

## Staff Mental Wellbeing and Resilience Policy

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1.0	February 2010	Alan Clark, Health and Safety Manager	
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**CITY HOSPITALS SUNDERLAND NHS FOUNDATION TRUST**

**DOCUMENT APPROVAL PROFORMA**

<b>Policy Title: Staff Mental Wellbeing and Resilience Policy</b>			
<b>Policy Number: HR31.SMWB.V2</b>			
<b>Name of Author: Anna Porter, Occupational Health and Wellbeing Manager</b>			
<b>Name of Sponsor: Kath Griffin, Director of Human Resources</b>			
<b>New Policy: No</b>			
<b>Reviewed Without Amendments: No</b>			
<b>Type of Policy:</b>			
	Risk management		
	Operational policy		
	Operational guidelines		
	Mental Health Act		
	<b>Human Resource</b>	<b>X</b>	
	Control of infection		
	Drugs policy		
	Other		
<b>Equality Impact Assessment: If this policy has a potential discriminatory impact please record below the person who has informed and involved the sponsor:</b>			
<b>Name:</b>			
<b>Title:</b>			
<b>Date:</b>			
<b>NB: It is the sponsor's responsibility to submit the policy through the CHS approval route.</b>			
<b>Checklist for the review and approval of the policy</b>			
	<b>Is the policy compliant with:</b>	<b>Yes/No</b>	<b>Comments</b>
	<b>Corporate style</b>	<b>Yes</b>	
	<b>Format including duties,</b>	<b>Yes</b>	
	<b>Content; intended outcomes clearly described</b>	<b>Yes</b>	
	<b>Evidence base; key references</b>	<b>Yes</b>	

	included and cited in full		
	<b>Associated documentation</b> recorded	<b>Yes</b>	
	<b>Review/consultation process:</b> List of groups/committees included with the policy	<b>Yes</b>	
	Appropriate stakeholders consulted	<b>Yes</b>	
	<b>Approval:</b> Staff side committee (if appropriate)		
	<b>Dissemination &amp; implementation:</b> appropriately described	<b>Yes</b>	
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	<b>Document control:</b> table updated appropriately	<b>Yes</b>	
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	<b>Review date:</b> identified and acceptable	<b>Yes</b>	
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	<b>Intranet to be updated:</b> Record the date and person responsible		
	<b>Individual approval;</b> Policy author	<b>Date</b>	<b>Sign</b>
	<b>Director of Corporate Affairs:</b> update version control and approval of the process	<b>Date</b>	<b>Sign</b>
	Policy archived		

**Committee Approval**

**Committee which forms the approval process: Policy Committee**

**Date of approval: 13 10 16**

**Signature of Chair of Committee, including approval: Mike Davison**

# 1 INTRODUCTION

- 1.1 City Hospitals Sunderland NHS Foundation Trust (the Trust) is committed to ensuring the health, safety, wellbeing and resilience of all staff.
- 1.2 This policy sets out the Trust's intentions for the management of mental wellbeing and resilience at work to ensure a healthy, motivated and committed workforce, which in turn will deliver high quality services.
- 1.3 The Health and Safety Executive (HSE) defines work related stress as *“the adverse reaction people have to excessive pressures, or other types of demands placed upon them”*.
- 1.4 The HSE emphasises that well designed, organised and managed work helps to maintain and promote individual health and wellbeing. But where there has been insufficient attention to job design, work organisation and management of/support for staff, the benefits and assets associated with ‘good work’ could be lost. One possible result is work related stress. Work related stress can occur where work demands of various types and combinations exceed a person's capacity and capability to cope. It is a significant cause of illness and disease and is known to be linked with high levels of sickness absence and other indicators of organisational under performance including human error.
- 1.5 The Trust strives to have an organisational culture that is both supportive and empowering with a management style that reflects this.
- 1.6 Staff are encouraged to take personal responsibility for themselves both in and out of work and support others to do the same. By implementing this policy, it is expected that awareness of the causes of stress will increase, as will awareness of the support that is available for staff. This is intended to reduce the overall levels of stress within the Trust, which is a significant reason for sickness absence.
- 1.7 The Trust provides a range of services and support for staff experiencing stress, whether or not this is related to work or personal issues. Information is available on the Occupational Health and Wellbeing section of the Trust's Intranet at <http://chsintranet/corporate-functions/human-resources/occupational-health/>
- 1.8 Individuals can experience stress for a variety of reasons but may sometimes find they have difficulty coping with situations, even those with which they previously coped well. Employees should not hesitate to seek support if they are experiencing stress, or feel they are at risk of stress. Employees should approach their manager for support in the first instance and are strongly encouraged to do so, but can approach their manager's manager, Human Resources, their Trade Union, the Employee Assistance Programme, a Dignity at Work Advisor, or the Occupational Health and Wellbeing service if, for whatever reason, they feel they cannot approach their manager. Employees are strongly encouraged not to suffer in silence and to accept opportunities for support if offered e.g. counselling.

