

# Work Stress



The Stress Network could not exist without the generous support of many individuals and organisations throughout the UK. We would like to thank the following organisations for their financial assistance in the production of this booklet, although it should be noted that the opinions expressed and its content are solely the responsibility of the Stress Network:

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# NO ONE SHOULD LEAVE WORK AT THE END OF THE DAY LESS HEALTHY THAN THEY WERE WHEN THEY STARTED

## FOREWORD

### Welcome to this edition of *Work Stress*.

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This handbook has been written and revised by members of the UK National Work Stress Network, with contributions from other agencies and individuals with expertise in the field.

#### *Who should read this handbook?*

The Stress Network is firmly rooted in the trade union movement, with close links to the Hazards Campaign. Our strong belief is that, while wellbeing and similar programmes have a part to play in helping to alleviate the symptoms of work related stress, they should not become a substitute for working to identify and eradicate its causes. Trade unionists will find much material in this handbook to assist them in that work, whether they are lay shop stewards, health and safety representatives or paid officials of their unions. However, the effects of stress are pervasive and widespread, and impact upon the work of many other agencies. We would especially commend this handbook to:

- Employers, managers and Human Resources staff, who share a responsibility for creating and maintaining a culture of care, support and dignity in the workplace;
- Professionals working in medicine and occupational health, who will encounter many individuals suffering from stress and its effects, and may wish to become better informed about it;
- Those working in trade union education, as course tutors and students – previous editions of this handbook have, for example, been a useful resource for those teaching and learning on the TUC Diploma in Occupational Safety and Health;
- Academics who may be researching in this field and wish to have a digest of other projects related to stress;
- And, not least, workers with personal experience of stress and its effects.

The list is not exhaustive: we welcome all readers and users of this handbook, and especially those who may wish to join our Steering Group, and play an active role in the campaign.

The booklet is available to download free of charge from the Stress Network website ([www.workstress.net](http://www.workstress.net)) where there is also up-to-date news and information about work stress. An Executive Summary of the booklet is available on the website.

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## INTRODUCTION

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Too many workers are trapped in highly stressful work environments as a result of poor work organisation, bullying, victimisation, harassment or discrimination. Contrary to popular myth it is those at the bottom of the workplace pecking order and not high flying executives who are the major victims of stress-related illness. Another myth is that sufferers from stress are weak people, incapable of coping with the normal demands of working life. The reverse is often the case and it can be those colleagues who refuse to bend under these pressures and who refuse to admit to themselves that they are being overwhelmed who often succumb to incapacitating stress-related illnesses. Too often managers or employers make excessive demands, neglect their common law duty of care and clearly ignore the cost to their organisations of sick pay, long-term absence, reduced productivity and potential claims for compensation by workers made ill by their negligence. The human cost of work-related stress is enormous, in terms of wrecked lives and relationships, debilitating mental and physical illness and sometimes, tragically, death.

The evidence is overwhelming that work-related mental ill health is a major problem in our society with substantial economic, commercial and human costs. Using the work of experts such as Tombs and Whyte, RoSPA, Rory O'Neill, the late Simon Pickvance and Andrew Watterson, the Hazards Campaign has published the shocking estimate that up to 20,000 workers each year may be dying from work-related stress illnesses<sup>1</sup>. The 2012 Labour Force Survey (LFS) revealed that these accounted for 40% of all work-related illnesses in 2011/12 with the major causes being workload (tight deadlines, too much work, pressure or responsibility) with an estimated prevalence of 186,000 cases; lack of managerial support with an estimated prevalence of 61,000 cases; and violence, threats and bullying with an estimated prevalence of 54,000 cases. Research by the Health and Safety Executive (HSE) has demonstrated the reliability of these statistics.<sup>2</sup> A pan-European poll conducted by Ipsos-MORI on behalf of the European Agency for Safety and Health at Work (EU-OSHA) in May 2013 revealed that in the UK 46% of those questioned said that cases of work-related stress in their workplace were very or fairly common.<sup>3</sup>

