocol that ensures people have rest time completely free of all work-related messages. Over-anxious people often need to be in constant contact. Over-controlling management tends not to respect off-duty time 						
8.	Lack of suitable controls	<ul style="list-style-type: none"> Rigid work patterns and breaks Fixed deadlines occurring in different parts of the year Lack of control over work Conflicting work demands 	<ul style="list-style-type: none"> Try to provide some scope for varying working conditions and flexible work schedules (e.g. flexible working hours, working from home) Consult with people to allow them to influence the way their jobs are done, what the real deadlines are and what the priorities are. Set realistic deadlines for tasks 	2	2	4			

No.	Identified Hazard (as Applicable) Delete where not applicable to individual or group being assessed			Initial Risk Rating			Target Risk Rating		
	Hazard (the potential to cause harm)	How harm can occur and who could be harmed (As applicable)	Control Measures or Safeguards to put in place	Consequence (C)	Likelihood (L)	Risk Rating (C x L)	Consequence (C)	Likelihood (L)	Risk Rating (C x L)
			<ul style="list-style-type: none"> Take into account that individuals are different, and try to allocate work so that everyone is working in the way that helps them work best, takes account of their home obligations and makes best use of their skills Be clear about tasks required 						
9.	Lack of suitable workplace support	<ul style="list-style-type: none"> Return to work system, lack of suitable application, poor administration Sickness and absence management Managerial support through emotionally demanding work 	<ul style="list-style-type: none"> Policies and systems in place, monitored and consistently applied Measure trends and changes Investigate variations Check management skills and assess training needs Ensure people have the support they require and access to any specialist advice Advise colleague about counselling services 	2	3	6			

No.	Identified Hazard (as Applicable) Delete where not applicable to individual or group being assessed			Initial Risk Rating			Target Risk Rating		
	Hazard (the potential to cause harm)	How harm can occur and who could be harmed (As applicable)	Control Measures or Safeguards to put in place	Consequence (C)	Likelihood (L)	Risk Rating (C x L)	Consequence (C)	Likelihood (L)	Risk Rating (C x L)
10	Lack of suitable workplace support	<ul style="list-style-type: none"> Lack of suitable or sufficient Inductions 	<ul style="list-style-type: none"> New colleague properly inducted, existing colleague transferring or promoted or returning to work after long absence also to be inducted. Special attention for young people as required. OH/HR support. DDA adjustments in place, reviewed and checked 	3	3	9			