Evidence suggests that it can be therapeutic and beneficial for long term wellbeing to avoid absence due to work related stress and remain in work with appropriate organisational support. Avoidance of addressing stressors in the workplace by being absent from work may not aid resolution and may cause further stress – see <http://www.dwp.gov.uk/docs/hwwb-working-for-a-healthier-tomorrow.pdf>

## **2 PURPOSE & SCOPE**

2.1 The purpose of this policy is to provide direction to staff and managers on the management of work related stress, promotion of mental wellbeing and resilience and the processes for risk assessment based on the HSE's Stress Management Standards.

2.2 The anticipated benefits from implementing the policy include:

- Improved working climate and culture
- Greater openness about sources of pressure at work at all levels
- Better awareness about stress and mental wellbeing in all employees
- The continuing importance of trying to ensure a good work-life balance for all employees
- Greater consistency of approach from managers in dealing with mental wellbeing
- Early identification of stress supporting prompt resolution
- Greater awareness of support available to staff
- Improved stress risk management skills in managers
- Overall reduction in key stress indicators including reduction in sickness absence

2.3 This policy applies to all employees of the Trust.

## **3 DUTIES**

### **3.1 Board of Directors**

The Board of Directors is responsible for monitoring and approving a framework to ensure robust stress management, which is compliant with all relevant legislation and guidelines.

### **3.2 Chief Executive**

The Chief Executive has ultimate responsibility for ensuring that a robust policy and procedures are in place that are compliant with all relevant legislation and guidelines.

### **3.3 Director of Human Resources**

The Director of Human Resources is the nominated Director lead for this policy and is directly responsible to the Chief Executive for its implementation, including consultation with staff side representatives.

### **3.4 Managers**

It is the responsibility of managers:-

- To prevent work related stress wherever possible.
- To minimise and manage stress risks.
- To use regular supervision, 1:1 / team meetings and appraisals to discuss staff wellbeing and identify any stress risks.
- To provide support to employees or facilitate support from elsewhere as necessary.

- To manage any stress-related absences consistently and fairly in line with Trust policies.
- To carry out stress risk assessments in line with this policy and to develop an action plan as appropriate from the results.
- To facilitate, arrange and/or refer employees for support (e.g. counselling) where necessary.
- To be flexible and explore reasonable adjustments that would support staff with mental health problems, e.g. phased return to work or adjustment to working hours.
- To seek advice from HR, Occupational Health or Health and Safety regarding the management of work related stress.

### **3.5 Human Resources**

The Human Resources Department provides advice and support to managers on implementing this policy and the management standards for work related stress. It also provides regular management reports identifying levels of stress related sickness and advise / support managers in dealing with sickness absence caused by work related stress.

### **3.6 Health and Safety Representatives**

Health and Safety representatives play a key role in the management of work related stress. They consult with their members and be involved in the risk assessment process, the identification of possible interventions and the implementation of action plans.

### **3.7 Occupational Health and Wellbeing Department**

Occupational Health and Wellbeing staff provides an impartial and confidential service outside of the normal operational and line management arrangements. They appreciate that individuals suffering stress may, in the short term, be distressed; however remaining at work and working towards resolution of identified stressors is strongly advised. This may include temporarily working in another area. The role of the Occupational Health and Wellbeing service in relation to work related stress is to:

- Ensure employees who are referred with stress are offered a timely appointment.
- Refer employees to the Trust's Employee Assistance Programme for counselling where appropriate.
- Advise managers regarding any fitness for work issues.
- Recommend any reasonable adjustments to facilitate and/or maintain the ability of individuals to remain at work, including rapid access for counselling, where appropriate.
- Provide statistical data regarding Occupational Health and Wellbeing activity relating to stress and mental health and identify and analyse emerging trends and recommend appropriate actions.
- Provide advice and support to managers and employees.