The TUC's 2012 biennial survey of safety reps<sup>4</sup> found that stress is by far the most common and most rapidly growing health and safety problem at work. More than two thirds (69%) of reps said that stress was amongst the top five problems faced by the workers they represented. In the public sector this figure rose to 75%. More than a third of reps (36%) picked out stress as the most significant hazard in their workplace. And yet, despite all of this, efforts to tackle the problem to date have had little effect. Indeed, the incidence of work stress has been

<sup>1</sup> Hazards Campaign evidence to the Lofstedt enquiry, July 2011

<sup>2</sup> "Follow-up and assessment of self reports of work-related illness in the Labour Force Survey" (HSE 2013)

<sup>3</sup> <http://osha.europa.eu/en/safety-health-in-figures/>

<sup>4</sup> "Focus on Health and Safety: Trade Union Trends Survey: TUC Biennial Survey of Safety Reps 2012"

steadily increasing in the UK since 1992 at a rate of about 0.5% to 1.0% each year with the increase particularly marked amongst women workers. Independent research has suggested that the economic recessions of recent years have increased levels of workplace stress in the UK by 40%<sup>5</sup> and that the rate of increase has been faster in the UK than in the USA, Germany, China, Brazil and India<sup>6</sup>. The situation is clearly serious and urgent action is needed to confront it.

The battle for improvement in health and safety law has a long history. The challenge in the past has been to protect the physical safety and health of working people and, of course, this battle continues in what is at present an increasingly hostile political environment. A key moment in meeting this challenge was the passing of the Health and Safety at Work Act in 1974. The Act granted workers' trade union safety representatives important rights to inspect the workplace, to raise concerns with employers and to be consulted.<sup>7</sup> This has brought about a significant fall in the level of injury and death in the workplace. (Rather weaker rights were accorded to Representatives of Employee Safety in non-unionised workplaces in 1996).<sup>8</sup> These rights were not easily won in the face of opposition from employers and other vested interests and remain under continuous attack. Table 1, compiled by the Health and Safety Executive,<sup>9</sup> shows the general improvement in levels of health and safety since 1974. It is striking, however, that the figure for 'stress and related conditions' has actually increased.

Adjusted to align with 1974 definitions	1974	2011/12
Fatal injuries to employees	651	113
Rate of fatal injuries per 100,000	2.9	0.5
Reported non-fatal injuries	336,701	77,195
Deaths from pneumoconiosis	453	134
Deaths from asbestosis	25	169
Deaths from mesothelioma	243	2,347
Rate of self-reported 1990-2012 work-related illness	1990	2011/12
Rate of musculoskeletal disorders per 100,000	2,750	1,500
Rate of stress and related conditions per 100,000	820	1,520

TABLE 1<sup>10</sup> source HSE

<sup>5</sup> J. Houdmont, R.Kerr and K.Addley: Psychosocial factors and economic recession: the Stormont Study

<sup>6</sup> Kenexa High Performance Institute

<sup>7</sup> Safety Representatives and Safety Committees Regulations 1977

<sup>8</sup> Health and Safety (Consultation with Employees) Regulations 1996

<sup>9</sup> <http://www.hse.gov.uk/statistics/history/index.htm>

<sup>10</sup> It should be noted that the Hazards Campaign strongly disputes the figures for workplace deaths which it regards as a gross under-estimate.

The challenge in the 21st century is to bring about at least the same protection for the mental health and safety of workers as was achieved for their physical health and safety in the last century. Stress is a workplace hazard and needs to be tackled like other health and safety issues. The UK National Work-Stress Network (Workstress.net) is committed to the eradication of the causes of work-related stress and associated illnesses.

