



HSE National Policy on the Prevention and Management of Work-Related Stress 2023

Policy Procedure Protocol Guideline Clinical Guideline

DOCUMENT GOVERNANCE ¹

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Relevant supplementary material can be found: https://healthservice.hse.ie/staff/health-and-safety/work-related-stress/

DOCUMENT MANAGEMENT ²

Presented to the National Joint Council:	26/09/2023
Consultation with the Trade Unions Completed:	13/10/2023
Date effective from:	28/03/2024
Reference No:	HSP:010:03
Current version no: 3	Archived version no: 2
Date set for next review:	28/03/2027

PUBLICATION INFORMATION ³

Title:	HSE National Policy on the Prevention and Management of Work-Related Stress 2023
Topic:	Work-Related Stress
National Group:	Policy Development Group on the HSE Policy on the Prevention and Management of Work-Related Stress
Short summary:	It is the Policy of the Health Service Executive (HSE) to ensure as far as is reasonably practicable the protection of employees from the potential risks related to work-related stress.
Description:	The purpose of this Policy is to raise awareness and understanding of work-related stress, and to support managers and employees on how to prevent, identify and manage work-related stress, with a focus on hazard identification and risk assessment. This Policy is concerned with negative stress and the related risk factors.

¹ Records the senior management roles involved in the governance and development of the document.

² Records the control information about the document.

³ Records the document information required for publication on the HSE National Central Repository.

VERSION CONTROL UPDATE ⁴			
Version No.	Date approved	Section numbers changed	Author
3	November 2023	The Policy has been written in line with the HSE National Framework for developing Policies, Procedures, Protocols and Guidelines (PPPG) 2016 to include Part A and Part B	NHSF
3	November 2023	1.0 Introduction - Section expanded	NHSF
3	November 2023	2.0 Risk Assessment – Section expanded	NHSF
3	November 2023	Inserted new section 3.0 Monitoring and Periodic review	NHSF
3	November 2023	Inserted new section 4.0 Communication and Notification of Risk to Risk Register	NHSF
3	November 2023	5.0 Guidance on Risk Reduction Measures – Reviewed in line with research	NHSF
3	November 2023	6.0 Information, Instruction and Training – Section expanded	NHSF
3	November 2023	Inserted new section 7.0 Reporting Work-Related Stress	NHSF
3	November 2023	8.0 Roles and Responsibilities – Aligned to the Corporate Safety Statement	NHSF
3	November 2023	9.0 HSE Support Services – Section expanded	NHSF
3	November 2023	The Following appendices were re-designed and expanded to include additional examples: <ul style="list-style-type: none"> • Appendix 1 Signs and Symptoms of Work-Related Stress • Appendix 2 Management Standards • Appendix 3 HSE Approach to Work-Related Stress Risk Assessment • Appendix 4 HSE Management of Concerns Relating to Work-Related Stress Flowchart • Appendix 5 HSE HR Supports 	NHSF
3	November 2023	Part B – Developed in line with the National PPPG Framework	NHSF
<p>Document management notes V2 title was HSE Policy for Prevention & Management of Stress in the Workplace and has now been amended in V3 to HSE National Policy on the Prevention and Management of Work-related Stress.</p>			

⁴ Details the version number and section numbers with updated content.

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Part B:

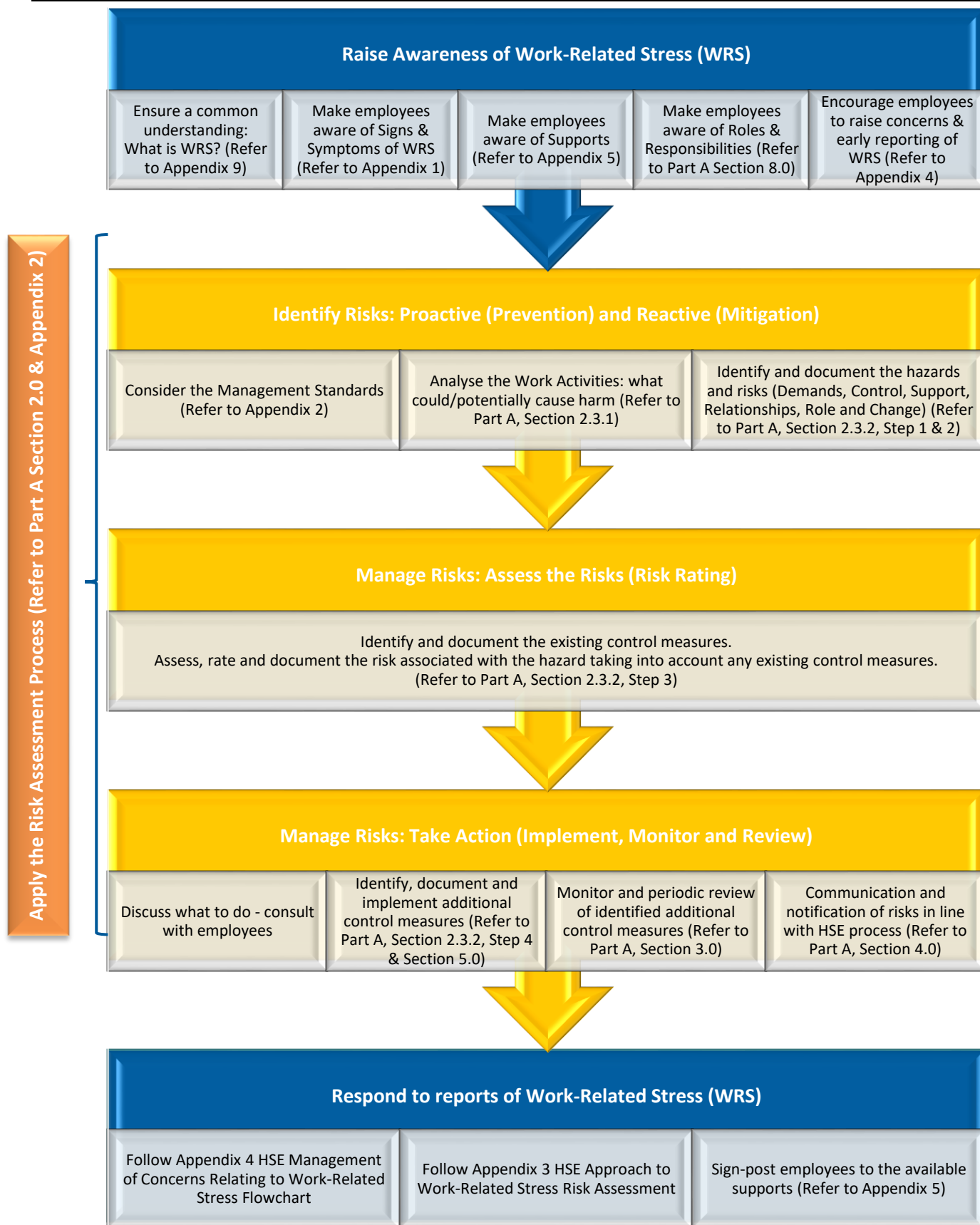
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NOTE: Hyperlinks are located within the Policy to allow access to resources available.

Figure 1: Overview of key stages for Managers in the implementation of the HSE Policy on the Prevention and Management of Work-Related Stress 2023



Part A:

1.0 Introduction

- 1.1 The Health Service Executive (HSE) recognises that due to the nature of work and services provided some staff may experience work-related stress. Managing stress in the workplace forms a core part of the HSE's overall safety management system with a focus on the hazards and identified risks associated with potential work-related **stressors (psychosocial hazards)**.
- 1.2 'Work-Related Stress (WRS) can be defined as stress caused or made worse by work. It simply refers to when a person perceives the work environment in such a way that his or her reaction involves feelings of an inability to cope. It may be caused by perceived/real pressures/deadlines/threats/anxieties within the working environment' (HSA, 2022).
- 1.3 There is an important distinction between pressure and stress. Pressure at the workplace is unavoidable due to the demands of the contemporary work environment. Pressure perceived as acceptable by an individual may even keep workers alert, motivated, able to work and learn, depending on the available resources and personal characteristics. However, when that pressure becomes excessive or otherwise unmanageable it leads to stress. Stress can damage an employee's health and the business performance (WHO, 2020).
- 1.4 The HSE encourages a culture where signs of stress are recognised early and appropriately managed. Signs and symptoms of work-related stress vary from one individual to another. Work-related stress can have a negative effect both physically and emotionally. Signs and symptoms of work-related stress are referred to in Appendix 1.
- 1.5 Work-related stress can be prevented and managed by undertaking a risk assessment, putting suitable control measures in place, and maintaining and reviewing the effectiveness of control measures. Managers must ensure that the risks associated with work-related stress are considered and documented within their risk assessments. Adopting a proactive approach to risk assessment utilising the HSE UK Management Standards⁵ (outlined in Appendix 2) will have a positive benefit for managers and employees.
- 1.6 Communication is an essential part of reducing stress, so having dedicated opportunities for staff to discuss their concerns is crucial.
- 1.7 The policy serves to enhance an organisational culture of individual and peer responsibility for the management of work-related stress, in which stress is positively managed and where staff speak freely about stress and seek help or support.

Refer to Appendix 1 Signs and Symptoms of Work-Related Stress for further guidance.

Refer to Appendix 2 HSE UK Management Standards for further guidance.

⁵ HSE (UK) Management Standards identifies six areas of work (stressors) that if not properly managed can have a negative impact on employee health

2.0 Risk Assessment Process

2.1 Work-related stress is a recognised occupational hazard under the Safety, Health and Welfare at Work Act 2005, and must be addressed and managed through the risk assessment process involving participation and consultation and the application of the principles of prevention.

2.2 Risk Assessment should be carried out as follows:

- **Proactively (Prevention) at Level 1** to work with an individual employee or collaboratively with a group/team/service to identify work-related stress hazards, conduct a risk assessment and implement controls to reduce employee(s) exposure to workplace stressors.
- **Reactively (Mitigation) at Level 2** to work with an individual employee who is exhibiting signs of stress or is seeking support, or to work collaboratively with the group/team/service where there is information to suggest that they may be experiencing work-related stress.

Refer to Appendix 3 HSE Approach to Work-Related Stress Risk Assessment for further guidance

2.3 The risk assessment process can be broken down into a number of steps as outlined in Figure 2.

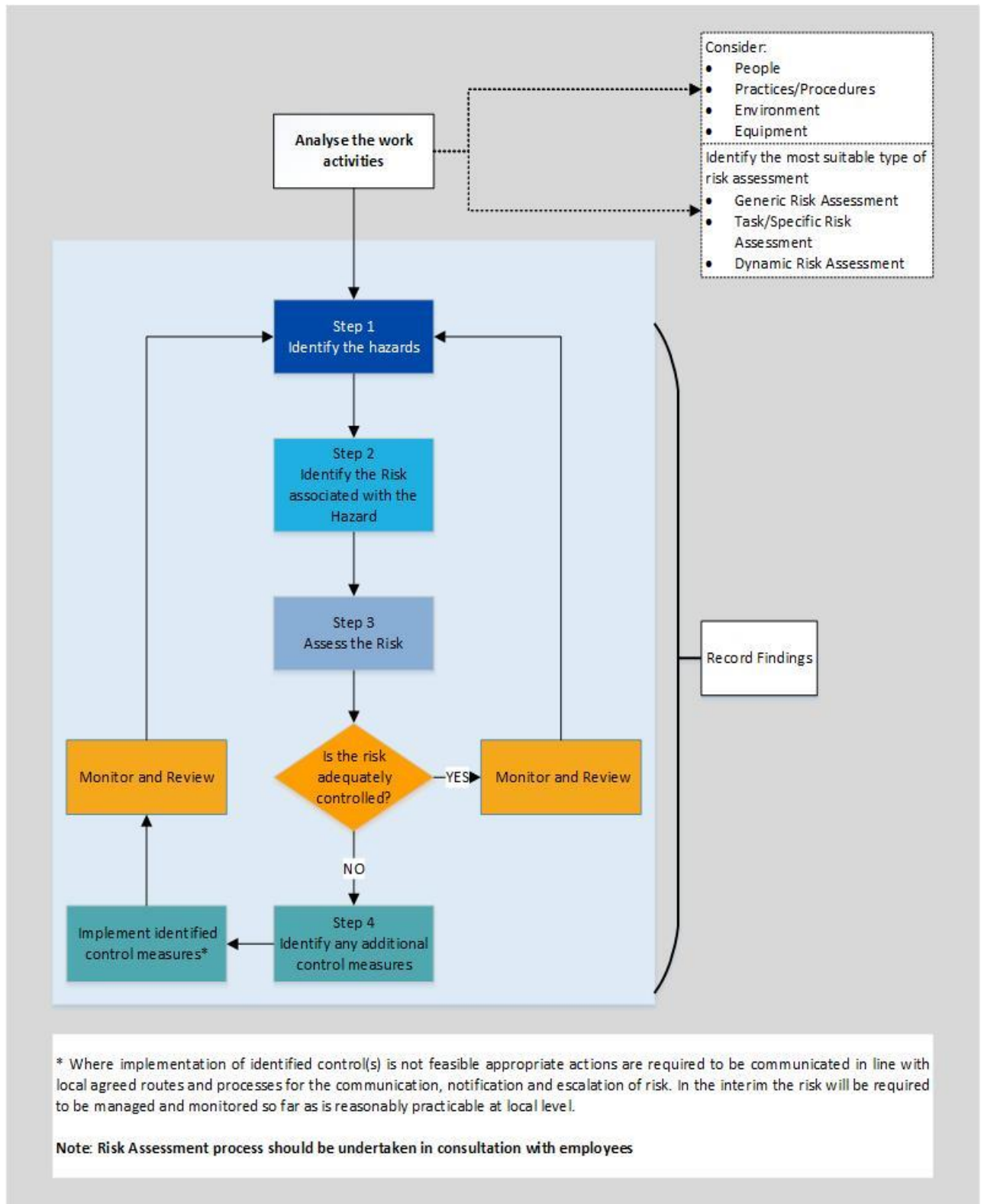


Figure 2. Risk Assessment Process

2.3.1 Analyse the work activities

To undertake a risk assessment, it is important to understand what in the workplace could cause/potentially could cause harm to employees. The analysis of data will help to understand the current situation. Possible sources include the following:

Table 1: Existing sources of data

Data	Considerations
Sickness absence data	Review sickness absence data - is sickness absence increasing? Are trends emerging? Note: Stress-related sickness absence is sometimes not reported as such, due to perceived stigma.
Staff turnover rates	Review staff turnover rates - are staff turnover rates higher in certain areas?
Exit interview data	Review exit interviews data, where available, to check why people have decided to leave? Are trends emerging?
Claims/legal action	Review report following claims/legal action.
Performance achievement/ team meetings/informal talks to staff	Talk to staff - these can provide useful opportunities for team members to identify and share views on current issues or concerns.
Staff surveys	Review findings of staff surveys available.

(Adapted from the Health and Safety Executive, 2019 "Tackling work-related stress using the Management Standards approach")

2.3.2 Risk Assessment Steps

Table 2: Work-Related Stress Risk Assessment Steps

Work-Related Stress Risk Assessment Steps	
Step 1: Identify the hazard	<p>Identify the hazard(s) and risk(s) using the six key areas (below) for assessing potential sources of work-related stress (Management Standards):</p> <ul style="list-style-type: none"> • Demands • Control • Support • Relationships • Role • Change <p>In order to carry out step 1 and step 2:</p> <ul style="list-style-type: none"> • Option 1: Utilise Part 2 of 3 of the Work-Related Stress: Risk Assessment Form (CF:013) for individuals or group/team/service. or; • Option 2: Where there are groups of 5 or more employees complete HSE Work Positive Critical Incident and upon completion the line manager selects the 'Work Stressors Report' and use this data to inform and support the completion of the Work-Related Stress: Risk Assessment Form (CF:013). <p>Note: <i>Appendix 2 HSE UK Management Standards</i> provides guidance on approaching work-related stress risk assessment.</p>
Step 2: Identify the risks associated with the hazard	
Step 3: Assess the risks	<p>The next step is to:</p> <ol style="list-style-type: none"> (1) Identify and document the existing control measures and (2) Assess and rate the risk associated with the hazard taking into account any existing control measures. <p>The likelihood and impact will depend on the control measures already in place, how effective they are, the experience, knowledge and skill of the employee(s) undertaking the task, the system of work and the available resources.</p> <p>Other contributory factors that should be considered include:</p> <ul style="list-style-type: none"> • Information from the review of sickness absence data, staff turnover rates, exit interview data, claims/legal action, work performance levels and staff surveys. • Audits and inspections that have been undertaken. <p>The HSE has adopted a standardised approach to the assignment of likelihood and impact scores and the rating of risk i.e. the HSE Risk Assessment Tool.</p>
Step 4: Identify any additional control measures	<p>Section 5.0 Guidance on Risk Reduction Measures provides evidence based guidance on control measures to assist in minimising the risks associated with work-related stress.</p>

3.0 Monitoring and Periodic Review

3.1 Once control measures have been introduced, implement a process for the regular monitoring and evaluation of effectiveness to ensure the desired outcomes are achieved. This should be proactive to include audits/workplace inspections, analysing local performance indicators, and reactive following reports of work-related stress.

3.2 In line with Section 19 (3) of the [Safety, Health and Welfare at Work Act, 2005](#), risk assessments must be reviewed where:

- a) There has been significant change in the matters to which they relate.
- b) There is another reason to believe they are no longer valid.

Examples include: when new procedures, new equipment, technology, new personnel, restructuring and interpersonal conflict.

3.3 It is best practice and HSE policy, to review risk assessments at least annually.

4.0 Communication, Notification and Escalation of Risk

Where it is not possible to complete all actions identified due to resources or other constraints, appropriate actions are required to be communicated in line with local agreed routes and processes for the communication, notification and escalation of risk. In the interim the risk will be required to be managed and monitored so far as is reasonably practicable at local level⁶.

5.0 Guidance on Risk Reduction Measures

5.1 Stress Management Interventions

Stress management interventions must focus on the following three levels; the main aspects of each level are set out as follows:

5.1.1 Primary-level Interventions (Prevention)

These are interventions aimed at the entire workforce which promote wellbeing and prevent to prevent stress by removing the sources of stress. They also help employees to manage or cope better with work-related stress. These include:

Table 3: Primary-level Interventions (Prevention)

Selection, assessment and best practice recruitment processes	<ul style="list-style-type: none">• Using best practice recruitment processes.• HSE Screening Process.• Employee Induction, five stage approach including:<ul style="list-style-type: none">○ Stage 1 – Pre-employment Induction○ Stage 2 – Corporate Induction (Part 1 of 2) – i-START Induction Hub○ Stage 3 – Departmental Induction○ Stage 4 – Site Induction○ Stage 5 – Corporate Induction (Part 2 of 2) – Virtual Training Programme <p>The Induction Guidelines and Checklists are available at: https://healthservice.hse.ie/staff/training-and-development/induction/</p>
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⁶ HSE (2023), HSE Enterprise Risk Management Policy and Procedures 2023

Create a supportive and positive work environment	<ul style="list-style-type: none"> • Implement HSE Work Positive Critical Incident to: <ul style="list-style-type: none"> ○ Create a supportive and positive work environment and culture in which the safety and welfare of all employees is a priority. ○ Create a healthy place of work. ○ Create a psychologically safe work environment. • Create a values based work environment e.g. incorporate Values in Action – Our People, Our Culture.
Implement Organisational Policies and Procedures	<ul style="list-style-type: none"> • Implement the Statement, Site/Service Safety Statements and supporting Health and Safety Policies and Procedures. • Implement the HSE Dignity at Work Policy and ensuring implementation of all other relevant Human Resources Policies and Procedures. • Create a Just Culture. • Implement Health Services Change Guide.
Management of ergonomics and environmental design	<ul style="list-style-type: none"> • Review equipment used at work and physical working conditions. • Complete Display Screen Equipment (DSE) Risk Assessments.
Management of job design and workload	<ul style="list-style-type: none"> • Review aspects of work to optimise best use of skill set in line with requirements of the role.
Improving control	<ul style="list-style-type: none"> • Engage employees in the management of their workload. • Promote opportunities for work/roster redesign in consultation with team/s. • Promote opportunities for personal development.
Conduct regular team meetings	<p>Team meetings provide an opportunity to:</p> <ul style="list-style-type: none"> • Clarify employee roles and responsibilities. • Specify employee expectations, goals and objectives. • Cognisance of employees working remotely. • Set realistic deadlines. • Provide recognition, support and feedback. • Share information about activities in the organisation. • Discuss existing problems, challenges and desired solutions. • Encourage dialogue with supervisors and employees. • Provide opportunity to influence decisions affecting the team/department.
Determine the content of each position (review positions and tasks)	<ul style="list-style-type: none"> • Engage with the HSE Workforce Planning Process • Refer to Workforce Planning Resources: https://www.hse.ie/eng/staff/resources/our-workforce/resources/
Conduct Performance Achievement	<ul style="list-style-type: none"> • Engage with the HSE Performance Achievement Process
Provide training and information based on Training Needs Assessment	<ul style="list-style-type: none"> • Training needs of staff reviewed on regularly basis as part of Training Needs Assessment. • Implement the HSE mentoring programme. • Implement HSE Coaching Programme.

	<ul style="list-style-type: none"> • Create resilience/effecting coping skills, through organising or attending appropriate stress management and work and wellbeing events.
Communicate supports to staff	<ul style="list-style-type: none"> • Encourage employees to take responsibility for their own health and wellbeing by providing information on the support services available to staff. • Refer to: <ul style="list-style-type: none"> ○ <i>Appendix 5 - HSE HR Supports.</i> • Refer to Other HSE Supports & Non-HSE Supports: https://healthyworkplace.ie/resource-hub/

5.1.2 Secondary-level Interventions (Protection / Management)

Secondary-level interventions aim to strengthen employee’s ability to cope with exposure to these stressors, or to reverse, reduce or slow the progression of the situation. Employees are encouraged to raise issues with their manager as early as possible to prevent ongoing workplace issues. Secondary interventions focus on the employee throughout their period within the HSE and includes:

Table 4: Secondary-level Interventions (Protection / Management)

Information and awareness activities	<ul style="list-style-type: none"> • Access to competent Occupational Safety and Health advice and support. • Access to the National Health and Safety Function (NHSF). • Access to Safety Representatives where selected and elected, this information should be available to all staff in their Site/Service Safety Statement. • Access to Occupational Health and Employee Assistance Programme (EAP). • Access to competent Human Resources advice. • Communicating on matters impacting on work to avoid uncertainty/speculation. • Encourage employees to raise issues with their manager as early as possible.
Personal Achievement	<p>Training for example:</p> <ul style="list-style-type: none"> • Stress management. • Time management. • Conflict and problem management and resolution. <p>Mentoring and Coaching:</p> <ul style="list-style-type: none"> • Providing required coaching, mentoring and support for the employee. <p>Performance Achievement:</p> <ul style="list-style-type: none"> • Providing opportunities for goal setting and personal development/training needs and continuous review.
HSE Health and Wellbeing	<ul style="list-style-type: none"> • Minding your Wellbeing Programme • Healthy Eating and Active Living Programme • Stress Control Programme

	Refer to: https://www.hse.ie/eng/about/who/healthwellbeing/our-priority-programmes/staff-health-and-wellbeing/
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5.1.3 Tertiary-level Interventions (Rehabilitation)

Tertiary-level interventions offer remedial support for the problems that have already been caused by psychosocial risks. Tertiary intervention focuses on managing, rehabilitating symptoms of existing stress related problems or diseases to minimise potential harm. It involves referring employees to support services e.g. Occupational Health, Employee Assistance Programme (EAP) once a problem has been identified. These include:

Table 5: Tertiary-level Interventions (Rehabilitation)

Identification of problem	<ul style="list-style-type: none"> Be aware of process in place to respond to concerns relating to work-related stress. Refer to: <i>Appendix 4 HSE Management of Concerns Relating to Work-Related Stress Flowchart</i>. Review/complete work-related stress risk assessment with individual or group/team/service who is exhibiting signs of stress or seeking support in order to solve the problem. Refer to: <i>Appendix 3 HSE Approach to Work-Related Stress Risk Assessment for further guidance</i>.
Occupational Health	<ul style="list-style-type: none"> Fitness for work assessment and case management of HCWs out of work due to illness or injury as per the HSE Managing Attendance Policy and Procedure, HSE Rehabilitation of Employees Back to Work After Illness or Injury Policy & Procedure and HSE Long Term Absence Benefit Schemes Guidelines. Provide recommendations on workplace accommodations required to facilitate early and safe return to work. Provide an opinion on fitness as required by Critical Illness protocol, Serious Physical Assault scheme/Temporary Rehabilitation Remuneration/ Injury at Work scheme. Provide health surveillance based on risk assessment. Providing information to employees regarding support services available e.g. counselling support through the Employee Assistance Programme and employee coaching. Promote employee health and wellbeing.
Employee Assistance Programme (EAP)	<ul style="list-style-type: none"> Identify and help resolve individual or group concerns. Assessing needs. Offering advice, guidance, support or counselling. Telephone support line. Workshops/training on topics where the EAP has relevant expertise, e.g. stress management, resilience, post trauma support and team support.