### 3.8 Employees

Employees are responsible for ensuring that the principles outlined within this policy are appropriately applied, with particular regard to:

- Raising any issues of concern with their line manager at their earliest opportunity.
- Seeking additional help and support if required in handling stress from internal or external agencies such as their GP, the employee assistance programme, Occupational Health and Wellbeing department and/or the Chaplaincy at the earliest opportunity.
- Being aware of stress in themselves and colleagues.
- Being aware of how stress can affect people at work or at home, and in symptoms indicating illness.
- Ensuring that they themselves do not behave in such a way that they cause other members of staff and colleagues undue stress and/or harassment.

## 4 DEFINITIONS

### 4.1 Stress

For the purpose of this policy, the HSE definition is used:-

**“The adverse reaction people have to excessive pressure or other types of demand placed on them”, [Health and Safety Executive (HSE) 2004]**

Stress is not an illness, nor is it a diagnosis; it is a state of being. However, if stress becomes excessive and/or prolonged, mental and physical illness may develop.

There is a difference between challenge and stress. Challenge can be motivating and positive; challenge is often essential in a job and improves performance. However ‘stress’ is taken to mean the negative response to too much challenge or pressure, or too many demands, which the person finds difficulty in coping with. Stress can be caused by pressures at home or at work, or a combination of both.

### 4.2 Good Mental Health

Good mental health is defined as a state of wellbeing in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community- (*World Health Organisation (WHO) Mental Health: a state of wellbeing, October 2011*).

### 4.3 Resilience

Resilience is defined as the ability to bounce back from setbacks and keep going in the face of tough challenges. Resilience at work can be described as the capability to maintain high performance and positive wellbeing.

Resilient individuals are able to sustain successful performance and positive wellbeing in the face of adverse conditions, and to recover from or adjust easily to misfortune or change.



Staff can gain an understanding of their own resilience by using the personal *i-resilience* tool which is accessible by clicking on this link - [City Hospitals Sunderland NHS Foundation Trust \*i-resilience\* report](#). The personal *i-resilience* report allows staff to build on existing areas of strength, to manage any potential areas of risk and to develop their resilience in line with the results of the report. The feedback is personal to the individual who has completed the report and no feedback is given to the Trust.

### **4.3 Reasonable Adjustments**

Reasonable adjustments depend on the circumstances of a case and service needs but may include:

- A temporary reduction to starting and finishing times
- Temporary adjustment in working duties e.g. reduced workload if appropriate
- Additional training/coaching support
- More flexible working arrangements
- More regular supervision if appropriate
- Adjustments reflecting an employee's specific learning and development needs, especially when an employee is taking on a new or changed role

The Trust has a range of flexible working arrangements and advice can be sought from Human Resources and Staff Side representatives.

### **4.4 Occupational Stressors**

There are six key Occupational Stressors which, if well managed, can help to reduce work-related stress. These are:

- Demands – Includes issues like workload, work patterns and the work environment.
- Control – How much “say” the person has in the way they do their work.
- Support – Includes the encouragement, sponsorship and resources provided by the organisation, line management and colleagues.
- Relationships – Includes promoting positive working to avoid conflict and dealing with unacceptable behaviour.
- Role – Whether people understand their role within the organisation and whether the organisation ensures that they do not have conflicting roles.
- Change – How organisational change (large or small) is managed and communicated in the organisation.

### **4.5 Risk Assessment**

Risk assessment is a process of looking forward, to anticipate and prevent harm before it occurs. The risk assessment process identifies hazards, assesses the risks to health and safety from those hazards, prevents the hazards from occurring, or if they cannot be avoided, controlling them so they are reduced as far as practicable.

## **5 LEGAL OBLIGATIONS**

- 5.1 The Trust has a duty of care for the mental health and well-being of its employees. The Management of Health and Safety at Work Regulations 1999 impose specific legal duties on employers, in particular the duty to assess the health and safety risk to employees and to identify measures to reduce risk. This policy describes how the Trust meets its legal obligations in this respect.
- 5.2 Stress will be treated in the same way as any other health hazard and risks to mental health and well-being will be assessed when necessary. Where an employee becomes disabled through stress-related illness, reasonable adjustments will be made where practicable.

