

WORK RELATED STRESS WORKBOOK

AN EMPLOYERS' GUIDE TO LAYING THE FOUNDATION FOR AN EFFECTIVE OVERALL PREVENTION AND MANAGEMENT POLICY

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Some statistics.....

- **79% of managers think that stress is an issue in their companies, making stress at work as important as workplace accidents for companies**

(2011/12 Pan- European opinion poll on occupational safety & health)

- **40% of employers reported that stress related absences had increased over the past year**

(Absence Management: Annual survey report 2012, CIPD)

- **27% of organisations that report stress as one of the top 5 causes of absences are not taking any steps to address it**

(Absence Management: Annual survey report 2012, CIPD)

Some sources of information.....

www.osha.europa.eu/en/topics/stress

(European Agency for safety & health at work)

www.hse.gov.uk/stress

- Guidance
- Management standards
- Management competencies
- Case studies
- Research reports

RR133 “Beacons of Excellence in Stress Prevention (2003)”

BSi PAS 1010: 2011

“Guidance on the management of psychosocial risks in the workplace.”

What do we mean by “Stress”?

People experience stress when they perceive that there is an imbalance between the demands made of them and the resources they have available to cope with those demands. Although the experience of stress is psychological, stress also affects people’s physical health.

Reactions to the same circumstances vary between individuals. Some people can cope better with high demands than others. It is the individual’s subjective evaluation of their situation that’s important. It is not possible to determine from the situation alone the amount of stress it may cause.

Short term stress - for instance when meeting a deadline - isn’t usually a problem; indeed it can help some people perform to the best of their ability. Stress becomes a risk to safety and health when it is protracted.

What does “stress” look like?

- **Physiological responses**

Increase in heart rate, blood pressure and hypertension

- **Emotional responses**

Feeling nervous or irritated

- **Cognitive responses**

Reduced attention and perception, forgetfulness

- **Behavioural responses**

Aggressive, impulsive behaviour or making mistakes

It is important to remember that when stress reactions persist over time, they may develop into more permanent, less reversible health outcomes such as chronic fatigue, burnout, musculoskeletal problems or cardiovascular disease.

Stress also affects organisations

What stresses us out at work?

- Excessive workloads
- Unrealistic deadlines
- Insufficient experience or training for job we've been asked to do
- Weak or ineffective management
- Long hours, unpredictable hours, shift working, unsociable hours
- Unfair treatment
- Social isolation
- Lack of help or co-operation from co-workers
- Public facing roles – fear of conflict
- Lack of control over job content, job pace or order of work
- Monotonous or meaningless work
- Ill-defined tasks or objectives
- Workflow issues
- Bullying, harassment or threats of violence
- Poor physical environment (lack of space, poor light, excessive noise)
- Personal life crisis
- Job insecurity
- Organisational change
- Lack of recognition or reward
- Poor communication
- Work-life balance
- Continuous interruption
- Failure to respond to complaints or concerns
- Interpersonal conflict
- Role ambiguity
- Responsibility for people
- Career stagnation
- Continually being subject to deadlines
- Lack of improvement or innovation
- Poor pay
- Underuse of skills, lack of development opportunities
- Lack of or unsuitable equipment, lack of maintenance
- Fear of negative consequences of performance failure
- Lack of or low participation in decision making process

If we don't call it "stress", what are the alternatives?