	<ul style="list-style-type: none"> Refer to: https://healthservice.hse.ie/staff/benefits-and-services/employee-assistance-programme-staff-counselling/
Organisational Health	<ul style="list-style-type: none"> Provision of interventions to support healthcare services and managers address complex psychosocial risks in the workplace. Refer to: https://healthservice.hse.ie/staff/procedures-guidelines/organisational-health/.
Rehabilitation	<ul style="list-style-type: none"> Support employees to stay at or return to work within a safe and structured process following injury or illness. Refer to: https://healthservice.hse.ie/staff/benefits-and-services/occupational-health/rehabilitation/.
Return-to-work Plan	<ul style="list-style-type: none"> Maintains the employment relationship with the employee on leave.
Other supports	<ul style="list-style-type: none"> Refer to: <ul style="list-style-type: none"> <i>Appendix 5 - HSE HR Supports.</i> Refer to Other HSE Supports & Non-HSE Supports: https://healthyworkplace.ie/resource-hub/

(Adapted from the EU-OSHA and Eurofound, 2014 “Psychosocial risks in Europe: Prevalence and strategies for prevention” and HSE 2022 “Employee Handbook”

Further guidance on risk reduction can be obtained at the following resources:

[EU-OSHA and Eurofound - Psychosocial risks in Europe: Prevalence and strategies for prevention](#)

[European Agency for Safety and Health at Work - E-guide to managing stress and psychosocial risks](#)

[Health and Safety Authority – Work Related Stress A Guide for Employers](#)

[Health and Safety Authority – Work Related Stress Information Sheet for Employees](#)

6.0 Information, Instruction and Training

- 6.1** The [Safety, Health and Welfare at Work Act 2005](#) (Section 9 and Section 10), requires employers to ensure that employees receive appropriate information, instruction and training relevant to the risks associated with their tasks which include work-related stressors (psychosocial hazards).
- 6.2** Managers must ensure they complete a [training needs assessment \(TNA\)](#) which is informed by the Occupational Health and Safety TNA Factors to include work-related stress risk assessment. The TNA will assist the manager in the identification of any training that is appropriate to their employee and the service. HSE Policy on Statutory Occupational Safety and Health Training and OSH training toolkit are available here: <https://healthservice.hse.ie/staff/training-and-development/health-and-safety-training/occupational-safety--health-osh-trai4ning-/>
- 6.3** The HSE eLearning programme ‘Preventing and Managing Work-Related Stress (WRS) A Guide for Managers’ supports Managers who have the responsibility to manage staff and carry out OSH risk assessments for their area of responsibility. Programme aims to:

- Identify the signs and symptoms of work-related stress individuals and teams.
- Identify manager and employee roles and responsibilities as they relate to preventing and managing work-related stress.
- Conduct a work-related stress risk assessment with an individual and a team using the HSE template.

6.4 Employees are encouraged to attend courses/workshops on stress awareness and management so they are better able to handle pressure they may encounter, and they are able to recognise signs of stress when it occurs within themselves and others as well as coping strategies.

6.5 Other training sources:

- [HSA Psychosocial Hazards and Stress at Work Training](#)

7.0 Reporting Work-Related Stress

Employees should inform their line manager promptly to report any concerns they may have about their well-being and work situation potentially leading to work-related stress. Managers should treat reports of stress seriously, sensitively, in confidence and put time aside to identify the possible reasons for the employee reporting stress.

Refer to Appendix 4 HSE Management of Concerns relating to Work-Related Stress for further guidance.

8.0 Roles and Responsibilities

8.1 Chief Executive Officer (CEO)

The CEO has overarching responsibility to ensure, so far as is reasonably practicable the safety, health and welfare at work of all employees and others affected by the HSE activities by:

8.1.1 Ensuring the development of and compliance with this Policy.

8.1.2 Delegating operational responsibility for the day-to-day discharge of statutory duties under the 2005 Act to the Executive Management Team, Senior Management Team, Senior Managers and Line Managers for all matters within their control.

8.2 Senior Managers e.g. Hospital Group Chief Executive Officers, Community Health Organisations Chief Officers, Chief Ambulance Officers, Assistant National Directors Corporate Services

8.2.1 Ensure there are adequate and appropriate arrangements in place for the successful implementation, monitoring, evaluation and audit of this Policy throughout their respective areas of responsibility.

8.2.2 Ensure necessary resources are allocated and are available for the implementation of this Policy.

8.2.3 Integrate performance indicators in relation to implementation of this Policy.

8.3 Local Senior Managers e.g. Hospital General Manager, Heads of Service, Directors of Nursing, Directors of Midwifery

- 8.3.1** Ensure that all employees are aware of and implement this Policy.
- 8.3.2** Ensure that the hazards and risks to employees associated with work-related stress are identified and assessed and appropriate measures are put in place to eliminate, control or minimise the risk.
- 8.3.3** Ensure that risk assessments are undertaken in a written format and form part of the safety statement.
- 8.3.4** Ensure there is a process in place for the Line Managers to communicate, notify and escalate risk.
- 8.3.5** Ensure that employees are provided with appropriate information, awareness and training to support implementation of this Policy.
- 8.3.6** Identify the resources required to implement this Policy.
- 8.3.7** Monitor and review the effectiveness of preventative procedures and measures.
- 8.3.8** Audit the implementation of this Policy.
- 8.3.9** Provide assurances through respective governance structures that the Policy is being effectively implemented, monitored and audited.

8.4 Line Managers

General responsibilities of line managers are documented in the local Safety Statement and hence are not reproduced here (refer to said document for further information). However, the integral role of the line manager in assessing and reducing risks associated with work-related stress is emphasised here:

- 8.4.1** Ensure that adequate and appropriate arrangements are in place to implement, disseminate and communicate this Policy.
- 8.4.2** Ensure risk assessments (to include the identification of potential stressors in the workplace i.e. demands of the job, control, support, relationships, role, change management) for their area of responsibility are completed proactively and where necessary reactively and reviewed in consultation with employees and appropriate measures to eliminate, minimise or control the risks implemented. Refer to: *Appendix 3 HSE Approach to Work-Related Stress Risk Assessment* for further guidance.
- 8.4.3** Where it is not possible to complete all actions identified due to resources or other constraints, appropriate actions are required to be communicated in line with local agreed routes and processes for the communication, notification and escalation of risk. In the interim the risk will be required to be managed and monitored so far as is reasonably practicable at local level.
- 8.4.4** Monitor and evaluate the effectiveness of control measures on a regular basis. Refer to: *Section 3.0 Monitoring and Periodic Review*.
- 8.4.5** Foster a positive, supportive work environment, where good communication, support and mutual respect is the norm.
- 8.4.6** Communicate to employees any change in the workload, work environment and / or work patterns so they have an opportunity to indicate their capability.
- 8.4.7** Take cognisance of other related policies as appropriate e.g. HSE Dignity at Work Policy for the Health Service, Grievance and Disciplinary Procedures for the Health Service, HSE Managing Attendance Policy and Procedure.
- 8.4.8** Recognise signs of stress in yourself and in others and encourage employees to report stressors and or symptoms of stress. Refer to: *Appendix 1, for guidance on signs and symptoms of work-related stress in an individual and team*.
- 8.4.9** Be aware of the role of the Occupational Health Service.
- 8.4.10** To be aware of the range of employee support services available and advise employees

of the services/supports available to them. Refer to: *Appendix 5, for additional information on HSE HR Supports*. Refer to: *Other HSE Supports & Non-HSE Supports*: <https://healthyworkplace.ie/resource-hub/>.

- 8.4.11** Support appropriate stress management interventions/training to address identified stressors build team/individual resilience and coping mechanisms.
- 8.4.12** Ensure that employees read and sign that they have read and understand the Policy.
- 8.4.13** Audit implementation of this Policy.

8.5 Employees

- 8.5.1** Take reasonable care to protect their own safety, health and welfare and that of others. This includes efforts to prevent or reduce work-related stress.
- 8.5.2** Adhere to and apply this Policy, local procedures and safe systems of work and any associated risk assessments and risk controls.
- 8.5.3** Work in a safe and responsible manner and co-operate with the employer.
- 8.5.4** Co-operate in the regular review of risk assessments and control measures.
- 8.5.5** Attend relevant training as appropriate.
- 8.5.6** Present themselves fit for work⁷. With specific regard to intoxicants, the employee shall: “ensure that he or she is not under the influence of an intoxicant to the extent that he or she is in such a state as to endanger his or her own safety, health or welfare at work or that of any other person”⁸.
- 8.5.7** Not engage in any improper conduct or behaviour which may give rise to potential stressors in the workplace.
- 8.5.8** Report work practices and events that cause undue or unnecessary stress to your manager to allow for early intervention.
- 8.5.9** Take responsibility for minimising risk to self and for seeking out self-help resources through Employee Assistance Programme, Occupational Health and online resources to help manage work-related stress.

Note: There may be complementary responsibilities under the [Dignity at Work Policy for the Health Services](#) and it is recommended that managers and employees make themselves aware of them.

9.0 HSE Support Services

Support is provided by the HSE ‘Competent Persons’ who are professional people with the appropriate qualification, training, experience and knowledge to support managers and employees in carrying out their responsibilities under this Policy.

‘Competent Persons’ include:

- [Human Resource Services](#)
- [Health and Safety Services](#)
- [Occupational Health Services](#)
- [Employee Assistance Programme \(EAP\)](#)
- [Organisational Health Division](#)
- [Workplace Health and Wellbeing](#)
- [Staff Health and Wellbeing](#)

⁷ Fitness to work means that an individual can complete a task safely and without unacceptable risk to themselves, their employing company or a third party. Adapted: (OGP/IPIECA 2011 Fitness to Work Guidance for company and contractor health, HSE and HR Professionals)

⁸ Safety, Health and Welfare at Work Act 2005, Section 13(1)(b)

HSE Support Services:

- Provide relevant and timely advice, guidance and support to managers and employees on how to comply with their legislative duties.
- Provide support to managers in the use and implementation of this Policy.
- Promote effective safety, health and welfare practices throughout the HSE.
- Develop relevant programmes to support the implementation of this Policy.
- Provide support to employees in the treatment of work-related stress symptoms.

For additional information on HSE Support Services refer to:

Appendix 5 - HSE HR Supports available to Managers and Employees to pro-actively promote staff health & wellbeing and responding to work-related stress.

Refer to Other HSE Supports & Non-HSE Supports: <https://healthyworkplace.ie/resource-hub/>

Appendix 1 Signs and Symptoms of Work-Related Stress

Individual effects of stress

Some of the signs and symptoms of work-related stress to look out for in the workplace, which may indicate you or someone is stressed, include:

Physical	Thoughts
<p>Physical symptoms may include:</p> <ul style="list-style-type: none"> • a pounding heart • elevated blood pressure • sweaty palms • tightness of chest • aching neck, jaw and back muscles • headache • chest pain • abdominal cramps • nausea • trembling • sleep disturbance • tiredness • susceptibility to minor illness • itching • easily startled • forgetfulness. 	<p>You may experience:</p> <ul style="list-style-type: none"> • your mind racing or going blank • not being able to 'switch off' • a lack of attention to detail • your self-esteem and confidence plummeting • disorganised thoughts • a diminished sense of meaning in life • a lack of control or the need for too much control • negative self-statements and negative evaluation • difficulty in making decisions • a loss of perspective. <p>You may be:</p> <ul style="list-style-type: none"> • making 'mountains out of molehills' • driving yourself too hard with 'I must do this, ought to do that, should do the other' or demanding too much of others as well as yourself.

Behaviours	Feelings
<p>Behaviour symptoms may include:</p> <ul style="list-style-type: none"> • become withdrawn and not want to socialise • increase your alcohol, nicotine or drugs intake • under eat or over eat • become accident prone and careless • become impatient, violent, aggressive or compulsive – pacing, fidgeting, swearing, blaming, throwing and hitting! • work longer hours – not take breaks, take work home, procrastinate with important projects, and manage your time poorly • no longer have time for leisure activities. 	<p>You may feel:</p> <ul style="list-style-type: none"> • irritable • angry • depressed • jealous • restless • anxious • unreal or hyper alert • unnecessarily guilty. <p>You may experience:</p> <ul style="list-style-type: none"> • panic • mood swings, crying easily.