## **6 RISK ASSESSMENT**

When assessing the risks of work-related stress, it is important to consider the following:

- The assessor needs to be aware of the basic facts about work-related stress and how to undertake a risk assessment
- The hazards to be assessed are the 'stressors' and work-related stress is the harm that can occur as a result of occupational stressors.
- The assessor should examine any hazards and indicators of stress e.g. high levels of sickness absence due to stress, high staff turnover, discussion at team meetings etc.

The risks that are associated with violence and lone working can also be contributory factors when considering work-related stress and therefore must be included in the assessments when appropriate.

### **6.1 Supporting Staff**

Managers must ensure that proactive risk assessments are undertaken regularly, and at a minimum once a year. In addition to this routine review, risk assessments must be undertaken whenever the specific circumstances of the service require it, e.g. during times of significant service change or other circumstances which may cause stress to the team.

Risk assessments must be undertaken by the team manager in consultation with the team/service, as they will have valuable information to contribute and this process will reassure them that action is being taken.

Where a team/service area is identified as experiencing higher levels of stress an action plan must be developed by a member of staff with appropriate seniority and objectivity, with input from the team/ service as required. Advice from Human Resources, Health and Safety, and Occupational Health and Wellbeing should be sought as required.

The tools for undertaking a risk assessment and developing an action plan can be found in section 6.3.

## 6.2 **Assessing an Individual**

The management of stress and the effectiveness of interventions and approaches should form part of ongoing managerial supervision and be discussed at line management meetings.

Where a manager has concerns that a member of their staff appears to be showing signs of stress, they must meet with that individual to discuss their concerns.

Where stress is potentially work-related they should use the stress indicator tool, analysis tool and action plan available on the HSE website using the tools in section 6.3.

The risk assessment and action plan must be recorded and stored within the individual's record along with notes following reviews. The assessment must be repeated at appropriate intervals to ensure that action plans are appropriate and are reducing identified work related stressors.

Timeframes must be agreed for implementation of action plans and must be monitored for delivery.

Managers should be flexible wherever possible, especially where reasonable adjustments are required for staff with mental health problems or where phased returns to work are necessary following stress-related absence.

If, having undertaken the above the employee continues to experience untoward stress, managers should:

- Maintain good communication at all times, and this should be 'face-to-face' communication whenever possible. Good communication reduces unnecessary uncertainty and prevents stress, especially during organisational change.
- Use positive feedback where available and any negative feedback should be constructive.
- Monitor and review the workload and working time of staff, to ensure that neither becomes excessive.
- Not regard stress as a weakness or illness, and should encourage open discussion of work pressures at team meetings.
- Be clear about the role, responsibilities and expectations of staff.
- Refer employees exhibiting symptoms of stress to Occupational Health and Wellbeing as soon as it is identified or within the first 5 days of absence. Where possible, a copy of any stress risk assessment and action plan should be included with the referral.

Appropriate training/coaching is available for managers. Its main aim is to assist managers in identifying stress-related problems and to minimise associated risks. This is delivered by Human Resources.

The Chartered Institute of Personnel and Development has, in conjunction with the HSE, developed practical help for line managers in examining their own behaviour in preventing and reducing stress in those they manage. This guidance can be found at: <http://www.cipd.co.uk/subjects/health/stress/strwklmgr.htm> also available on HSE site.

Managers should not hesitate to seek support from Human Resources and/or Occupational Health and Wellbeing if in any doubt about what to do about a stress-related issue. Managers should not ignore such issues if they have a concern related to stress or the mental well-being of staff.

### 6.3 Tools

The tools for assessing stress levels for an individual or a team / group of staff are the same and can be found via the following links:

- HSE indicator tool (the risk assessment for work related stress): <http://www.hse.gov.uk/stress/standards/downloads.htm>
- A template of an action plan can be found at: <http://www.hse.gov.uk/stress/standards/index.htm>

Managers must seek to consult and involve staff at the earliest appropriate stage in decisions that affect them.

A diagram of the risk assessment process is in **Appendix One**.

If an individual does not wish to complete the tool with their manager an appropriate alternative should be offered. Options for alternatives should be discussed with Human Resources and/ or Occupational Health and Wellbeing and a way forward agreed.

