# Stress management

#### Introduction

Work-induced stress is now widely recognised as a significant problem in the health service as well as in all other sectors of the economy. The Health and Safety Executive (HSE) says that workers in health and social care have some of the highest rates of self-reported illness due to stress, anxiety and depression<sup>1</sup>.

Across all sectors, around a third of new incidences of ill health at work are due to work-related stress. An average of 31 working days is lost for each case of stress – several times the average time taken off for sickness per employee per year. Across all employers the HSE reports that stress, anxiety and depression are estimated to account for 12.8m self-reported working days lost each year.

This is not a problem the NHS can ignore. There are enormous costs to the NHS of work-related stress: around 30 per cent of sickness absence in the NHS is due to stress, with a bill to the service of £300-£400m per year<sup>2</sup>. However, stress can also contribute to accidents and errors by employees, low morale and poor performance. It has a significant impact on the well-being of staff, their productivity and effectiveness.

The 2008 staff survey shows there is a marked reduction in the proportion of staff (28 per cent) who said they had suffered from work-related stress in the last year compared to 2007 (33 per cent) and 2006 (33 per cent)

While this percentage varied little between acute and foundation trusts, some individual mental health and ambulance trusts had high levels of reported stress – above 40 per cent of staff in some cases.

There were also significant variations between different staff groups. Midwives in acute trusts, district and community nurses in mental health trusts and also some ambulance trust staff generally reported high levels of stress. Disabled staff also reported high stress levels at over 49 per cent.

Much work-related stress is likely to be preventable and NHS organisations have legal obligations to prevent or reduce stress. This should ensure that organisations put a high priority on identifying, reducing and preventing work-associated stress.

In 2001 the HSE issued new guidance, *Tackling work-related stress: a manager's guide to improving and maintaining employee health and well-being*. This encourages a pro-active approach and highlights the major role managers can play in reducing the problems of stress.

The HSE issued management standards of good practice in 2007 and these were amended in 2008. They help employers to measure their performance in tackling a range of key stressors. One NHS trust has already been issued with a

<sup>1</sup> Self-reported work-related illness and workplace injuries in 2005/06 : Results from the Labour Force Survey, HSE

<sup>&</sup>lt;sup>2</sup> See www.nhsemployers.org/stress

compliance notice for failing to have a policy in place and not carrying out any assessment of the risks to staff of work-related stress.

This section should be read in conjunction with the NHS Employers stress website, www.nhsemployers.org/stress

#### What is stress?

The HSE defines stress as 'people's natural reaction to excessive pressure. It is not a disease. But if stress is excessive and goes on for some time, it can lead to mental and physical ill health (for example depression, nervous breakdown, heart disease).'

Work-related stress might also be defined as a pattern of emotional, cognitive, behavioural and physiological reactions to adverse and noxious aspects of work content, work organisation and work environment. It is characterised by high levels of arousal and distress, and often by feelings of not coping.

Stress is not an illness in itself and it should not be seen as an indicator of psychological problems or an inability to do a job properly. However, if left unaddressed, it can lead to physical and mental ill health.

The HSE factsheet, Myths and facts, adds the following points:

- work-related stress is not good for people. Ill health because of work-related stress is now one of the most common types of workplace health problems
- work-related stress is something anyone can suffer from and is not something that only happens to 'wimps'
- research has shown that support at work, particularly from managers for their staff, has a protective effect and that frontline prevention by the organisation is better than third-party cures
- there is a lot that employers can do to prevent work-related stress. As a first step, they can consult with their staff or trade unions to identify problems and work towards agreed solutions.

There are two other definitions of stress which add to or support the HSE definition.

The Confederation of British Industry defines it as that which arises when the pressures placed upon an individual exceed the perceived capacity of that individual to cope.

The Trades Union Congress says that stress occurs where demands made of individuals do not match the resources available or meet the individual's needs and motivation. Stress will be the result if the workload is too large for the potential number of workers and time available. Equally, a boring or repetitive task which does not use the potential skills and experience of some individuals will cause them stress.

#### The causes of stress

Stress is caused by a poor match between the worker and the work, by conflicts between roles at work and outside it, and by not having a reasonable

degree of control over work and life balance. Stress at work can be caused by a multitude of stressors.

In Tackling work-related stress: a manager's guide to improving and maintaining employee health and well-being, the HSE identified seven broad categories of risk factors for work-related stress.