Team effects of stress:

Work-related stress can impact a whole team in a number of ways. Some of the signs and symptoms to look out for in the workplace, which may indicate a team is stressed, include:

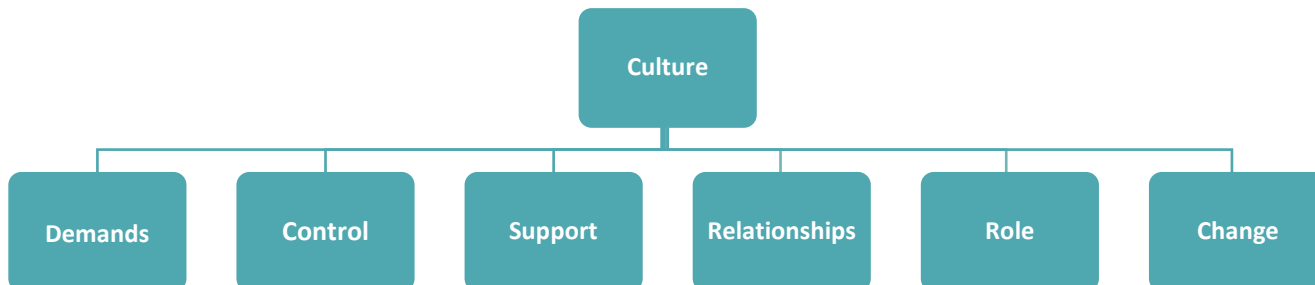
Staff attitude and behaviour	<ul style="list-style-type: none">• Loss of motivation and commitment.• Staff working increasingly long hours but for diminishing returns.• Erratic or poor timekeeping.• Poor morale and a lack of engagement.• Increased intentions to leave job.
Staff turnover	<ul style="list-style-type: none">• Increase in staff turnover, staff don't stay in the job for as long as is normal in the sector and may leave to take up jobs at the same grade or lower just to move on.
Sickness absence	<ul style="list-style-type: none">• Increase in overall sickness absence, in particular, frequent short periods of absence.
Presenteeism	<ul style="list-style-type: none">• Increased levels of presenteeism, with staff coming into work when they are unwell.
Relationships at work	<ul style="list-style-type: none">• Tension and conflict between colleagues and teams.• Poor relationships with clients/patients• Increase in industrial relations or disciplinary problems.
Work performance	<ul style="list-style-type: none">• Reduction in output or productivity.• Increase in incidents and error rates.• Poor decision making.• Deterioration in planning and control of work.

(Royal College of Nursing, 2005), (Ellis, 2017)

Appendix 2 HSE UK Management Standards

'Management Standards' approach to risk assessment

The Health and Safety Executive in the UK and the Health and Safety Authority in Ireland have identified six key areas for assessing potential sources of work-related stress. These are known as the '**Management Standards**'. They cover the primary sources of work-related stress and can be used to measure performance in these areas. The key areas are outlined below:



The following details the HSE UK Management Standards as contained in the Health and Safety Executive, 2019 "Tackling work-related stress using the Management Standards approach".

1. Demands

Includes issues such as workload, work patterns and the work environment.

The standard	Employees indicate that they are able to cope with the demands of their jobs
What should be happening	<ul style="list-style-type: none"> • The organisation provides employees with adequate and achievable demands in relation to the agreed hours of work. • People's skills and abilities are matched to the job demands. • Jobs are designed to be within the capabilities of employees. • Employees' concerns about their work environment are addressed.
Ways to achieve the standard	
Workload	<ul style="list-style-type: none"> • Develop personal work plans to ensure staff know what their job involves. • Hold weekly team meetings to discuss the anticipated workload for the forthcoming week (and to deal with any planned absences). • Hold regular meetings with individuals to discuss their workload and any anticipated challenges. • Adjust work patterns to cope with peaks and staff absences (this needs to be fair and agreed with employees). • Ensure sufficient resources are available for staff to be able to do their jobs (time, equipment etc.). • Provide training (formal or informal) to help staff prioritise, or information on how they can seek help if they have conflicting priorities.
Competency	<ul style="list-style-type: none"> • Devise a system to keep training records up to date to ensure employees are competent and comfortable in undertaking the core functions of their job. • Consider implementing personal development/training plans which require individuals to identify opportunities which can then be discussed with management. • Link training to performance monitoring arrangements to ensure it is effective and sufficient.
Working patterns	<ul style="list-style-type: none"> • Review working hours and shift work systems – have these been agreed with staff? • Consider changes to start and end times to help employees to cope with pressures external to the organisation (eg child care, poor commuting)

	<p>routes).</p> <ul style="list-style-type: none"> • Develop a system to notify employees of unplanned tight deadlines and any exceptional need to work long hours.
Physical environment and violence	<ul style="list-style-type: none"> • Ensure your risk assessments for physical hazards and risks are up to date. • Assess the risk of physical violence and verbal abuse. Take steps to deal with this in consultation with employees and others who can help (e.g. the police, charities). • Provide training to help staff deal with and defuse difficult situations (e.g. difficult phone calls, aggressive customers).

Do:

- allow regular breaks, especially when the work is complex or emotionally demanding;
- set realistic deadlines;
- design jobs that provide stimulation and opportunities for workers to use their skills to keep staff motivated and interested in their work;
- attend to the physical environment – take steps to reduce unwanted distraction, disturbance, noise levels, vibration, dust etc. where possible;
- assess the other inherent risks of the work, e.g. physical and verbal abuse, MSDs, and take steps to deal with them; these may be stressful and add to the problems;
- provide support to those less experienced or under pressure;
- if you're a team-leader – learn to say no to work if your team is already at full capacity.

Don't:

- ask people to do tasks that they are not capable of or trained to do;
- allocate more work to a person or team unless they have the resources to cope with it;
- allow workers to 'cope' by working longer hours, starting earlier, finishing later, taking work home or working through breaks and lunch;
- contact staff by phone or email (even when they have equipment provided by the employer) outside of working hours or when they are on leave or otherwise 'off duty'.

2. Control

How much say does the person have over the way they do their work?

The standard	Employees indicate that they are able to cope with the demands of their jobs.
What should be happening	<ul style="list-style-type: none"> • Where possible, employees have control over their pace of work, e.g. have a say over when breaks can be taken. • Employees are encouraged to use their skills and initiative to do their work. • Where possible, employees are encouraged to develop new skills to help them undertake new and challenging pieces of work. • The organisation encourages employees to develop their skills. • Employees are consulted over their work patterns.
Ways to achieve the standard	<ul style="list-style-type: none"> • Agree systems that enable staff to have a say over the way their work is organised and undertaken, e.g. through project meetings, one-to-ones, performance reviews. • Hold regular discussion forums during the planning stage of projects to talk about the anticipated output and methods of working. Provide opportunities for discussion and input. • Allocate responsibility to teams rather than individuals to take projects forward: <ul style="list-style-type: none"> ○ discuss and define teams at the start of a project; ○ agree objectives and roles; ○ agree timescales; ○ agree the provision of managerial support, e.g. through regular

	<p>progress meetings.</p> <ul style="list-style-type: none"> • Talk about the way decisions are made – is there scope for more involvement? • Talk about the skills people have and if they believe they are able to use these to good effect. How else would they like to use their skills?
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Do:

- allow staff some control over the pace of their work;
- allow and encourage staff to participate in decision-making, especially where it affects them, e.g. those about the way they work;
- negotiate shift-work schedules that do not impose on staff.

Don't:

- monitor employees' movements in detail (including breaks);
- monitor working style, unless necessary (e.g. where there are child-protection needs);
- ask staff to stay late without notice.

3. Support

Includes encouragement, sponsorship and resources provided by the organisation, line management and colleagues.

The standard	Employees indicate that they receive adequate information and support from their colleagues and superiors.
What should be happening	<ul style="list-style-type: none"> • The organisation has policies and procedures to adequately support employees. • Systems are in place to enable and encourage managers to support their staff. • Systems are in place to enable and encourage employees to support their colleagues. • Employees know what support is available and how and when to access it. • Employees know how to access the required resources to do their job. • Employees receive regular and constructive feedback.
Ways to achieve the standard	<ul style="list-style-type: none"> • Hold regular one-to-one and team meetings to talk about any emerging issues or pressures. • Include 'work-related stress/emerging pressures' as a standing item for staff meetings and/or performance reviews. • Seek examples of how people would like to, or have, received good support from managers or colleagues– can these be adopted across the unit? • Ask how employees would like to access managerial support, e.g. 'open door' policies or agreed times when managers are able to discuss emerging issues or pressures. • Introduce flexibility in work schedules (where possible) to enable staff to cope with domestic commitments. • Develop training arrangements and refresher sessions to ensure training and competencies are up to date and appropriate for the core functions of employees' jobs. • Talk about ways the organisation could provide support if someone is experiencing problems outside work. • Disseminate information on other areas of support (human resources department, occupational health, trained counsellors and charities). • Offer training in basic counselling skills/access to counsellors.

Do:

- ensure staff receive sufficient training to undertake the core functions of their job;
- provide constructive, supportive advice at annual appraisal;
- provide flexibility in work schedules, where possible;
- allow phased return to work after long-term sickness absence;
- hold regular liaison/team meetings;
- provide opportunities for career development;
- deal sensitively with staff experiencing problems outside work.

Don't:

- trivialise the problems of others;
- discriminate, or allow other to discriminate, against people for any reason.

4. Relationships

Includes promoting positive working to avoid conflict and dealing with unacceptable behaviour.

The standard	Employees indicate that they are not subjected to unacceptable behaviours, e.g. bullying at work.
What should be happening	<ul style="list-style-type: none"> • The organisation promotes positive behaviours at work to avoid conflict and ensure fairness. • Employees share information relevant to their work. • The organisation has agreed policies and procedures to prevent or resolve unacceptable behaviour. • Systems are in place to enable and encourage managers to deal with unacceptable behaviour. • Systems are in place to enable and encourage employees to report unacceptable behaviour
Ways to achieve the standard	<ul style="list-style-type: none"> • Develop a written policy for dealing with unacceptable behaviour and grievance and disciplinary procedures for reporting incidents <ul style="list-style-type: none"> – communicate these to staff. • Agree and implement a confidential system for people to report unacceptable behaviour. • Agree and implement procedures to prevent, or quickly resolve, conflict at work – communicate this to staff. • Encourage good communication and provide appropriate training to aid skill development (e.g. listening skills, confidence building). • Select or build teams which have the right blend of expertise and experience for new projects. • Discuss how individuals work together and how they can build positive relationships. • Identify ways to celebrate success (e.g. informal lunches)

Do:

- encourage good, honest, open communication at all levels in work teams;
- provide opportunities for social interactions among workers;
- provide support for staff who work in isolation;
- create a culture where colleagues trust and encourage each other;
- agree which behaviours are unacceptable and ensure people are aware of these and how to report incidents.

Don't:

- allow any bullying behavior or harassment.

5. Role

Do people understand their role within the organisation? Does the organisation ensure the person does not have conflicting roles?

The standard	Employees indicate that they understand their role and responsibilities.
What should be happening	<ul style="list-style-type: none">• The organisation ensures that, as far as possible, the different requirements it places upon employees are compatible.• The organisation provides information to enable employees to understand their role and responsibilities.• The organisation ensures that, as far as possible, the requirements it places upon employees are clear.• Systems are in place to enable employees to raise concerns about any uncertainties or conflicts they have in their role and responsibilities.
Ways to achieve the standard	<ul style="list-style-type: none">• Hold team meetings to enable members to clarify their role and discuss any role conflict.• Display team/department targets and objectives to help clarify unit and individual role.• Agree specific standards of performance for jobs and individual tasks and review periodically.• Introduce personal work plans which are aligned to the outputs of the unit.• Introduce or revise job descriptions to ensure the core functions and priorities are clear.• Hold regular one-to-one meetings to ensure individuals are clear about their role and know what is planned for the coming months.• Develop suitable induction arrangements for new staff – make sure all members of the team understand the role and responsibilities of the new recruit.

Do:

- provide a clear job description and define work objectives (eg through a personal work plan);
- define work structures clearly, so that all team members know who is doing what, and why;
- give all new members of staff a thorough induction to your organisation;
- avoid competing demands, such as situations where it is difficult to meet the needs of the business and the customer.

Don't:

- make changes to the scope of someone's job, or their responsibilities (e.g. at promotion) without making sure that the individual knows what is required of them, and accepts it.

6. Change

How is organisational change (large or small) managed and communicated?

