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HEALTH AND SAFETY COMMISSION

Implementation of HSE's Stress Management Standards in the NHS

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Issue

1 To inform HSC about progress in implementing the new HSE Stress Management Standards (SMS) in NHS organisations. Healthcare is one of the five priority sectors identified by HSE where work related stress is most reported as being a major cause of absence.

Timing

2 Work with the first NHS Trusts is due to commence in May 2005

Recommendation

3 That HSC notes the innovative approach HSE is taking to proactively promote the use of the new SMS and to consider ways in which HSC can support the approach.

Background

4 Half a million people in Britain are currently affected by work-related stress, depression or anxiety, accounting for 12.8 million working days lost each year (Self Reported Work Related Illness Survey 2003/04). Each case results in an average 28.5 working days lost.

5 Approximately 1.3 million people work in the NHS and work related stress is acknowledged to be a serious problem. The National Audit Office found stress related illness to be the second highest cause of sickness absence in the NHS accounting for 30% of lost time. Amongst nurses the prevalence of stress is about 3 times the national average.

Argument

6 In order to achieve the Public Service Agreement (PSA) targets for reduction in ill health and lost days it is essential to address the issue of stress related illness in the public sector. The NHS has been concerned about the high levels of stress amongst its

employees, and the implications of that on delivery of care, for some time. The SMS were launched on 3rd November 2004 and are seen within HSE and externally as the way forward with regard to proactive management of workplace stressors.

7 The main method for reducing the incidence of stress-related ill health is effective use of the SMS, which enables organisations to assess their current exposure to stress risks and then devise and implement action plans to reduce that risk, followed by a later re-assessment. This requires workers and managers to understand and accept the value of the SMS solution, agree to participate, carry out stress audits then develop and implement action plans to achieve sustainable reduction in job-related stress.

8 The key things HSE needs to influence to achieve its Stress programme targets are:

- Awareness of the Stress Management Standards;
- Proper implementation; and
- Effective rehabilitation.

9 The HSC's Strategy is built around four strategic themes:

- Developing closer partnerships;
- Effective and sensible health and safety management;
- Tackling the biggest issues; and
- Communicating the vision of health and safety as "the cornerstone of a civilised society"

The rollout of the SMS across the 5 key target sectors (the NHS, Local Authorities, Education, Central Government and the Financial Services Sector) is aligned to this strategy. The aim is to assist organisations to implement the SMS and provide HSE with invaluable intelligence about how they can be implemented in practice in large organisations, what the problems are, and how effective they will be in reducing sickness absence due to stress related illness. This information will be used to inform and facilitate further use of the SMS engaging progressively larger numbers of organisations, building on lessons learnt, and assisting them to implement the SMS.

11 A great deal of progress has been made in the Health Sector to engage and promote interest. In excess of 50 Trusts have volunteered to participate in the first phase. HSE has identified 50 inspectors who will be trained in the SMS approach and who will act as "HSE Stress Partners" to work closely with volunteer organisations to provide help, support and expertise. These organisations will then be ambassadors within the sectors.

12 This project is part of the first phase of a national rollout of the SMS methodology in priority sectors. The next phase is due to commence toward the end of 2005 and, it is hoped, will involve a large number of NHS Trusts and other organisations in the priority sectors. Across all of those sectors, the approach could potentially reach approximately 7 million workers at high risk from stress related illness. If the methodology proves effective it could make a decisive impact on sickness absence figures and make a significant contribution toward the PSA targets.

Consultation

13 During development of the SMS, many stakeholder groups were consulted including unions, public and private sector organisations. During the planning process of this project the Health Services Unit worked closely with many units within HSE. Externally, close co-operation with the new NHS Employers Organisation (NHSEO) and their active support and guidance ensured that the focus and practicalities of the project were correct.

Presentation

14 The NHS is a high profile national institution and it is envisaged that, if successful, a significant level of public interest will be generated via the media. The project was launched at a recent top-level conference, this, plus the efficient NHS internal communication system, has ensured that it is already well known within the sector.

Costs and Benefits

15 This project, if successful will make significant contributions toward the targets for reduction in ill health and lost days. It has already achieved a high profile within the NHS, failure to deliver, in addition to not delivering the above, would have significant implications for HSE's credibility in this area.

Financial/Resource Implications for HSE

16 One of the requirements of the project is that the trusts will implement the SMS properly themselves. There is, however, a requirement for close evaluation and access to support to achieve this. The Advisory Conciliation and Arbitration Service (ACAS) has agreed to provide some support to facilitate the process and advise organisations about necessary adaptations of their management systems; £500,000 has been committed to this over the next 2 years. Field support for Trusts is to be provided by the HSE Stress Partners (inspectors given a special one day training course). In addition, approximately 40% of a Health Services Sector band 3 inspector has been allocated plus contributions from staff in the Better Health At Work 2 unit, technical backup as necessary from psychologists in the Better Health At Work 7 unit and appropriate administration services.

Environmental Implications - None

Other Implications

17 Assuming successful completion of all phases of the project, ultimately, the goal is to have all NHS trusts following the SMS methodology with the consequent positive impact on sickness absence figures. The vision is to have the NHS as a national exemplar for the philosophy of proactive management of workplace stressors in general and for the implementation of the SMS in particular. Although this project is specifically concerned with the NHS, it is one of five similar projects that, in addition to the NHS, cover the other four priority sectors with large employee numbers and high levels of stress (Local Authorities, Education, Central Government and the Financial Services Sector).

Action

18 HSC is invited to note the activity being proposed and to consider how they might support this project in the NHS and in other priority sectors. It is suggested that such support could consist of championing and supporting such initiatives by, for example, publicising the approach, encouraging and assisting worker engagement.

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