- Culture issues, which could include lack of positive response to stress or health concerns, lack of staff involvement, poor communication, lack of consultation and participation in decision making, and long work hours or lack of rest breaks.
- Demands such as lack of challenge and pressure, exposure to violence or aggression, work overload, poor physical environment, lack of training, lone working, and fast pace of work.
- Control issues which as a low level or lack of control over task design, or non-participation in decision making.
- Relationships with those working with them or patients. This can range from bullying and harassment, through lack of support for the employee to physical violence.
- Change many people in the NHS would recognise change as a stress factor over the last few years. This could include changing market demands, new technology, and organisational restructuring.
- The individual's role, and conflicts and ambiguity within it.
- Support, training and individual factors such as lack of adequate training, mismatch between person and job, lack of support or feedback, and lack of constructive advice.

# Is stress dangerous?

The answer is yes – and no.

Stress is potentially disease-provoking when:

- occupational demands are high and the worker's influence over his or her conditions of work is low
- there is insufficient social support from management and fellow workers
- the reward offered to the worker in terms of remuneration, esteem or status does not match the effort invested.

The potential for provoking disease is increased when the conditions referred to above are intensive, chronic and/or often repeated. Common end-results include a wide range of physical and mental morbidity.

The answer is more likely to be no if workers are:

- allowed within reasonable limits to manage their own workload
- encouraged to take control over their own work conditions
- offered adequate social support

• given reasonable rewards for efforts invested.

When people feel in control, stress becomes a challenge rather than a threat – the 'good' stress that is often referred to.

The following are examples of the more common effects associated with work-related stress, for organisations and for individual workers:

#### • For organisations:

- rising levels of absenteeism
- increased staff turnover
- increased recruitment costs
- poor public image
- low staff commitment
- under-performance
- low staff morale
- low productivity
- increased accidents and mistakes
- poor relationships with clients
- possible compensation claims.

## • For individuals:

- high levels of anxiety
- low self-esteem and low self-confidence
- inability to concentrate
- difficulty in thinking rationally
- being prone to accidents
- headaches or migraine
- depression
- panic attacks
- demotivation
- chest pains
- stomach problems
- relationship problems.

Research has indicated that constant exposure to work-related stress may result in either mental or physical illness. In the most serious cases, illnesses that have been linked to work-related stress include cancer, ulcers, asthma, diabetes, alcoholism and nervous breakdowns<sup>3</sup>.

## The legal position

The Health and Safety at Work etc Act 1974 states that 'every employer should ensure, so far as is reasonably practicable, the health, safety and welfare at work of all of their employees'.

The Management of Health and Safety at Work Regulations 1992 require employers to adopt modern risk management techniques such as:

- identify any hazards and assess all the risks to the health and safety of employees, and record the findings of the assessment. Stress should be considered along with other work hazards
- review and modify risk assessments at regular intervals and also when there
  are developments or changes in the work or if 'adverse events' have taken
  place
- provide health surveillance where the risk assessment shows that adverse health conditions have occurred or are likely to occur under the particular conditions of work. This may aid early detection of stress
- apply the following principles or hierarchy to preventative and protective measures:
- 1. avoid the risk altogether
- 2. combat risks at source
- 3. wherever possible, adapt work to the individual
- 4. implement improved working methods and technological changes, where these can make work safer
- 5. incorporate risk prevention strategies as part of a coherent policy
- 6. give priority to those measures that protect the whole workplace.

The HSE has been working with the NHS to roll out management standards of good practice which employers can use to measure their performance when tackling a range of issues that can lead to stress. Trusts which undertake the appropriate policies and interventions to manage workplace stress can reduce the risk of legal intervention. However, trusts are also at risk of civil action from employees who have suffered from stress. Showing that they apply policies and procedures to identify and lessen work-related stress among employees is likely to be useful in defending such actions.

<sup>&</sup>lt;sup>3</sup> Beacons of excellence in stress prevention (2003), HSE and www.hse.gov.uk/research

## Workplace stress and the courts

There have been a number of cases of work-related stress which have been examined by the courts. Although every case is different, some general points have been made by the courts which should provide guidance for employers.