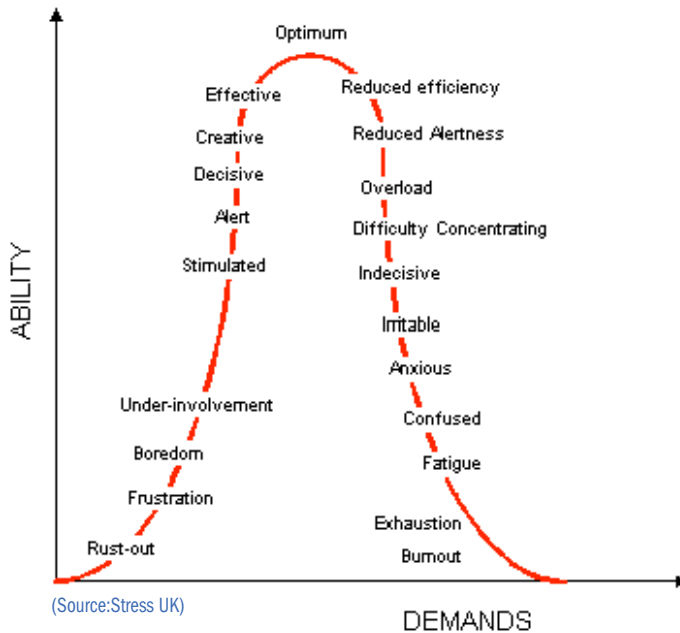


*Stress Network Annual Conference, 2012*



## WHAT ARE THE CAUSES OF WORKPLACE STRESS?

The Health and Safety Executive (HSE) defines stress as “the adverse reaction people have to excessive pressure or other types of demand placed on them.” Pressure is part and parcel of all work and helps to keep workers and managers motivated. It is excessive pressure, beyond the control of the employee, which can lead to damaging levels of stress that undermines performance, is costly to employers and can lead to major mental and physical illness, even death. There is no such thing as ‘good’ stress. The diagram below, taken from Stress UK, is a pictorial representation of individual reaction to increasing work pressures.



Pressures leading to health-damaging stress levels can be low level and sustained over a long period of time or be relatively short in duration but very intense, such as those traumatic events experienced sometimes, but not exclusively, by military personnel on active service or members of the emergency services.<sup>11</sup> Although there are, of course, sources of damaging stress in our everyday lives and relationships which can affect our experience of work, this booklet is concerned with those sources of stress which are work-related and thus to a great extent under the control of the employer: work pressures, the extent of worker control, workplace bullying, work-related violence and perhaps to a lesser extent in terms of frequency, traumatic events.

<sup>11</sup> See 'The physiology of stress' (page 17) and 'Post traumatic stress' (page 18)

## Work pressures

Long hours of work, unreasonably heavy workloads beyond the capacity of most people to carry, often combined with tight deadlines, management pressure and lack of support or understanding are major sources of work-related stress illness. The Labour Force Survey 2012 identified these factors as the main contributory causes of stress at work and this is supported by evidence from the GP reporting network (THOR), which identified work pressure and lack of managerial support as one of the three main factors causing stress-related illnesses amongst patients (the other factors were workplace bullying and changes at work including staff reductions and re-organisations). Even employers surveyed by the Chartered Institute of Professional Development in 2012 accepted that excessive workload was the major source of stress illness amongst employees with badly managed change and management style coming closely behind.<sup>12</sup> These results are confirmed by the EU-OSHA 2013 poll of a sample of UK workers in May 2013 shown in TABLE 2.