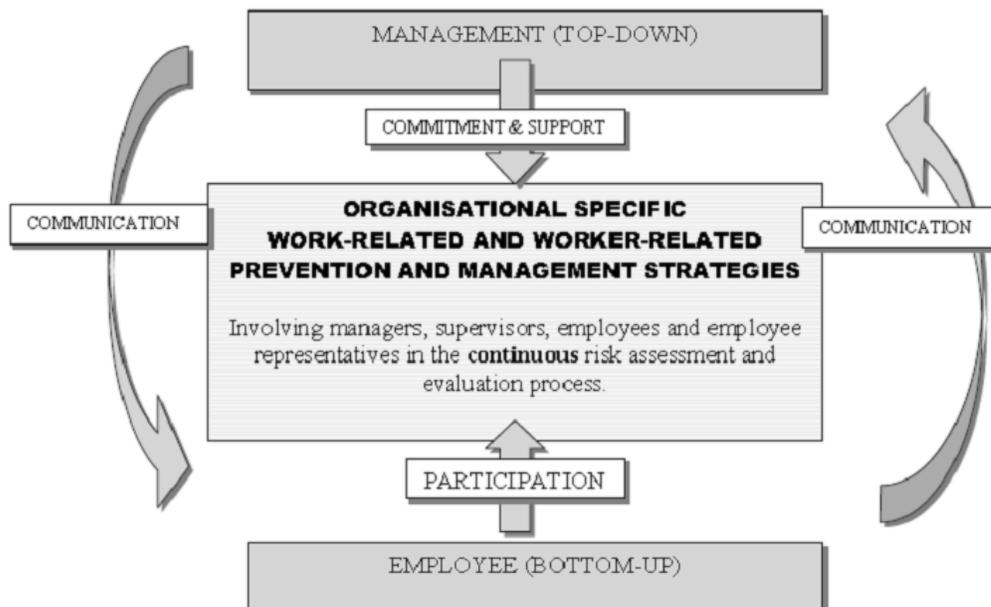
- **Mental health promotion**
- **Well-being & self-development**
- **Business (People) Continuity**
- **Resilience**
- **Corporate Social Responsibility**

Key principles of effective prevention and management

- 1. Eliminate pressures at source (work-related)**
- 2. Improve awareness of & management of continued risks for those that could be exposed**
- 3. Provide back-up support to those not sufficiently protected by the universal approach (worker-related)**
- 4. Must be a proactive, comprehensive and continuous process**
- 5. Must be organisation specific**
- 6. Managers and employees must be involved in the decision making process when developing and implementing interventions**

Building blocks for strong foundations

Reproduced from HSE RR 133 Beacons of Excellence in Stress Prevention



• COMMITMENT & ORGANISATIONAL CULTURE

Think about senior management buy-in and financial investment.

Having a stress champion at the highest level will keep the topic on the corporate agenda.

Senior managers should receive training first and recognise WRS as being a company-wide issue.

Health conscious work environments where employers are seen to care will find it easier to counter the stigma attached to stress and get employee buy-in.

• RELIABLE DATA

You will need accurate data on who might be affected and whether any hotspots exist within your workplace, so you can tailor your interventions.

Good data will allow you to track progress and report back.

Good reporting systems improve early detection of stress and lead to better outcomes for everyone.

• CRITICAL PERSONNEL

Everyone is needed to make it work. A team approach is best.

Have a SMT project manager for stress if possible and involve both HR and health & safety practitioners.

Line managers & supervisors are critical because they regulate practice on the ground

Work to an agreed action plan and report back regularly to senior management.

• COMMUNICATION

When it comes to stress, poor communication is often a large factor, so sort it out first.

Lack of information or belief that information is being withheld leads to anxiety and fear of the unknown = stress.

Keep it flowing – share – ask for feedback – listen – show that you have listened – act.

Avoiding misunderstanding allows for meaningful discussion of emerging issues and better decision making.

• RISK ASSESSMENT

There are many tools available free of charge.

Essentially you want to be able to identify and clarify what pressurised situations at work have the most negative affect on employees. Then you can start to work out what preventative action you can take and also what plans you can develop to help everyone cope when the pressure is on.

Don't do your risk assessment once and for all. It needs to be dynamic.

Make sure managers are trained in the risk assessment process and are able to apply it to stressors.

• COMPETENCE (TRAINING & DEVELOPMENT)

Improve the awareness of stress across the entire organisation.

It is critical for managers to be able to detect, discuss and develop solutions for stress.

Research into management competencies is available as are training courses and coaching support.