The most important of these was Barber v. Somerset County Council (2004) which reached the House of Lords. The leading judgement in this case set out the following principles:

- employers must keep up to date with the developing knowledge of occupational stress and the probable effectiveness of the precautions that can be taken to meet it
- an autocratic and bullying style of leadership which is unsympathetic to complaints of occupational stress is a factor that courts can take into account in deciding whether there has been a breach of the employer's duty to an employee
- once employers know that an employee is at risk of suffering injury from occupational stress, they are under a duty to do something about it. This duty continues until something reasonable is done to help the employee
- employees who complain do not need to be forceful in their complaints and need not describe their troubles and symptoms in detail. They may be suffering from depression, making it more difficult to complain. Their complaints should be listened to sympathetically
- certified sickness absence due to stress or depression needs to be taken seriously by employers. It requires an enquiry from the employer about the employee's problems and what can be done to ease them. Employees should not be brushed off with instructions to reprioritise work without the employer taking further steps to consider the situation
- a management culture that is sympathetic to employees suffering from occupational stress, and is prepared to act to alleviate it, may make a real difference to the outcome. Monitoring employees who are known to be suffering from occupational stress is mandatory. If they do not improve, then more robust steps may need to be taken to help them
- there is a statutory duty to carry out risk assessments.

In all cases, employers should consult their own legal representatives and should not rely on previous case histories.

# **Employee responsibilities**

Under the Health and Safety at Work Act 1974, employees also have a duty to be responsible for their own health and safety at work and that of those around them.

In terms of stress, employees should be encouraged to:

 become knowledgeable about stress – employers can assist in this by distributing leaflets on workplace stress and ensuring policies and procedures are well publicised

- coming to terms with their own feelings so they know when they are feeling stressed
- developing effective behavioural skills such as assertiveness and time management which can lessen the stress they are feeling. This could be reflected in training opportunities or addressed in counselling sessions
- establishing a support network
- developing a lifestyle that protects against stress.

## Benefits of tackling stress

Stress affects the health and quality of life of staff. The benefits of tackling work-related stress are the obvious ones of more staff at work more of the time, and the reduction in sickness absence and its associated costs. It also demonstrates the organisation's commitment to its workforce and to addressing their health needs. This, in turn, affects how the organisation is perceived by both staff and the local community in terms of being a good employer.

There are also financial benefits: employees who are away from work because of stress will have to have their work covered by other staff, frequently bank or agency. Investment in stress management can reduce the need for this expenditure – one NHS trust reported a saving of £500,000 a year in agency cover costs.<sup>4</sup>

#### The individual

Individual is the most important word in the field of stress management for the following reasons:

- the things that will cause stress for an individual will differ in every case
- the signs showing that an individual is experiencing stress will also differ
- the action that must be taken to prevent or manage stress will vary from person to person.

# Minimising organisational stress

The management standards

The HSE's management standards approach provides a framework for tackling stress within an organisation by looking at the common work areas that cause stress and setting 'targets' or standards for organisations to achieve.

Organisations will need to go through what is effectively a six-stage process. The initial stage involves deciding to carry out the process and securing commitment. Addressing stress in any organisation is likely to take time and commitment from senior staff, and the level of their 'sign up' is likely to affect the outcome.

<sup>&</sup>lt;sup>4</sup> See www.nhsemployers.org/stress

The next stage is identifying the hazards – applying the six main areas identified in the management standards to an individual organisation. Then organisations need to decide who might be harmed and how. This requires them to look at relevant data such as high levels of sickness absence, turnover of staff or low productivity which might indicate problems. Staff are likely to know what are the stressful parts of their jobs and the HSE suggests a staff survey could provide useful information. An HSE analysis tool also allows employers to know where they are compared with other employers and to set interim and realistic targets.

Once an employer has this information, it can evaluate the risk and take action. This might involve using focus groups of staff to talk about their jobs and action they feel could be taken to relieve stressful aspects of it. It is important to feed back any results. Remember that general action plans may not address all staff concerns and mechanisms need to be in place to allow them to raise issues.

Having developed an action plan, which is agreed with senior managers, staff and their representatives, it is now time to implement it, recording what is done and keeping staff informed.

Finally, any changes should be monitored – including progress on implementing action plans and the effectiveness of any measures taken. The HSE website at www.hse.gov.uk has detailed versions of these steps and additional information on the management standards.

ACAS has produced a booklet on stress at work which has practical suggestions on what employers can do about some of the main causes of stress, based around the main causes of stress highlighted in the management standards. The booklet is available at <a href="https://www.acas.org.uk">www.acas.org.uk</a>

# Developing a strategy

From a management perspective, NHS trusts need to consider the causes of work-related stress in their organisation and set out a strategy for addressing the causes.

The stakeholders in developing a strategy to alleviate work-related stress should include:

- back care/manual handling advisers
- infection control staff
- occupational health advisers
- occupational therapists
- clinical risk assessors
- health and safety advisers
- trade union representatives
- management representatives
- human resources representatives

• finance representatives.