### Common causes of work related stress

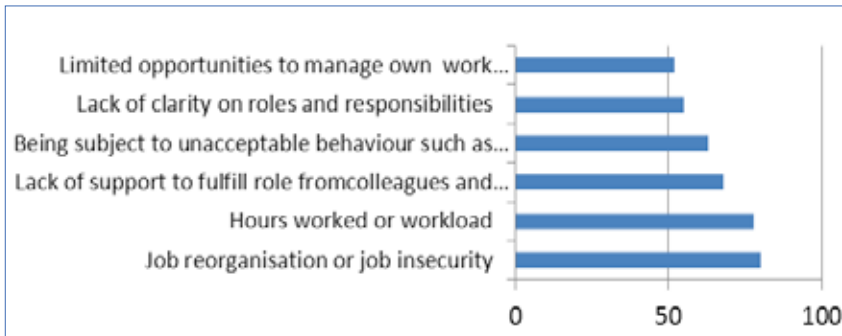


TABLE 2 (Source: Ipsos-MORI poll on behalf of European Agency for Safety and Health at Work (EU-OSHA) 2013)

There is no doubt that the increasing casualisation and precariousness of jobs within the British economy is another potent source of stress-related mental illness. There has been a relentless trend towards part-time, temporary, zero hours, on-call and other insecure contractual arrangements. Workers in such arrangements typically have poor working conditions, poor training, low pay and low job satisfaction. Figures produced by the Office for National Statistics in 2013 revealed, for example that the number of people on zero hours contracts doubled in the decade up to the end of 2012 to a peak of

<sup>12</sup> Chartered Institute of Personnel and Development (CIPD)/Simplyhealth Absence Management survey 2012.

200,000 and trending upwards.<sup>13</sup> The Chartered Institute of Personnel and Development (CIPD) disputes this figure and puts the real number of people on zero hours contracts as in excess of one million (3-4% of the working population), with one in 5 employers admitting to having at least one employee on such a contract.<sup>14</sup> This growing asymmetry in the employer/employee contractual relationship has been accompanied by an intensification of the pace of work, an increase in work demands, long hours, a decrease in the capacity of workers to take control of their work and, for some, a growing expectation to undertake training in their own time. All of these are well recognised stressors and may account in part for the steep increase in reported work stress between spring of 2009 and spring of 2010 as recession began to bite and such insecure contractual arrangements and greater work demands became more widespread. The Conservative-led coalition government's programme of cuts to pay, current high levels of unemployment, job insecurity and a deterioration in working conditions are all making an already bad situation considerably worse.

## **Lack of control**

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In the same way that the poor management of physical hazards can endanger the physical health and safety of workers, so the poor management of the work environment can endanger their mental and physical health. The 'work environment' includes not only the physical surroundings but work practices, management style and culture and the nature of relationships within the workplace.

Poor physical working conditions undoubtedly affect the mental health of workers. Workplaces that are too hot or too cold, too noisy or dirty or where conditions are hazardous can result in high levels of stress and mental illness. More often, however, it is ill thought out and poorly managed working practices that lead to damage. In workplaces where workers have little or no control over their work; where they are unclear what is expected of them; where demands placed upon them are beyond their (or anybody's) capacity; where there is little or no recognition of their efforts and where their voice is not heard, levels of damaging stress are likely to be high.

<sup>13</sup> Number of people on "zero hours" contracts Source: ONS Labour Force Survey

<sup>14</sup> <http://www.cipd.co.uk/pressoffice/press-releases/zero-hours-contracts-more-widespread-thought-050813.aspx>

Some of the characteristics of these ‘sick’ workplaces are listed in BOX 1.

#### Signs of a stressed workplace

- use of technology to control, monitor and track workers
- hot desking
- the threat of, or actual violence (verbal and/or physical abuse)
- lack of a clear job description or chain of command
- job insecurity
- lack of an understanding leadership
- cuts in government and local government funding leading to increased workloads
- long-hours culture
- no recognition or reward for good job performance
- no opportunity to voice complaints
- lack of employee representation and consultation
- lack of control
- no opportunity to use personal talents or abilities
- inadequate time to complete tasks to personal or company standards
- unreasonable workload
- unremitting or prolonged pressures
- confusion caused by conflicting demands
- misuse of procedures (discipline/ performance/ absence)
- feelings of injustice arising from deliberate isolation and ill-treatment
- unrealistic targets
- bullying and poor relationships

BOX 1

## Bullying

Authoritarian, dictatorial, insensitive and sometimes cruel management styles are well recognised causes of work-related stress illnesses. These are often characterised by those that use them as ‘strong’ management but in reality are more likely to be signs of weakness and insecurity. These styles of management feed in to the creation of a workplace culture where bullying behaviour can be the norm.