The standard	Employees indicate that the organisation engages them frequently when undergoing an organisational change.
What should be happening	<ul style="list-style-type: none"> • The organisation provides employees with timely information to enable them to understand the reasons for proposed changes. • The organisation ensures adequate employee consultation on changes and provides opportunities for employees to influence proposals. • Employees are aware of the probable impact of any changes to their jobs. If necessary, employees are given training to support any changes in their jobs. • Employees are aware of timetables for changes. • Employees have access to relevant support during changes.
Ways to achieve the standard	<ul style="list-style-type: none"> • Ensure all staff are aware of why the change is happening – agree a system for doing this. • Define and explain the key steps of the change. • Ensure employee consultation and support is a key element of the programme. • Establish a system to communicate new developments quickly. • Agree methods of communication (e.g. meetings, notice boards, letters, email, feedback forums) and frequency (e.g. weekly, monthly). • Ensure staff are aware of the impact of the change on their jobs. • Provide a system to enable staff to comment and ask questions before, during and after the change, e.g. for staff who want to raise their concerns. • Review unit and individual work plans after the change to ensure objectives are clear and workloads are appropriately distributed.

Do:

- explain what the organisation wants to achieve and why it is essential that the change(s) takes place;
- consult staff at an early stage, and throughout the change process;
- involve staff in the planning process so that they understand how their work fits in;
- explain timescales and how changes will impact directly on them.

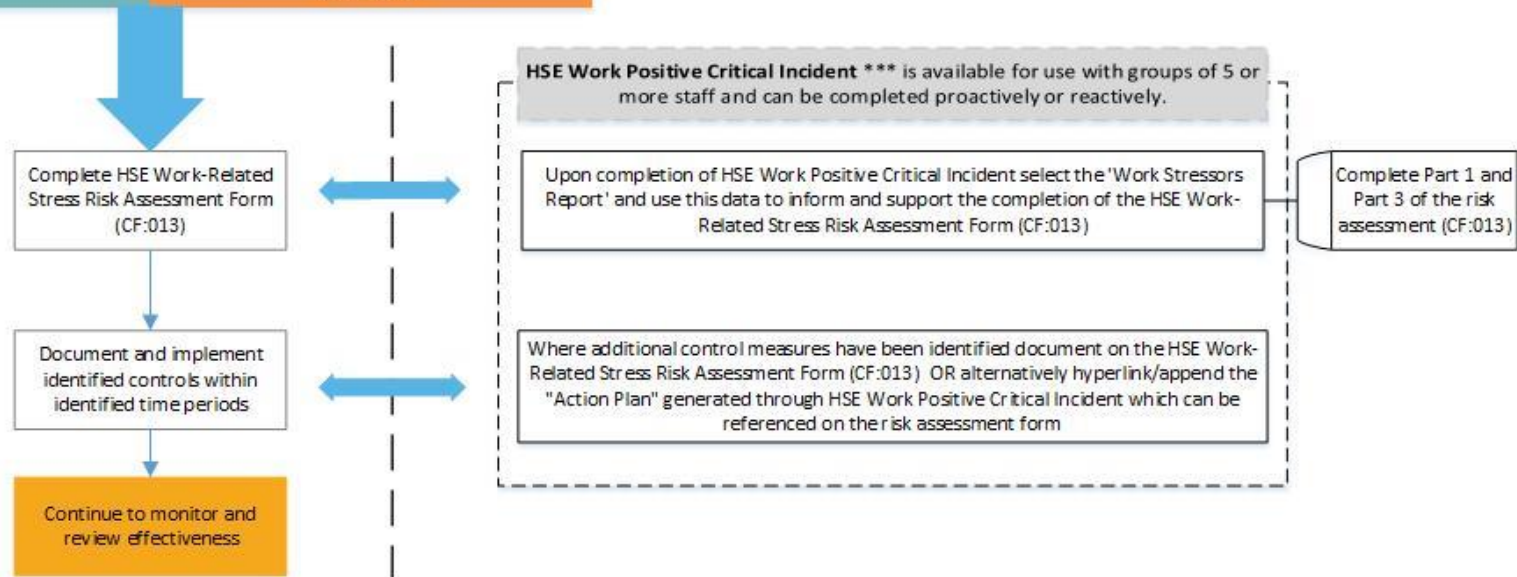
Don't:

- delay communicating new developments; underestimate the effects of minor changes.

Appendix 3 HSE Approach to Work-Related Stress Risk Assessment

Legislative Requirement*	
Completed on annual basis or reviewed when; (a) There has been significant change in the matters to which it relates (b) There is another reason to believe it is no longer valid	
Proactive (Level 1)	Reactive (Level 2)
Complete with Individual employee OR Collaboratively with group / team / service	Complete with individual employee** who is exhibiting signs of stress or seeking support OR collaboratively complete with group/ team / service where information suggests they may be experiencing workplace stress E.g. Staff reporting issues/complaints, receipt of medical certificate, observation by colleague/ manager, referral from Occupational Health, absenteeism

Note: The assistance of supports such as Occupational Health, EAP and HR may be required. Refer to Appendix VA and Appendix VIA for further information.

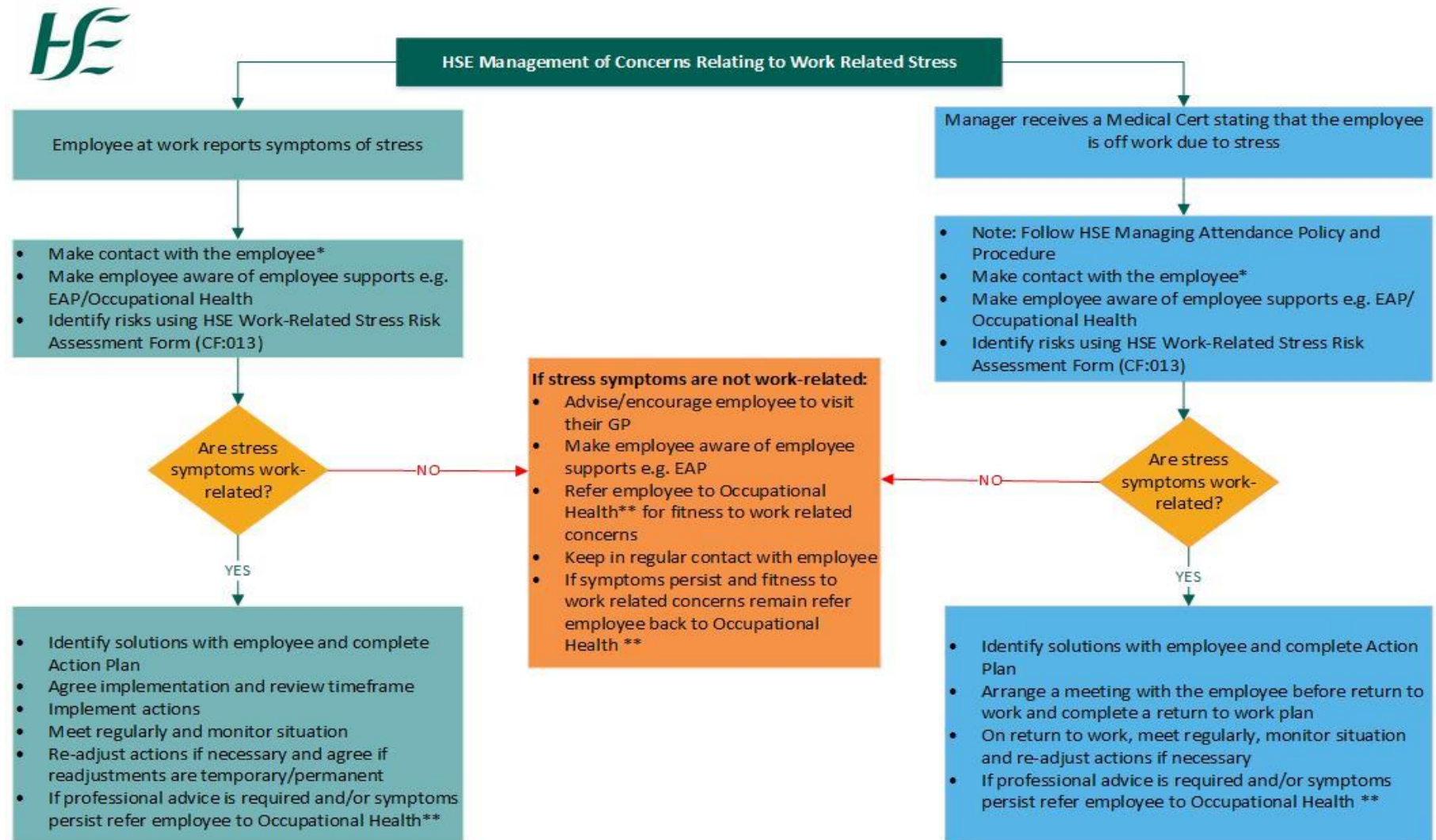


*Safety Health and Welfare at Work Act, 2005

** Refer to Appendix IIIA Signs and symptoms of Work-related Stress

***HSE Work Positive Critical Incident is an online, confidential risk management process for work related stress, psychological wellbeing, critical incidents, health promotion and safety. Further information is available <https://hseworkpositive.com>

Appendix 4 HSE Management of Concerns Relating to Work-Related Stress Flowchart



* If employee is attributing their work-related stress to an interpersonal difficulty with their line manager, the line manager must ensure that the HSE Work-Related Stress Risk Assessment Form (CF:013) is completed by an alternative manager, in consultation with HR. If required a referral to Occupational Health can be arranged.

**referrals to Occupational Health are for fitness to work assessments and/or advice regarding workplace adjustments.

Appendix 5 HSE HR Supports

HSE Supports available to Managers & Employees to pro-actively promote staff health & wellbeing

Human Resources Helpdesk: advice offered on HR Policy implementation; provision of individual employee support in conjunction with the local HR Offices and NERS.
www.hse.ie/eng/about/Who/hr
Tel: **1800 444 925** (8am to 5pm) Monday to Saturday
Email: ask.hr@hse.ie

Leadership, Learning and Talent Management (LLTM): provide a range of training and development opportunities for Managers and Employees via HSeLand (www.hseland.ie) including:

- Induction Training
- People Management
- Leadership Development
- Personal Effectiveness
- Retirement Planning
- Learning Talks Podcast

<https://www.hse.ie/eng/staff/leadership-education-development/leadership/>

National Health & Safety Function: support and advice offered on implementation of health and safety policies and support on OSH matters.
www.hse.ie/safetyandwellbeing
Tel: **1800 420 420** Monday to Friday 10:30-12:00 and 14:00 – 15.30

Workplace Health & Wellbeing Unit: provision of information and materials to support employees physically and emotionally throughout their working life.
<https://www.hse.ie/eng/about/who/healthwellbeing/>

HSE Supports available to Managers & Employees - when a problem arises in relation to work-related stress

Local Occupational Health Service: offer specialist advice to managers and staff; assess the employee and provide support in relation to their present functionality and to consider options and solutions going forward for the benefit of the employee and their line manager; referral pathways for both line managers and staff
<https://healthservice.hse.ie/staff/benefits-and-services/occupational-health/>

Employee Assistance Programme (EAP): provides confidential counselling support for employees experiencing stress as a result of work or personal issues; provide support and guidance to managers in responding to employee wellbeing issues, group support/facilitation sessions for staff who have experienced an event that has been emotionally/mentally upsetting and group/individual support sessions for staff who are preparing for an emotionally/mentally challenging event
<https://healthservice.hse.ie/staff/benefits-and-services/employee-assistance-programme-staff-counselling/>

Tel: **0818 327 327**

Human Resources Helpdesk: advice offered on HR Policy implementation; provision of individual employee support in conjunction with the local HR Offices and NERS.
www.hse.ie/eng/about/Who/hr
Tel: **1800 444 925** (8am to 5pm) Monday to Saturday Email: ask.hr@hse.ie

Rehabilitation: provision of workplace rehabilitation to support and enable employees to remain at or return to the workplace after illness or injury
<https://healthservice.hse.ie/staff/benefits-and-services/occupational-health/rehabilitation/>

Part B:

1.0 Initiation

1.1 Purpose

- 1.1.1 The purpose of this Policy is to raise awareness and understanding of work-related stress, and to support managers and employees on how to prevent, identify and manage work-related stress, with a focus on hazard identification and risk assessment.
- 1.1.2 This Policy is concerned with negative stress and the related risk factors.
- 1.1.3 Most forms of stress are caused by stressors that gradually push people beyond their capacity to cope comfortably. However, single events can sometimes set off intense and complex stress reactions. These are generally referred to as **critical incidents** and are outside the scope of this Policy. Refer to: [HSE Policy for Preventing and Managing Critical Incident Stress](#).