• PARTICIPATION/INVOLVEMENT & ENGAGEMENT

Positive planned approach.

Effective and trusted communication.

Management commitment.

An engaged workforce will ensure that the process of tackling stress does not itself become a source of additional stress in the workplace.

• **SUPPORT SYSTEMS**

Employee assistance programmes, occupational health support, counselling etc.

In-house or contracted in.

Have systems in place that can deal with the consequences of stress and give the support employees need to get back into work as quickly as possible.

Make sure everyone is aware of the services you offer – check how well they are being used and promote them often.

• **MEASURING & EVALUATING OUTCOMES**

No one solution will fit all. Things will need to be tried and tested.

Remember to build into the process a means of measuring how you are doing and whether you are delivering against your intended outcomes.

Capture and review (along with employees) what you have been able to learn so that you don't make the same mistakes again and waste your time and money.

HOW WILL I KNOW IF MY POLICY IS WORKING?

- MORE DISCUSSION BETWEEN MANAGERS AND EMPLOYEES ABOUT POTENTIAL STRESS CASES
- MORE REFERRALS TO SUPPORT SERVICES BEFORE AN ABSENCE
- EMPLOYEES ARE SUPPORTED WHILST IN WORK

OUR SHARED GOAL: A HEALTHY, SATISFIED & MOTIVATED WORKFORCE

Annex D (informative)

Developing a policy for the management of psychosocial risks and the prevention of work-related stress¹⁴⁾

An organizational policy for the management of psychosocial risks and the prevention of work-related stress should present a clear message to employees and stakeholders that the organization recognizes the importance of these issues and is serious about addressing them. As with every other stage in psychosocial risk management, a policy will work best when it is developed through a consultation process with key stakeholders within the organization (e.g. managers, OH&S representatives, worker representatives) and with appropriate expert support as necessary.

A number of key issues are to be addressed through the policy:

- a) psychosocial risks and work-related stress are defined to avoid misunderstandings;
- b) aims and objectives are clearly stated, as is the policy's link to health and safety legislation;
- c) application and use are clarified;
- d) links to other organizational policies and practices are stated;
- e) details on its operationalization on the basis of the key stages and principles of psychosocial risk management are provided;
- f) implementation issues, including responsibilities of key actors and policy evaluation, are addressed.
- g) ethical issues relevant to it are addressed and clarified.

The policy should start with a clear statement that the organization is committed to the prevention of work-related stress, management of psychosocial risks and promotion of mental health of its employees. Following the definition of key terms (e.g. psychosocial risks, work-related stress), the policy aim and objectives should be stated clearly, as well as the link of the policy to health and safety legislation at the European and national levels and the management of any type of risk to workers' health. The link of the policy to other policies, practices and systems that the organization may have should also be mentioned, such as human resources and corporate social responsibility.

The target audience of the policy should be stated as well as how it will be made available, most importantly,

there should be clarity on the operationalization of the policy and its implementation. There should be detail on how the organization will conduct risk assessments and how the data will be used to develop appropriate interventions for risk reduction at the organizational and at the individual level. The policy should state who will be involved and should outline responsibilities of key actors, including managers, health and safety staff, trade union representatives, health and safety committee or representatives and employees.

It is important for the policy to highlight the key role of dialogue and employee participation in the psychosocial risk management process. Procedures and contact persons in relation to the policy should be outlined. Key indicators that the organization will use throughout the psychosocial risk management process should be identified. The policy should mention the type of training and guidelines that will be developed and offered to key actors to ensure its proper implementation. How and how often the policy will be evaluated should be mentioned. Any ethical issues of relevance to the policy should be addressed and discussed, and information should be provided on the procedure for them to be tackled.

The functioning and effectiveness of the policy should be monitored and evaluated in a systematic way. It is best practice to evaluate the process on a regular basis (e.g. annually). The policy should also be developed further on the basis of the evaluation.

¹⁴⁾ WHO (2008).