### *What is bullying?*

There are various definitions of bullying but all agree that it involves the unjust exercise of power by one individual over another using means intended to humiliate, frighten, denigrate or injure the victim.

Bullies use offensive, intimidating, malicious or insulting behaviour against their victims to cow them into submission, to hide their own ineffectiveness, or to pass on to those over whom they exercise authority, the bullying that they are suffering from those who exercise authority over them. Often the aim of the bullying is to exclude and isolate the victim from co-workers. Sometimes bullies behave this way in the mistaken belief that this is ‘strong’ management and sometimes, it seems, simply for the pleasure of making somebody suffer. A particularly nasty

dimension is added when there is a sexual, racial or religious dimension to the behaviour as can often be the case. Bullying may be overt or it may be insidious. Whatever form it takes, it is unwarranted and unwelcome to the individual. A bully does not have to be face to face with his/her victim. People can be bullied by memo, by email, or telephone. Some regard the inappropriate use of automatic supervision methods such as computer recording of downtime from work or the number of calls handled, as an insidious form of bullying. Some workers are subject to malicious use of websites, email, mobile phone texting, social networking and other uses of technology to create an atmosphere of fear and anxiety. This 'cyber' bullying is a growing problem.

### *The prevalence of bullying*

Workplace bullying, which can be the bullying of an employee by another employee or group of employees ('mobbing') but is more usually the bullying of more junior staff by those in managerial or supervisory positions, is a significant cause of work-related stress illness sometimes leading to suicide. Some researchers have postulated that up to half the recorded cases of mental illness caused by work-related stress have been caused by workplace bullying. In 2012, 41% of Safety Reps surveyed by the TUC placed workplace bullying as one of their top five concerns and a survey carried out by teaching union NASUWT in the same year reported that two-thirds of respondents had experienced or witnessed workplace bullying in the previous 12 months and that 1 in 5 of those who had quit teaching had done so as a result of bullying from colleagues or managers. A similar survey conducted in 2011 by the Association of Teachers and Lecturers (ATL) found that one quarter of respondents has experienced bullying. The NUJ has accused the BBC of having an institutionalised problem of bullying and an investigation commissioned by the BBC in May 2013 and overseen by Dinah Rose QC confirmed that there were serious issues to be addressed. These examples are not unique and, as the TUC surveys demonstrate, bullying and harassment of employees is a problem in many organisations.

### *Bullying behaviour can include:*

- competent staff being constantly criticised, having responsibilities removed or being given trivial tasks to do
- shouting at staff
- persistently picking on people in front of others or in private
- blocking promotion
- regularly and deliberately ignoring or excluding individuals from work activities
- setting a person up to fail by overloading them with work or setting impossible deadlines
- consistently attacking a member of staff in terms of their professional or personal standing
- regularly making the same person the butt of jokes

BOX 2 (Source: "Bullied at Work? Don't suffer in silence" (TUC 2013))

## *The effects of bullying*

Whatever the perpetrator and whatever the method, bullying can have a devastating effect on the victim leading to feelings of anxiety, humiliation, fear, anger and frustration. Bullied workers suffer loss of self-confidence and self-esteem and high levels of stress can lead to mental and physical illness, absence from work and even resignation. Job performance is almost always affected and relations in the workplace suffer. In extreme cases victims have been known to take their own lives. There is no reliable research on work-related suicide in the UK but a survey conducted on behalf of MIND, the mental health charity, in March 2013 found that 7-10% of stressed workers have suicidal thoughts. According to a dossier compiled by *Hazards* magazine, international comparisons would suggest that in this country between 100 and 250 suicides each year are precipitated by work-related stress.<sup>15</sup> The Court of Appeal has ruled that in certain circumstances a bully whose actions have driven somebody to suicide may be guilty of manslaughter.<sup>16</sup>

All negative behaviour<sup>17</sup> however defined, is damaging and costly to the victims and their families, to the organisation and to society at large, with the major cost emotionally and financially being borne by the victim. Indeed, this is part of the problem because employers only pick up a fraction of the cost of the damage they have caused to employees; three quarters of the cost falls on the victim and the taxpayer. Later in this booklet we discuss the economic cost of work-induced stress illness (of which workplace bullying is a major cause) to society at large.