1.2 Policy Statement

- 1.2.1 It is the Policy of the Health Service Executive (HSE) to ensure as far as is reasonably practicable the protection of employees from the potential risks related to work-related stress. The HSE believes that our employees are our most important asset in the delivery of high quality health and social services. We are committed to protecting the safety, health and welfare of our employees and those who come in contact with our activities. In this regard, the HSE is focused on improving health and wellbeing and on prevention rather than simply on treatment. This aligns with the Department of Health Healthy Workplace Framework and the Health Services Healthy Ireland Implementation Plan 2023–2027 which aims to build capacity in support of a healthy workplace. (Health Service Executive, 2023).
- 1.2.2 The People Strategy 2019–2024 sets out the actions to support the implementation of Sláintecare and our HSE Corporate Priorities. People Strategy focuses in particular on the delivery of: Sláintecare Strategic Action 9: Build a sustainable, resilient workforce that is supported and enabled to deliver the Sláintecare vision and concurs that the health workforce is critical to ensuring ongoing service delivery across our health system and to delivering on this reform agenda. (Department of Health, 2018).
- 1.2.3 To support our commitment to create a healthy workplace, the HSE has adopted and enhanced the Health and Safety Authority/State Claims Agency Risk Management Framework titled "[Work Positive Critical Incident](#)". This framework takes a holistic approach to review psychosocial hazards and provides a confidential risk management process for **1. Work-related stress, 2. Psychological wellbeing, 3. Critical incident, 4. Health promotion and 5. Work-related safety**. The work-related stress component has been integrated into *Appendix 3 HSE Approach to Work-Related Stress Risk Assessment*.
- 1.2.4 In meeting our commitment to enable staff to maximise their potential wellbeing and engagement - Priority 2 - Employee Experience - Health Services People Strategy 2019–2024, this Policy sets out a framework for the prevention and management of work-related stress. This Policy is consistent with the guidance provided by the Health and Safety Authority (HSA).

- 1.2.5** The human and organisational cost of stress from ill-health, absences from work and lower productivity can be significantly reduced by working together to address both the causes and consequences of work-related stress. This starts with **promoting awareness** of situations that may cause work-related stress and finding ways to address these in a timely manner. It also involves **creating supportive workplaces** which facilitates staff who experience stress to be involved in remedying it through reporting it. Corporate Management, Senior Managers, Line Managers and Employees each have a responsibility to contribute to this and to take steps to deal with issues identified.
- 1.2.6** While stress may result from different aspects of life, the main focus of this Policy is on work-related stress. However, factors that are not work-related may also affect the employee in the workplace.
- 1.2.7** It should be noted that the workplace generally provides opportunities for developing and maintaining positive mental health and well-being.

1.3 Scope

- 1.3.1** This Policy applies to all HSE employees, fixed term employees and temporary employees. This Policy supersedes the HSE Policy on the Prevention and Management of Stress in the Workplace 2018.

Section 38 and Section 39 agencies are required to adopt or develop a Policy which is consistent with this Policy.

1.3.2 Out of Scope

The Policy does not include Critical Incident Stress Management (CISM).

1.4 Objectives

- 1.4.1** To review and update the HSE Policy for the Prevention and Management of Stress in the Workplace 2018 in line with any identified legislative changes and evidence based practices.
- 1.4.2** To outline clear roles and responsibilities of responsible persons.
- 1.4.3** To provide advice on the HSE work-related stress risk assessment process.
- 1.4.4** To provide guidance on risk reduction measures and evidence based practice which is aimed at minimising the risks associated with work-related stress.
- 1.4.5** To outline the HSE process for the management of concerns relating to work-related stress.
- 1.4.6** To provide guidance for managers and employees on relevant organisational supports.

1.5 Outcomes

- 1.5.1 A safer working environment for employees and others who fall under the scope of this Policy.
- 1.5.2 Clear roles and responsibilities of responsible persons are clearly outlined as part of this Policy.
- 1.5.3 There is clear guidance on the HSE approach to risk assessment and risk reduction measures which will minimise the risk associated with work-related stress.
- 1.5.4 The HSE process for the management of concerns relating to work-related stress is clearly outlined.
- 1.5.5 Managers and employees are provided with practical guidance on relevant organisational supports.

1.6 Policy Development Group

Members of the Policy Development Group can be found in Appendix 7 of this Policy. Conflict of Interest Declaration Forms were signed by members of the Policy Development Group and are retained on file by the National Health and Safety Function (NHSF), Policy Team.

1.7 Approval Governance Group

Members of the Approval Governance Group can be found in Appendix 8 of this Policy.

1.8 Supporting Evidence

1.8.1 The following legislation is pertinent and was consulted to during the development of this Policy:

- [Safety, Health and Welfare at Work Act, 2005](#)
- [Safety, Health and Welfare at Work \(General Application\) Regulations 2007](#)
- [Organisation of Working Time Act, 1997](#)
- [Employment Equality Acts, 1998 – 2015](#)
- [Equal Status Acts, 2000-2015](#)
- [Disability Act 2005](#)

1.8.2 Related PPPGs:

- [HSE Corporate Safety Statement](#)
- [HSE Enterprise Risk Management Policy and Procedures](#)
- [Guidance on Completing Occupational Safety and Health Risk Assessment GD:004](#)
- [HSE Policy for Preventing and Managing Critical Incident Stress](#)
- [HSE Dignity at Work Policy for the Public Health Service](#)
- [HSE Rehabilitation of Employees Back to Work After Illness or Injury Policy & Procedure](#)
- [HSE Managing Attendance Policy and Procedure](#)
- [HSE Long Term Absence Benefit Schemes Guidelines](#)

- [HSE Performance Achievement Policy and Guidance](#)
- [HSE Policy on Statutory Occupational Safety & Health Training](#)
- [Grievance and Disciplinary Procedures for the Health Service](#)
- [HSE Blended Working Policy for the Public Health Service](#)
- [HSE Trust in Care Policy](#)

1.9 Glossary of Terms/Definitions/Abbreviations

Refer to Appendix 9 of this Policy.

2.0 Development of Policy

2.1 Literature Review Questions

The objective of the literature review was to determine the legal requirements, establish current evidence and best practice in relation to the prevention and management of work-related stress.

a) Define work-related stress.

The term 'workplace stress' has evolved over the years, from stressors, stress factors to psychosocial factors, psychosocial hazards or psychosocial risks (ILO, 2016). Very often current literature and research studies refer to and use the terminology 'psychosocial risks' which is broader than workplace stress or work-related stress.

Work-related psychosocial risks concern aspects of the design and management of work and its social and organisational contexts that have the potential for causing psychological or physical harm (Leka, Giffiths & Cox as cited in Leka & Cox, 2008), while workplace stress concerns the physiological and psychological responses of workers who perceive that their work demands exceed their resources and/or abilities to cope with the work. (Leka, Griffiths and Cox, 2003).

The psychosocial work environment encompasses the organisation of work, organisational culture, and the attitudes, values, beliefs and practices that are commonly demonstrated in an institution/organisation, which affect the mental and physical well-being of employees (World Health Organisation, 2010). IOSH define psychosocial hazards or factors as aspects in the design or management of work that increase the risk of an adverse impact leading to work-related stress. The International Labour Organisation (ILO) define psychosocial factors (hazards) as "interactions between and among work environment, job content, organisational conditions and workers' capacities, needs, culture, personal extra-job considerations that may, through perceptions and experience, influence health, work performance and job satisfaction". Therefore it can be concluded that work-related stress is the development of a stress response that the worker believes is as a consequence of their work and what they have been exposed to at work. And work-related stress can occur as a consequence when exposed to the broader psychosocial hazards in the workplace.

The World Health Organisation (Burton et. al., 2010) describes work-related stress as the response people may have when presented with work demands and pressures that are not matched to their knowledge and abilities and which challenge their ability to cope. The UK Health and Safety Executive (HSE) defines work-related stress as 'the adverse reaction people have to excessive pressures or other types of demand placed on them at work'. The Health and Safety Authority, Ireland, define work-related stress as stress caused or made worse by work. It simply refers to when a person perceives the work environment in such a way that his or her reaction involves feelings of an inability to cope (HSA, 2022) and may be caused by perceived/real pressures/deadlines/ threats/anxieties within the working environment.

b) Identify if work-related stress is an occupational hazard within health and social care settings.

In November 2018, the Economic and Social Research Institute (ESRI) reported that in Irish health sector workers are exposed to the greatest number of job demands compared to any other sector, with 18 % of health sector workers experiencing job stress. Since then the covid-19 pandemic arrived precipitating extraordinary disruption to health systems and organisations globally (Gillen et. al. 2021). Many healthcare sector organisations underwent huge organisational change which placed immense demands on Healthcare Workers (HCWs).

In Ireland the HSE's need for enhanced infection control precautions and the use of Personal Protective Equipment (PPE) has resulted in delays in care delivery, as have pre-pandemic waiting lists (which were considerable in many services). In the acute phase of the pandemic these waiting lists increased by the suppression of demand due to service users being reluctant to present to health services for fear of contracting the virus. Healthcare services and HCWs had to adapt rapidly. Their responses to the unprecedented challenges of the COVID-19 pandemic have demonstrated a very high level of staff commitment to maintaining services and to providing quality care while protecting patients; a rapid and significant level of innovation in developing new models of service overnight; and a major whole system response to ensure the services could deal with the demands placed on them by the pandemic and to preserve as much of normal health care delivery to our patients as possible (Crowley and Hughes, 2021).

Following on from this acute phase and as time has moved on it is now widely understood that the response delivered by HCWs not just in Ireland but across the globe has come with some consequences, especially in relation to mental health and wellbeing of HCWs including workplace conditions, job demands and resources that are aggravating HCWs wellbeing and mental health (Vanhaecht et. al. 2020). In a report setting out EU recommendations by the NextGen EU healthcare group (2019-2020) nearly 80% of European managers are concerned about problems with stress in their establishment however, less than 30% of European organisations have procedures in place to deal with psychosocial risks. Work-related stress is imposing additional expenditure on the healthcare and health insurance systems of the EU member states, having a detrimental impact not only on the public economy but also on the employment estimates (EU, 2020).

Exposure to workplace stress has been linked to a myriad of work-related wellbeing (inclusive of physical, psychological, behavioural and attitudinal) outcomes including, for example, poor mental health, increased health impairing behaviours (e.g. Increased smoking, alcohol consumption) poor physical health (e.g. cardiovascular disease) reduced job satisfaction, intention to quit and diminished organisational commitment (Khan et al., 2018). Researchers and practitioners agree that the nature of work pre-covid was already changing dramatically due to globalisation, migration, technology advances and the emergence of knowledge-based economy (Leka et al., 2011). It has also often been acknowledged that working as a clinician in the healthcare sector is, by its very nature, a 'stressful' profession, multiple and conflicting demands, confronted by such stark suffering, grief and death as few other people do (Cox and Griffiths as cited Cox, Giffiths & Leka et. al., 2008). With the continuous high work demands, and low levels of resources made available in healthcare, it is predicted that over time, HCWs are likely to deplete individual engagement at work and potentially reduce psychosocial wellbeing (Meyer et al., 2021) which has the potential to impact negatively on the delivery of care and patient experience.

As work-related stress continues to emerge as a major challenge for employers and employees across the European healthcare sector (EU NextGen, 2020) and healthcare jobs continue to become increasingly more complex and demanding (Daniels et al., 2022) and healthcare organisations strive to remain competitive, innovative, and sustainable in an often hostile and fast-changing market (Maslach and Leiter, 2016), the need for action to protect HCWs from work-related stress e.g., change to working methods and workload, job design and work demand, (Pappa et al., 2020), as well as the increased ethical burden in health care professions in the healthcare sector, it has never been more important than now.

c) Identify the potential health outcomes for healthcare workers exposed to work-related stress.

Studies undertaken pre and post pandemic have concluded that HCWs exposure to work-related stress does impact negatively on their health and wellbeing with increases in physical, mental and psychological ill-health. Falatah and Alhalal (2022) concluded that exposure to high levels of work-related stress had significant negative direct effects on job-related affective well-being and positive effects on compassion fatigue among nurses while Pappa et al., (2020) found that exposure to high levels of stress are not only associated with potential development of mental illness e.g., depression, anxiety and sleep disorders, but also linked to a series of other chronic diseases e.g., diabetes, cardiovascular and musculoskeletal disease.

During the covid-19 pandemic it was identified that older nurses experienced a combination of stress symptoms as a result of work with many having additional caring responsibilities for older relatives outside work, their age been an additional risk factor for contracting the virus adding to their stress symptoms (Léime and O'Neill, 2021) and HCWs working in the Nursing Home sector reported significant levels of distress during covid-19 pandemic (Brady et. a. 2021) including high levels of post-traumatic stress, mood disturbance and moral injury. Other studies that focused on the effects of the pandemic on HCWs while working in a high stressed work environment found higher levels of depression and anxiety among HCWs in comparison with the normal population before the pandemic (Morawa et al., 2021, Bertolt et al. 2021) with the presence of depressive symptoms a significant predictor in insomnia (Pappa et al., 2021) and higher levels of depression reported among female nurses working in the front-line (Liu et al., 2020, Ali et. al., 2020). Brady et. al. (2021).

