# Electricity Industry Occupational Health Advisory Group



**Guidance Note 2.1** 

# **Stress**

The Occupational Health Advisory Group for the Electricity Industry (OHAG) is an independent body of senior occupational physicians. They all have a professional role to provide advice to individual companies in the electricity industry and they meet together three times a year to discuss matters of common interest and to promote good practice in occupational health across the industry. The main route for doing this is by the preparation of guidance notes on topics of interest to the industry. The remit of OHAG and its guidance covers all aspect of the industry from generation, through transmission and distribution to retail and supply.

Until now the promulgation of this OHAG guidance has largely been by means of paper copies of the documents circulating within individual companies in the electricity industry. OHAG recognises that there is a need to make these papers more widely available and is grateful for the support provided by the Energy Networks Association (ENA) in hosting these documents on their website, and the links to them from the websites of the Association of Electricity Producers (AEP) and the Energy Retail Association (ERA).

The guidance notes will be of interest to managers, employees and occupational health professionals within the industry. They give general advice which has to be interpreted in the light of local circumstances. Health professionals using the guidance, retain an individual responsibility to act in accordance with appropriate professional standards and ethics. This guidance is offered in good faith and neither the individual members of OHAG, the companies they support, the ENA, AEP or the ERA can accept any liability for actions taken as a result of using the guidance.



Page 2



Guidance Note: 2.1 June 2008

# **Stress**

#### 1. Introduction

Stress *per se* is not an illness but it can be manifest as mental or physical ill health. No definition is perfect but perhaps it can best be described as how we feel when there is an imbalance between the perceived pressures upon us and our perceived ability to cope. This definition has the advantage that it allows for underwork being a cause of stress.

There are many pressures from work or home life which have the potential to cause stress and some of these are listed later in this paper. Whether a particular pressure leads to stress will vary from one person to another and depends on two key factors – individual personality and acquired coping skills. We all need pressures to work well and, up to a point, the more pressure that is applied, the better we perform. However, we all have a point (which varies from person to person) beyond which we cannot cope and stress ensues.

#### 2. Aims of this Document

The aims of this document:

 To explain what is meant by stress and describe the preventive measures to reduce its impact on employees and the organisation including the need for risk assessment as required by legislation.

# 3. Relevant Legislation

- Management of Health and Safety at Work Regulations 1995
- Disability Discrimination Act 1995

#### 4. Relevant Guidance

- Managing the Causes of Work-related Stress HSE Guidance HSG 218
- HSE website: www.hse.gov.uk/stress



Page 3



Guidance Note: 2.1 June 2008

#### 5. Stress and work

# a. The impact upon an organisation

Fortunately, only a few employees become seriously ill with mental or physical ill health. However, beneath this small group are many more who take multiple short spells of absence and an even greater number who are not performing optimally. It is estimated that productivity in an individual experiencing stress declines by between 30 and 50%. HSE say they believe that 20% of the nation's workforce is suffering from serious work related stress and that the problem causes, or contributes to, 60% of all sickness absence.

Companies also face the risk of legal action from staff who have developed mental ill health as a manifestation of occupational stress and then decide to sue for breach of duty of care. A successful personal injury claim in this area can cost £500K and, clearly, can harm a company's image. There is also the cost of ill health retirement if the illness is thought to be long term and no suitable alternative work can be found.

#### b. The need to address stress

In addition to addressing stress for business reasons, there is also a requirement under the Management of Health and Safety at Work Regulations for the employer to carry out risk assessment and to implement control measures to reduce any risk so far as is reasonably practicable. Risk assessment in this area is difficult because individuals vary in their response to particular pressures. Thus, it is necessary to consider not only the magnitude of any potential stressors, but also whether these are causing harm (stress). Companies may wish to consider implementing a stress policy which would include references to risk assessment and other managerial responsibilities.

#### c. Risk assessment

The Health and Safety Executive has issued a number of useful publications which give guidance for managers. HSE have drawn up some management standards covering six of the key potential stressors in the workplace.