## *Tackling workplace bullying*

It is in the interests of everyone to eradicate this scourge in the workplace. This is not easy since experience shows that many employers and senior managers are reluctant to accept that bullying is taking place in their workplace. Some will go to extreme lengths to avoid defining any behaviour as bullying. It is almost as though, if behaviour is not termed bullying it does not count, and no one has to do anything about it. It can result in a sense of paralysis in the workplace, where unkind and destructive behaviour is tolerated and excused. The problem is made worse because many victims of bullying are too afraid to speak out, partly because of fears of not being believed or of being thought weak, but also because of fears of losing their job in the current climate of job and spending cuts, which one in four employees identify as being responsible for an increase in bullying in recent years. In a recent survey conducted by UNISON, the majority of those polled - 53% - said they would be too scared to raise concerns over bullying in the current climate of job and spending cuts, compared with just 25% two years ago. Workplace bullying, which is a major source of work-stress, must be tackled as

<sup>15</sup> *Hazards* 101 January-March 2008: "Crying shame"

<sup>16</sup> R vs. Dhaliwal [2006] CA, Thursday 18 May 2006

<sup>17</sup> Burnes, B., & Pope, R. (2007). Negative behaviours in the workplace: A study of two primary care trusts in the NHS. *The International Journal of Public Sector Management*, 20 (4), 285-303. Pope, R., & Burnes, B. (2009). Looking beyond bullying to assess the impact of negative behaviours on healthcare staff. *Nursing Times*, 105(39) 20-24.

part of the employer's general workplace strategy to combat the scourge of work induced stress illness. Employers have a legal duty to protect their employees. Fulfilling this duty will involve using the tools provided by health and safety legislation and guidance to identify the hazard, assess the risk and take necessary action. This process is described in the sections of this booklet dealing with stress policies and risk assessment.

All workers have a right to be treated with dignity and respect and staff welfare must be given the utmost priority. There needs to be a clear focus on the expectation of positive behaviour throughout organisations. Individuals who are victims of bullying need the support of employers, management, fellow workers and their trade union. Advice for individual victims can be found in the section on Dealing With Your Own Stress (page 38).

### Signs of organisational bullying in the workplace

- Rapid staff turnover; rising sickness and absenteeism rates
- Otherwise inexplicable declines in productivity
- Whole departments or sections appearing to be defective
- Lack of motivation and low morale
- Loss of respect for management

BOX 3

## Violence

The Health and Safety Executive's definition of work-related violence is: 'any incident in which a person is abused, threatened or assaulted in circumstances relating to their work'.

Any worker whose job involves contact with the public can be vulnerable, particularly those who provide services, deal with complaints, exert authority or handle money particularly in isolated situations. Prison officers, teachers, health service workers, transport staff and care workers are amongst occupational groups who identify work-related violence as a serious health and safety issue. However, the issue is not limited to these groups and one in five Safety Reps surveyed by the TUC in 2012 indicated that work-related violence was in their top five of concerns.

Violence against employees, which does not have to be physical but can consist of verbal abuse or threats, can cause devastating psychological as well as in some cases serious physical injury. Psychological symptoms can include anxiety, irritability, loss of confidence, sleeplessness, fear of contact with others and feelings of guilt. A 2006 Danish study quoted in *Hazards* 96<sup>18</sup> found that exposure to violence increased the risk of depression by over 45%.