Significant work-related pressure and frequent somatic symptoms including stress symptoms (Barello, Palamenghi, Graffigna 2020) with high levels of psychological distress was found to be experienced by nurses and physicians (Hamama et al., 2021). Protective measures were brought into the healthcare sector, similar to other sectors i.e. social distancing during covid-19. The combination of both fear and isolation made it hard for some HCWs to maintain the humanisation in the delivery of health care i.e. virtual consultations, virtual meetings (Fernández-Castillo et al., 2021) with many reporting that the use of social distancing measures increasing their stress symptoms and making the job more stressful. Pappa et. al., (2021) also found that HCWs were more susceptible to potentially harmful lifestyle activities, such as smoking, alcohol consumption and overeating as a way to distress, relax and/or alleviate their stress symptoms. Burnout is often associated when exposed to work-related stress over a prolonged period of time with Møller et al., 2022 observing high levels of burnout among surgeons while conducting a cross-section study of burnout across Danish hospitals.

In a study of ambulance staff in the north of England, more than 50% were experiencing varying levels of burnout, including exhaustion, depersonalization and fatigue. Causes of stress were complex: themes attributed were a perceived lack of management support, the public's misuse of the ambulance service, involuntary overtime and a poor work-life balance (Beldon et al., 2021).

d) Using available data, identify trends and patterns relating to work-related stress within Irish health and social care setting.

Currently there is no requirement to report work-related stress on the National Incident Management System (NIMS), hence data on trends and patterns was not available. Similarly, published statistics were not available from the Health and Safety Authority (HSA). Stress is not reportable to the HSA. There is no duty on employers to report absences to the HSA due to stress (HSA, 2022).

The review of literature highlights a lack of literature that captures all disciplines of staff in the health sector, it was established the literature predominantly focused on the discipline of doctors. From the published research accessed, the following data was identified.

A study by the Economic and Social Research Institute (ESRI) acknowledged stress in the workplace is an issue of growing concern, particularly in the health sector. The following findings were noted in Ireland in 2015:

- Employees in the health sector (18%) experience the highest levels of job stress.
- Health sector workers have higher-than-average exposure to four of the five work demands: emotional, physical, bullying/harassment and effort-reward imbalance. Work demands are strongly associated with higher levels of job stress (Russell et al. 2018).

Employees working in healthcare due to the nature of their work can be exposed to work demands that can be identified as emotionally demanding work. Emotional demands can be identified as employees dealing with angry clients/customers or having to hide emotions while at work and those employees experiencing high levels of emotional demands are 21 times more likely to experience job stress (Russell et al. 2018).

Data published in the Health Service Executive (HSE) Staff Survey Report 2021 in Ireland found half of respondents feel impacted by work-related stress and believe it has affected their work. The following findings were noted:

- 74% of respondents were aware of facilities that provide support to staff experiencing stress in work.
- 55% of respondents noted the level of stress sometimes affects my work.
- 52% of respondents noted their line manager takes a positive interest in their health and wellbeing.
- 48% of respondents noted that the source of their stress is work-related.

The prevalence of stress amongst doctors was recognised in “A Strategy for Doctors' Health and Wellbeing 2018-2021”. In a 2014 National Study of Wellbeing of Hospital Doctors in Ireland undertaken by the Royal College of Physicians in Ireland, 82% reported significant workplace stress, with one in three doctors reporting burnout. In a study by McNicholas et al. 2020 of Consultants in Child and Adolescent Mental Health Services (CAMHS) in Ireland in 2017, respondents reported moderate degrees of Burnout or higher 59.6%. There is an association between occupational stress, job burnout and employee health. According to the World Health Organisation, burnout is a syndrome resulting from workplace stress that has not been successfully managed. It's characterized by three dimensions: feelings of energy depletion or exhaustion, increased mental distance from one's job or feelings of negativism or cynicism related to one's job, and reduced professional efficacy (World Health Organisation, 2019).

e) Identify legislative requirements and best practice in relation to the identification, prevention and management of work-related stress.

1. Legislative Requirements

Under Section 8 of this [Safety, Health and Welfare at Work Act 2005](#), employers have a duty to take all reasonably practicable steps to ensure the health and welfare of their employees, including protecting employees from hazards which could lead to mental or physical ill-health arising from work-related stress. There are no specific regulations governing work-related stress, however Section 19 of the Safety, Health and Welfare at Work Act 2005, requires employers to conduct a risk assessment of all known hazards including psychosocial hazards, which might lead to work-related stress.

2. Best Practice

The Health and Safety Authority (HSA) publication, '[Work Related Stress – An Employers Guide](#)' recommends that organisations identify the cause of work-related stress, by conducting a risk assessment or audit, and then proceed to tailor stress management interventions to meet the needs highlighted by that risk management approach. A similar approach to the prevention and management of work-related stress is supported by the European Agency for Safety and Health at Work (EU-OSHA) and the European Foundation for the Improvement of Living and Working Conditions (Eurofound) Report 2014; [Psychosocial risks in Europe: Prevalence and Strategies for Prevention](#). The involvement of top management combined with employee participation is essential for dealing with psychosocial risks effectively (Eurofound and EU-OSHA, 2014).

The HSA has adopted the UK Health and Safety Executive's (HSE UK) Management Standards, which identify the six key areas of work (demands, control, support, relationships, role and change) that can lead to work-related stress, if not properly managed (HSA, 2022). A number of studies (Kerr et al. 2009, Edwards et al. 2012 and Brookes et al. 2013) have investigated the psychometric properties of the (HSE UK) Management Standards approach and have found empirical evidence to support the use of the (HSE UK) Management Standards approach in tackling work-related stress.

The hierarchy of controls emphasises the importance of first eliminating or avoiding risks (primary-level prevention); and, if that is not possible, protective measures should be taken. In view of that, the HSA publication, '[Work-Related Stress – An Employers Guide](#)' identifies stress management interventions, which can be categorised as primary, secondary, and tertiary. Each category targets different stages of work-related stress: causes, reactions and consequences.

Existing research indicates primary interventions are viewed as most effective, followed by secondary interventions, which in turn are more effective than tertiary interventions. A mixed approach, including both primary and secondary forms of intervention, is the most effective in generating improvements at both the individual and organisational levels. Interventions that took a more systems approach, including both individual and organisation levels, were more effective. At the organisational level, stress related problems identified through secondary or tertiary-level programs should feedback to primary prevention efforts to reduce job stressors (LaMontagne et al. 2007).

The existing literature highlights the success of organisational-level interventions appears to depend on the quality of implementation processes and employee participation (Holman et al. 2018).

The advice from the HSA states that employers should approach stress management proactively by creating a culture that provides support for employees, focusing on prevention and early intervention and not just responding when a problem arises.

2.2 Literature Search Strategy

2.2.1 A literature review was undertaken by the Policy Development Group. The search terms used included 'work-related stress', 'work-related stress hazards', 'work-related stress risks', 'work-related stress and healthcare', 'management of work-related stress' and 'stress management interventions' Search dates were confined from 2015 to 2023.

2.2.2 Websites accessed included the following: Health and Safety Authority (HSA), Department of Health Ireland, Health and Safety Executive (HSE UK), European Agency for Safety and Health at Work (EU-OSHA), Institution of Occupational Safety and Health (IOSH) and World Health Organisation.

2.2.3 The literature accessed was predominately legislation, articles, commentaries and health organisation policies.

2.3 Method of appraising evidence

The process outlined in this document is based on a review of the relevant legislation, codes of practice and relevant publications as documented in Section 1.8 and Section 8.0.

2.4 Recommendations

2.4.1 The Policy Development Group reviewed the results from the literature review in relation to Prevention and Management of Work-Related Stress. The evidence supported the objectives as outlined in Section 1.4.

2.4.2 The key recommendations include:

1. A risk management strategy is adopted as the most effective approach in eliminating and minimising the risks associated with work-related stress.
2. Stress management interventions namely primary, secondary and tertiary are implemented to address the stages of prevention and their associated targets of change.

These recommendations have informed the revision of this Policy as set out in Part A of this document.

2.5 Resources necessary to implement the PPPG Recommendations

- 2.5.1** The Policy Development Group reviewed the results from the literature review in relation to Prevention and Management of Work-Related Stress. The evidence supported the objectives as outlined in Section 1.4.
- 2.5.2** This Policy revision requires local senior managers and line managers to review existing practices and procedures to ensure they are aligned with the requirements as set out in this Policy.

3.0 Governance and Approval

Formal governance for this Policy is provided by the National Director HR (Refer to Appendix 8). The PPPG Checklist for developing Non-Clinical PPPGs was signed prior to approval and is retained on file by the NHSF, Policy Team.

4.0 Communication and Dissemination

The Policy will be disseminated by the National Director HR for immediate implementation by relevant Services, in line with the agreed HSE protocol and is available on:
<https://healthservice.hse.ie/staff/health-and-safety/work-related-stress/>

5.0 Implementation

5.1 Managers (Responsible Persons)

Managers (Responsible Persons) are responsible for implementation of this Policy to include the identification of responsible person(s), specifying the necessary actions and timeframes for implementation within their areas of responsibility. (Refer to: *Part A, Section 8.0 for detailed roles and responsibilities and Appendix 10 Implementation Plan*).

5.2 Education & Training

Refer to Part A, Section 6.0 of this Policy.

6.0 Monitoring, Audit and Evaluation

- 6.1** Managers are required to monitor and audit the implementation of this Policy within their area of responsibility using the Audit Checklist in Appendix 11 and maintain evidence of same.
- 6.2** Implementation of this Policy shall be audited periodically at national level and by the National Health and Safety Function.

7.0 Revision/Update

This Policy shall be reviewed at national level every three years or earlier if circumstances require it.

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Appendix 7 Membership of the Policy Development Group

Membership of the Policy Development Group on the HSE Policy on the Prevention and Management of Work-Related Stress	
Name	Role and Position
Adrian Ahern,	Person in Charge/Director of Nursing at Leopardstown Park Hospital
Ciarán McCullagh	National Quality and Patient Safety Manager, National Ambulance Service
Nodlaig Carroll	Organisational Health Lead, Organisational Health Division, HSE Workplace Health and Wellbeing Unit National HR Division
Lorraine Tuohill Cooke	Health & Safety Officer, Quality and Patient Safety Department, Community Healthcare West
Aoife Rice	Human Resources, National Acute Operations
Margaret Sorohan	National Human Resources Lead, Mental Health, Community Operations
Mary O'Donnell	National Employee Assistance Officer (EAP)
Dr Grainne Mc Nally	Specialist Occupational Health Physician of the Workplace Health and Wellbeing Unit
Brid Cooney	National Health and Safety Advisor, Policy Team
Patrice Cahill	National Health and Safety Advisor, Policy Team
Martina Reilly	Administrative Support, National Health and Safety, Policy Team
Chair: Margo Leddy	National Health and Safety Manager, Policy Team

Appendix 8 Membership of the Approval Governance Group

Membership of Approval Governance Group	
Name	Role and position
AnnMarie Hoey	National Director HR
Katrina Dempsey	Head of National Health and Safety Function

Sign-off by Chair of Approval Governance Group

Name: AnneMarie Hoey	
Title: National Director HR	
Signature: (e-signature accepted)	

Appendix 9 Glossary of Terms/Definitions/Abbreviations

Stress	<p>Stress is a negative reaction people have to aspects of their environment as they perceive it. Stress is therefore a response to a stimulus and involves a sense of an inability to cope.</p> <p>Health and Safety Authority (2022) Work Related Stress. A Guide for Employers</p>
Work-related (WRS) or Occupational Stress	<p>WRS is stress caused or made worse by work. It simply refers to when a person perceives the work environment in such a way that his or her reaction involves feelings of an inability to cope. It may be caused by perceived/real pressures/deadlines/threats/anxieties within the working environment’.</p> <p>Health and Safety Authority (2022) Work Related Stress. A Guide for Employers</p>
Stress Management	<p>Stress management is defined as the tools, strategies, or techniques that reduce stress and reduce the negative impacts stress has on your mental or physical well-being.</p> <p>Davis, 2023</p>
Stress Management Interventions	<p>Stress management interventions refer to a class of activities that are used by organisations to improve employee well-being and reduce stress, principally by either addressing the causes of stress or by reducing the impact of stress on an individual.</p> <p>Holman et al. 2018</p>
HSE Work Positive Critical Incident CI	<p>Risk management process for measuring employee wellbeing and critical incident exposure, and helps prevent work-related stress. For further information: https://hseworkpositive.com/</p>
Competent Person	<p>A person is deemed to be a competent person where, having regard to the task he or she is required to perform and taking account of the size or hazards (or both of them) of the undertaking or establishment in which he or she undertakes work, the person possesses sufficient training, experience and knowledge appropriate to the nature of the work to be undertaken.</p> <p>Safety, Health & Welfare at Work Act, 2005</p>
Critical Incident	<p>A critical (or traumatic) incident is any event outside the usual realm of human experience that is markedly distressing (e.g. evokes reactions of intense fear, helplessness, horror, etc.) Such critical incidents usually involve the perceived threat to one's physical integrity or the physical integrity of someone else. Most importantly, critical incidents are determined by how they undermine a person's sense of safety, security and competency in the world. (CISM Network Ireland, 2023)</p> <p>Most people would be severely shaken by a critical incident, but are</p>