- Demands, eg, workload, time deadlines, email
- · Lack of control, eg, inadequate flexibility
- · Inadequate support, eg, lack of guidance or training
- · Relationships, eg, with boss, colleagues or customers
- Role, eg, lack of role clarity
- Change, eg, uncertainty, rapid or repeated or prolonged change.



Guidance Note: 2.1 June 2008

These standards and consideration of the organisation's culture, as well as home-work balance, allow employers to assess the risk in a systematic way.

A number of tools for measuring both pressure and any resulting stress are listed and these include:

- "One to one" discussions
- Employment attitude surveys
- Performance reviews
- Focus groups
- Confidential stress "surveys" of staff. HSE have developed their own "Indicator Tool For Work-Related Stress" but other tools are available on a commercial basis. Some are easier and quicker to use than the HSE tools but it is always important to enquire about validation.
- Departmental and company sickness absence rates.
- Turnover
- Trends in business performance

#### d. Interventions

Following risk assessment, if it is necessary to modify specific pressures, a hierarchy of "control measures" is available. These include:

# At Company level

- improving communication
- improving participation in decision making
- providing more autonomy
- reducing uncertainty

# local level

- training Managers especially in the causes and manifestations of stress, how to recognise when an employee may be experiencing stress, options for interventions and when to seek expert help.
- Providing information for staff so their understanding of stress is improved and they know to talk to their manager or HR if they have a work related issue. If the individual is unwell or feels they cannot talk to their manager, they should be aware that the Occupational Health Department will see employees in strict confidence.
- Making specific adjustments such as reducing workload, changing responsibilities, clarifying roles, providing job related training.



Guidance Note: 2.1 June 2008

# e. Counselling

This may be necessary but should be seen as "First Aid" and of secondary importance compared with the primary preventative and corrective measures described above.

# f. Role of Occupational Health (OH)

Managers should know when to refer a member of staff for professional help. Examples would be:

- where the employee is clearly distressed when talking about work pressures and describing how they feel.
- when the manager is aware the individual is under the care of a doctor for mental ill health or is taking medication for anxiety or depression.
- after a spell of certified sickness absence due to mental ill health.
- if the manager is in doubt.

Staff must also be free to consult Occupational Health if they feel they have a stress problem. After evaluation, OH will, where possible, encourage a dialogue between the individual and their manager, having clarified the nature of the work related pressures which are causing a problem.

After certified sickness due to work related mental ill health, the need for referral to Occupational Health should be considered. If the employee is referred or self refers, advice will be given to the individual and to management on suitable temporary adjustments to rôle or workload during a period of rehabilitation. There will also be recommendations on the long-term steps that could be taken to reduce the particular pressures which led to the illness. Often a "round table" discussion involving an OH professional will be recommended. There will then be prolonged OH follow-up to ensure the individual remains well that the increased support does not fall away with the risk that a further episode of ill health is precipitated.

It is important to appreciate that such an event is likely to expose the Company to a risk of successful litigation for personal injury.



Guidance Note: 2.1 June 2008

#### 6. Recommendations

- a. Companies should adopt a proactive approach to managing stress, the primary aim being to prevent it rather than relying on employee support and Occupational Health programmes to assist staff experiencing stress.
- b. All managers should assess the risk of stress in their teams and implement appropriate interventions where the risk is unacceptable.
- c. Staff should know to inform their manager if they believe they may be experiencing stress.
- d. Managers should undergo training in managing stress in their teams.

# 7. Summary

This document sets out the responsibilities of management, employees and Occupational Health staff in addressing the issue of stress in the workplace.

#### 8. References & Sources of Further Information

- TUC bi-annual Survey of Safety Reps 2000. John Wiley and Sons Ltd. ISBN 0 471 98265 2
- Dangerous Waters Strategies for Improving Wellbeing at Work. Williams and Cooper.