<sup>18</sup> 'Hazards' magazine, edition No. 96

## Post-traumatic stress

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We often describe upsetting episodes in our lives such as divorce, redundancy or bereavement as 'traumatic'. These experiences can, indeed, be very stressful. However, post-traumatic stress disorder (PTSD) is a term used to describe the serious psychological reaction suffered by some when exposed to an extreme event or situation often of a threatening or catastrophic nature. The kinds of event that may lead to PTSD are where an individual finds him/herself in a life threatening situation or where there is a threat of serious injury or other threat to his/her own physical integrity; where a person witnesses such an event; or where he/she learns of the unexpected, violent death, serious harm or threat of death or injury experienced by a family member or other close associate.<sup>19</sup> Traumatic events are so shocking because they undermine our sense that life is fair, reasonably safe, and that we are secure. A traumatic experience makes it very clear that we can die at any time.

The thrust of the Stress Network's campaign is to demand that employers take the necessary steps to protect workers against work-induced stress illnesses. Obviously, this is much more difficult and in some cases impossible in respect of workers engaged in inherently risky occupations such as some military personnel, members of civilian emergency services and others. However, these workers must not be put carelessly or unnecessarily in harm's way and they have the moral right, and in most cases, the legal right to have their risks assessed and minimized as much as is possible. The landmark judgement of the UK Supreme Court in 2013 that the Human Rights Act applies to service personnel on active service and that they can sue the Ministry of Defence on grounds of negligence underlines this responsibility.



<sup>19</sup> Diagnostic Statistical Manual of Mental Disorders IV's (DSM IV)

<sup>20</sup> Smith and others (FC) (Appellants) vs. The Ministry of Defence (Respondent), Ellis (FC) (Respondent) vs. The Ministry of Defence (Appellant), Allbutt and others (FC) (Respondents) vs. The Ministry of Defence (Appellant) 19th June 2013



## WHAT ARE THE SYMPTOMS OF STRESS?

### The physiology of stress

Work-related stress is the result of a conflict between the role and needs of an individual employee and the demands of the workplace. Although stress itself is not an illness it can create serious ill-health issues, generally as a result of continued unrelenting pressures. If pressures are not released then the body continues to respond and can create over-production of various significant hormones which in normal quantities are fine but in excess can create serious difficulties. Physiologically we are programmed to deal with threatening situations by producing increased levels of certain hormones including cortisol. Adrenalin is the hormone which increases heart-rate and puts our bodies into a state of arousal, 'the fight or flight' reaction. This response is only intended to be short term. The effect of excessive pressure is to keep the body constantly in such a state, which leads to harmful signs and symptoms including those in BOX 4. Excess hormone production weakens the immune system and makes us more vulnerable to illness. Excessive pressure can cause more intense symptoms of migraine, irritable bowel syndrome or back pain in those who already have a pre-disposition to such ailments.

World Health Organisation figures shown in TABLE 3 show clearly the inter-relationship between stress and physical health.

Stressor	May result in	Health results
High job demands	Seven times higher risk	For emotional exhaustion
Low co-worker support	Two times higher risk	For back, neck and shoulder problems
Low job control	Two times higher risk	For cardiovascular mortality
High strain (high demands, low control)	Three times higher risk	For hypertensive morbidity

TABLE 3 (Source: World Health Organisation (WHO) statistics Quoted in EU-OSHA E-Facts 51)

There is a complex interplay between physical and psychosocial hazards in the workplace. Just as it is clear that poor or hazardous working conditions can lead to high levels of stress and mental illness, so it is equally clear that the effects of stress can lead to physical symptoms of ill health, such as heart disease, as well as longer term psychological damage. British Academy<sup>21</sup> research points to 'very consistent evidence' that work stress leads to an estimated 50% increase in the risk of heart disease. A 2012 study undertaken by researchers at the Columbia University Medical Centre identified a 27% increase in the risk of heart attack in highly stressed individuals, the equivalent of smoking five cigarettes a day.<sup>22</sup> Many of the early outward signs will be noticeable to managers and work colleagues and should alert those with significant control and responsibility for workplaces to problems within the organisation. Some of these are shown in BOX 4.