## 7 MANAGEMENT OF STRESS-RELATED ABSENCE

- 7.1 Managers should be consistent and follow the agreed absence management procedure in the Trust's Attendance Management Policy – see <http://chsintranet/2014/07/23/human-resources-policies/>. In particular, managers should be aware that increased or more frequent absence may indicate an underlying stress problem. Return-to-work interviews cover all aspects of absence and enable managers to discuss stress related problems where appropriate.
- 7.2 Managers must complete a risk assessment with the employee and provide a copy of the results to Occupational Health and Wellbeing. Managers should seek advice from Human Resources or Occupational Health and Wellbeing if required.
- 7.3 Where an absence is identified as stress-related, an early referral to Occupational Health and Wellbeing is essential and should be submitted by the Manager within the first 5 days of absence.

## 8 WORKING RELATIONSHIPS

- 8.1 Good, supportive working relationships have a buffering effect against stress. Managers should be supportive and all employees are encouraged to be supportive of each other. Poor working relationships can be a cause of stress in the workplace. If conflict arises in the workplace it is now well recognised that

early intervention by service managers with support from colleagues is critical if work related stress is to be avoided. Harassment and bullying, in particular, can cause severe stress. Employees should report cases of harassment or bullying in line with the Trust's Bullying and Harassment Policy. Details of where employees can access support if they feel they are being bullied or harassed are on the intranet <http://chsintranet/2015/05/05/dignity-at-work/>

- 8.2 Employees should not hesitate to discuss their concerns directly with a Human Resources Manager or Dignity at Work Advisor if they feel they cannot approach their own manager.

## 9. MONITORING COMPLIANCE/EFFECTIVENESS OF THE POLICY

Evidence of Compliance	Method of Assessment	Frequency	Responsibility	Reporting to	Responsibility for Production of Action Plan	Who Monitors Action Plan Progress
Review of staff survey results	Review of Survey Results	Annually	Deputy Director of Human Resources	Board of Directors	Deputy Director of Human Resources	Human Resources Strategy Group
Review of workforce data including cases relating to stress/ mental health.	Workforce Report	Quarterly or more frequently depending upon results	Deputy Director of Human Resources	Board of Directors	Deputy Director of Human Resources	Executive Committee
Occupational Health and Wellbeing Information from Management/ ill health referrals, including common trends and themes, looking for hot spot areas	Occupational Health Data Analysis	Quarterly or more frequently depending upon results	Occupational Health and Wellbeing Manager	Human Resources Strategy Group	Occupational Health and Wellbeing Manager	Deputy Director of Human Resources

## 10 DISSEMINATION, IMPLEMENTATION AND TRAINING

- 10.1 This policy will be disseminated through a range of approaches including team briefings and the intranet. Human Resources, staff side and Occupational Health and Wellbeing staff will work in partnership to disseminate and promote the policy. Publicity material including leaflets and posters will also be used to increase awareness of the policy. Line Managers should implement this policy immediately upon dissemination.
- 10.2 The content of this policy is covered in the Trust's Attendance Management training for managers.
- 10.3 Appropriate training/coaching is available for managers in order to implement this policy. Training in risk assessment is provided by Health and Safety, although

Human Resources can assist managers in identifying stress-related problems and in minimising associated risks.

## 11 CONSULTATION, REVIEW AND APPROVAL/ RATIFICATION

### 11.1 Consultation

Health and Safety Group  
Human Resources Strategy Group  
Joint Consultative Group

### 11.2 Review

Every 3 years

### 11.3 Approval

Executive Committee

### 11.4 Ratification

Policy Committee

## 12 EXTERNAL REFERENCES

- Health & Safety Executive (HSE). (2004a). [Action plan template](http://www.hse.gov.uk). Available at: [www.hse.gov.uk](http://www.hse.gov.uk).
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- [Health and Safety at Work etc. Act 1974 \(c. 37\)](#). London: Stationery Office.
- [The Management of Health and Safety at Work Regulations 1999](#) London: Stationery office.

### **13 ASSOCIATED TRUST DOCUMENTATION**

- Attendance Management Policy
- Bullying and Harassment Policy
- Grievance Policy and Procedure
- General Management of Health and Safety Policy
- Management of Violence to Staff Policy
- Workplace (Health, Safety and Welfare) Policy
- Flexible Working Policy
- *i-resilience* tool

**Risk Assessment Process**