This work will involve identifying the major stressors for staff through the risk assessment process.

It might also be useful to consider the following when drawing up a strategy for the organisation:

- better infrastructure
- involving medical and nursing staff fully in decisions, such as the way they work
- clear lines of responsibility and management
- clear channels of communication, for example for expressing staff concerns.

## Ways of working

Looking at this issue from an inter-professional perspective, it would prove useful to consider:

- measures to alleviate the intensity of the working lives of staff
- development of team working within and across professional groups of staff
- understanding the pressures and constraints under which other groups are working.

Having assessed the risks to staff and identified the organisational causes of stress, the trust will want to consider:

- introducing changes to structures and procedures which are identified as causing stress
- introducing policies and procedures for handling stress
- reviewing and developing support systems for staff needing guidance and help.

# Occupational health

The role of occupational health in taking this work forward is to:

- identify organisational aspects of stress and assist in change management
- identify and support stressed employees on a confidential basis
- intervene at an early stage to prevent problems and, where problems exist, prevent them getting worse
- facilitate the establishment of stress awareness and stress management programmes.

#### **Practicalities**

Trusts may also want to consider practical strategies such as:

- clinical leadership structures supported by good information
- leadership and management training and mentoring for all
- rigorous, supportive clinical governance
- job planning and appraisal
- identifying and managing 'poor performance' in a supportive framework.

This list is by no means exhaustive. Trusts should try to ensure that they take stress seriously and demonstrate understanding for people who admit to being under too much pressure. To help with this, trusts should ensure fairness and consistency, try to vary working practices where applicable and show an understanding attitude.

Trusts may want to have a written stress policy which is drawn up with staff. The content will vary according to the situation and the support on offer. The HSE has an example of a stress policy on its website www.hse.gov.uk

# The role of managers

Work-related stress is a huge occupational health problem facing Britain today, inflicting a heavy toll both in terms of financial cost and human suffering. Managers have a key role to play in reducing this toll – there is much they can do that is both simple and effective.

The HSE guidance, *Tackling work-related stress: a manager's guide to improving and maintaining employee health and well-being*, cites research that says effective people-management and development policies and practices are key tools in good performance. With work-related stress on the increase, it is important that all managers at all levels of the organisation are equipped with the skills to be able, wherever possible, to prevent work-related stress occurring among their employees, and to manage it if it does.

As well as understanding the issue of work-related stress and the organisational commitment to addressing it, managers should be able to do the following:

- understand the legal implications of stress in the workplace and be equipped with the necessary skills to ensure that they are doing everything to comply with health and safety law
- implement the up-to-date HSE guidance and conduct ongoing risk assessments for stress
- address and, where possible, correct any problem areas identified by the risk assessments
- recognise signs of stress in their staff
- know how to approach an employee exhibiting signs of stress and listen properly to what they are really saying. This, of course, includes the need for confidentiality for the member of staff
- recognise that they are not failing if they are unable to help an individual and have to pass them on to someone more qualified to help. Failure to do

this could only compound the problem and could double the number of individuals suffering from stress

- provide information and guidance about in-house support services and external providers such as Relate, Alcoholics Anonymous, Samaritans and so on. Not all members of staff feel confident in following the organisational route
- recognise how they themselves may be contributing to the stress levels of staff and how they could perhaps change, for the benefit of all.

## Counselling and support

The NHS now provides counselling services to all NHS staff and has done so since April 2000. In most cases, counselling is not going to relieve the effects of organisational stress on staff, but it will show that an employer recognises that there is a problem and is willing to provide staff with help when they need it.

Counselling denotes a professional relationship between a trained counsellor and an individual, with the objectives of the relationship varying depending on the client's needs. In the NHS, counselling may be concerned with developmental issues, addressing and resolving specific problems, decision-making, coping with crisis, working through conflict or even improving working relationships.

Some of the services provided by the NHS, which come under the general heading of staff counselling and support services, may include advice on financial and career management and on a range of other issues. Counselling is likely to deal not only with psychological or mental health issues, but also with a wider range of issues that affect the working lives of staff.

#### More information

NHS Employers stress website – www.nhsemployers.org/stress

Health and Safety executive website – www.hse.gov.uk

Chartered Institute for Personnel and Development – www.cipd.org.uk

The ACAS website has a summary of the causes of stress – <a href="www.acas.org.uk">www.acas.org.uk</a>

The International Stress Management Association has worked with the HSE to develop materials on the stress management standards – <a href="https://www.isma.org.uk">www.isma.org.uk</a>