	<p>likely to recover from its impact soon after. However, for some people, the full impact of a critical incident only becomes apparent after several weeks, when serious symptoms emerge. After effects may include disturbing flashbacks, sleep difficulties, nightmares, memory loss, depression, a sense of numbness, and other symptoms that are also associated with stress. This is referred to as post-traumatic stress. If it occurs within one month of the critical incident, it is called acute stress.</p> <p>HSE Policy for the Prevention and Management of Critical Incident Stress</p>
Critical Incident Stress Management (CISM)	<p>Critical Incident Stress Management is an intervention protocol developed specifically for dealing with traumatic events. It is a formal, highly structured and professionally recognised process for helping those involved in a critical incident to share their experiences, vent emotions, learn about stress reactions and symptoms and given referral for further help if required. It is not psychotherapy. It is a confidential, voluntary and educative process, sometimes called 'psychological first aid'.</p> <p>CISM Network Ireland, 2023</p>
Employer	<p>In relation to an employee:</p> <ol style="list-style-type: none"> a) Means the person or persons with whom the employee has entered into or for whom the employee works under (or, where the employment has ceased, entered into or worked under) a contract of employment b) Includes a person (other than an employee of that person) under whose control and direction an employee works, and includes where appropriate the successor of the employer or an associated employer of the employer <p>Safety, Health & Welfare at Work Act, 2005</p>
Employee	<p>Means any person who has entered into or works under (or, where the employment has ceased, entered into or worked under) a contract of employment and includes fixed-term employee and a temporary employee and references, in relation to an employer, to an employee shall be construed as references to an employee employed by that employer</p> <p>Safety, Health & Welfare at Work Act, 2005</p>
Fixed-Term Employee	<p>An employee whose employment is governed by a contract of employment for a fixed-term or for a specified purpose, being a purpose of a kind that the duration of the contract was limited but was, at the time of its making, incapable of precise ascertainment.</p> <p>Whilst these employees are commonly known as “Temporary”, care should be taken not to confuse this term with “Temporary Employee” (Para. 4.12 refers) as given in the Safety, Health & Welfare at Work Act, 2005 and used throughout this policy document.</p>

	HSE Policy on the Management of Health and Safety in Contract Work: Co- operation and Coordination with Contractors and Others
Line Manager	In relation to an employee: The person who directs the work of an employee
Health Surveillance	Health surveillance means the periodic review, for the purpose of protecting health and preventing occupationally related disease, of the health of employees, so that any adverse variations in their health that may be related to working conditions are identified as early as possible. Safety, Health & Welfare at Work Act, 2005
Intoxicant	Intoxicant includes alcohol and drugs and any combination of drugs or of drugs and alcohol. Safety, Health & Welfare at Work Act, 2005
Reasonably Practicable	In relation to the duties of an employer, means that an employer has exercised all due care by putting in place the necessary protective and preventive measures, having identified the hazards and assessed the risks to safety and health likely to result in accidents or injury to health at the place of work concerned and where the putting in place of any further measures is grossly disproportionate having regard to the unusual, unforeseeable and exceptional nature of any circumstance or occurrence that may result in an accident at work or injury to health at that place of work. (Safety Health and Welfare at Work Act, 2005)
Rehabilitation Plan	A set process developed for an employee to facilitate them to stay or return to work. HSE Rehabilitation of Employees Back to Work After Illness or Injury Policy & Procedure
Safety Management System	The part of the overall management system that includes the organisational structure, planning activities, responsibilities, practices, procedures and resources for developing, implementing, achieving, reviewing and maintaining the Occupational Safety and Health Policy. Health and Safety Authority, 2006 Workplace Safety and Health Management. Practical Guidelines on the Implementation and Maintenance of an Occupational Safety, Health and Welfare Management System
Safety Representative	“Safety representative” means a person selected and appointed under section 25 as a safety representative. Safety, Health & Welfare at Work Act, 2005
Performance Achievement	It is a forward-looking process that empowers staff to develop their performance in their current role during the twelve-month period of the Performance Achievement’s annual cycle. Performance Achievement is about your current role and what

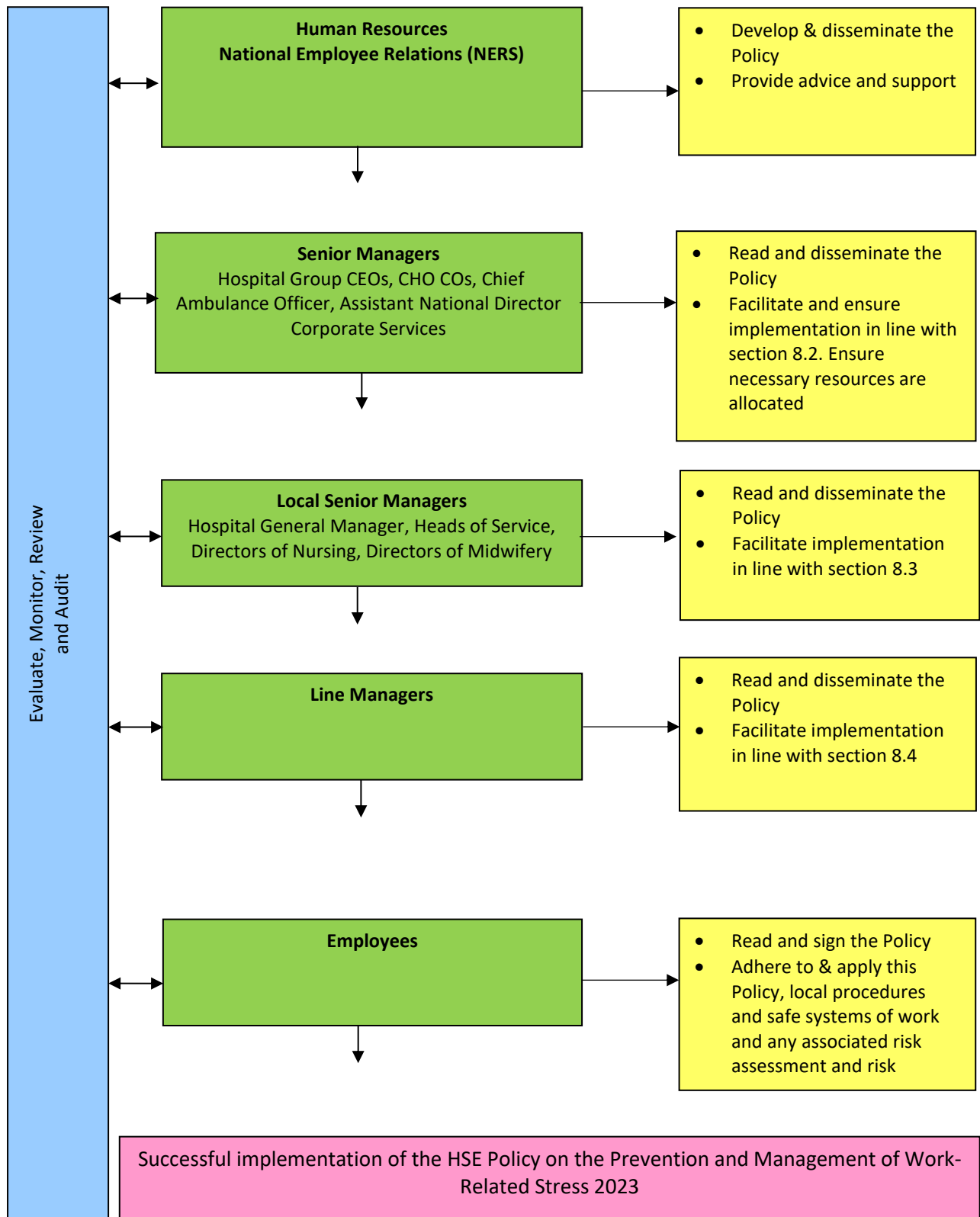
	<p>you and your manager can do together to improve the service we each provide to our in line with the organisation and population needs.</p> <p>HSE Performance Achievement Policy and Guidance</p>
Psychosocial hazards or factors	<p>Aspects in the design or management of work that increase the risk of an adverse impact leading to work-related stress.</p> <p>IOSH, 2018</p>
Place of work	<p>Place of work includes any, or any part of any, place (whether or not within or forming part of a building or structure), land or other location at, in, upon or near which, work is carried on whether occasionally or otherwise</p> <p>Safety, Health & Welfare at Work Act, 2005</p>
Responsible Person	<p>In the context of Section 8.0 refers to those who have responsibility for the management of resources and the management and supervision of employees. For example, Line Managers, Ward, Department and Service Managers, Senior Clinicians and Clinical Directors are considered to be “Responsible Persons”.</p>
Temporary Employee	<p>An employee who is assigned by a Temporary Employment Business to work for and under the control of another undertaking availing of the employee’s services (SHWW Act 2005). These employees are generally known as Agency Staff.</p> <p>HSE Policy on the Management of Health and Safety in Contract Work: Co-operation and Coordination with Contractors and Others</p>
Training Needs Assessment (TNA)	<p>A training needs assessment is the process of gathering, assessing and analysing information to determine the training needs of an employee. It is underpinned by the Risk Assessment process.</p> <p>Policy on Statutory Occupational Safety and Health Training 2023</p>

Abbreviations

Term	Definition
CEO	Chief Executive Officer
CISM	Critical Incident Stress Management
CHO CO	Community Healthcare Organisation Chief Officer
DSE	Display Screen Equipment
EAP	Employee Assistance Programme
ERAS	Employee Relations Advisory Services
HR	Human Resources
HSA	Health and Safety Authority
HSE UK	Health and Safety Executive UK
HSE	Health Service Executive
IOSH	Institution of Occupational Safety and Health
NERS	National Employee Relations
NHSF	National Health and Safety Function
NIMS	National Incident Management System
OHD	Occupational Health Department
OSH	Occupational Safety and Health
PPE	Personal Protective Equipment
PPPG	Policies, Procedures, Protocols and Guidelines
SHWW Act	Safety, Health and Welfare at Work Act, 2005
TNA	Training Needs Assessment
WRS	Work-related Stress

Appendix 10 Implementation Plan

Implementation of this Policy forms an integral part of the Safety Management System and is underpinned by effective consultation, communication, supervision, monitoring, audit and review. The following flowchart illustrates the day to day implementation steps:



Appendix 11 Audit Checklist for the implementation of the HSE Policy on the Prevention and Management of Work-Related Stress 2023

Audit Checklist Questions		Policy Clause	Yes	No	N/A	Action required	Action Owner	Time frame
1.	Is there a system in place for the appropriate circulation/communication of this Policy to all employees?	8.3.1						
2.	Does each relevant department / unit have access to this Policy?	8.4.1						
3.	Are roles and responsibilities communicated to all identified responsible persons?	8.0						
4.	Are HSE and Non-HSE Support Services communicated to employees?	5.1.1 8.4.10 9.0 Appendix 5						
5.	Have work-related stress risk assessments been carried out in consultation with employees in line with Figure 2 Risk Assessment Process and Appendix 3 HSE Approach to Work-Related Stress Risk Assessment?	2.0 8.4.2 Appendix 3						
6.	Have identified control measures been implemented?	2.0 5.0 8.4.2						
7.	Have control measures introduced been monitored and evaluated to determine their effectiveness?	3.0 8.4.4						
8.	Where it is not possible to complete all actions identified through the risk assessment process, are actions communicated in line with local agreed routes and processes for the communication, notification and escalation of risk.	4.0 8.4.3						
9.	Have employees received the relevant information, instruction and training as identified through the training needs assessment?	6.0						
10.	Are employees aware to report to their line manager promptly any concerns they may have about their well-being and work situation potentially leading to work-related stress?	8.4.8 Appendix 4						
11.	Is there a system in place to monitor compliance with this Policy?	8.3.9 8.4.13						