<sup>21</sup> The British Academy is composed of distinguished scholars in the humanities and social sciences, elected by their peers

<sup>22</sup> "Meta-Analysis of Perceived Stress and Its Association With Incident Coronary Heart Disease." Donald Edmondson, PhD, Safiya Richardson, MD et al, CUMC's Center for Behavioural Cardiovascular Health

Symptoms include some or all of the following

- changes in behaviours
- unusual tearfulness, irritability or aggression
- indecisiveness
- increased sickness absence
- poor timekeeping
- reduced performance, e.g. inability to concentrate
- overworking or failure to delegate
- erosion of self-confidence
- relationship problems, e.g. becoming withdrawn or argumentative
- increased unwillingness to co-operate or accept advice
- excessive smoking, drinking or drug abuse

Sufferers may also complain of or show symptoms of:

- changes in behaviours
- unusual tearfulness, irritability or aggression
- indecisiveness
- increased sickness absence
- poor timekeeping
- reduced performance, e.g. inability to concentrate
- overworking or failure to delegate
- erosion of self-confidence
- relationship problems, e.g. becoming withdrawn or argumentative
- increased unwillingness to co-operate or accept advice
- excessive smoking, drinking or drug abuse

### *Post-traumatic Stress Disorder (PTSD)*

Sufferers from Post-Traumatic Stress Disorder (PTSD) may suffer additional symptoms. Many people feel grief-stricken, depressed, anxious, guilty and angry after a traumatic experience. As well as these understandable emotional reactions, there are three main types of symptoms produced by such an experience: flashbacks and nightmares; avoidance and numbing and hypersensitivity to perceived threats.

Reaction to a traumatic incident can be delayed, often for several weeks or months after the incident and sometimes for much longer. Nearly everyone will have the symptoms of post-traumatic stress for the first month or so. Over a few weeks, most people slowly come to terms with what has happened, and their stress symptoms start to disappear. However, for about one in three the torment can continue indefinitely. Up-to-date statistics on the prevalence of PTSD can be found on the HSE website<sup>23</sup> The Royal College of Psychiatrists also has a web page devoted to PTSD<sup>24</sup>

Work currently being undertaken by the World Health Organisation (WHO) in the preparation of the International Classification of Diseases – 11 (ICD11) may be helpful to clinicians in the diagnosis of stress-related mental (as opposed to physical) disorders. The proposal is to create a separate grouping within ICD11 for disorders specifically associated with stress and to clarify the diagnostic symptoms of PTSD. ICD11 is scheduled for publication in 2015.

<sup>23</sup> [www.hse.gov.uk/statistics/tables/index.htm#thor](http://www.hse.gov.uk/statistics/tables/index.htm#thor)

<sup>24</sup> [www.rcpsych.ac.uk/mentalhealthinfo/problems/posttraumaticstressdisorder/posttraumaticstressdisorder.aspx#1](http://www.rcpsych.ac.uk/mentalhealthinfo/problems/posttraumaticstressdisorder/posttraumaticstressdisorder.aspx#1)

## THE COSTS OF STRESS

### *The costs to business and society*

According to HSE, approximately 23 million days are lost to the British economy each year because of absences caused by work-related accidents and ill-health out of which 10.4 million (45%) are categorised as due to stress, depression or anxiety.<sup>25</sup> In terms of illness, there were an estimated 500,000 people who suffered a 'new' work-related illness in 2010/11. Around 222,000 were cases of stress, depression or anxiety with the major causes recorded as being excessive workload (44%), lack of support from management (14.5%) and violence, threats and bullying 13%. However, the highly respected Office for National Statistics puts the total absence from work figure in 2011 at 131 million days with 13.1 million days being lost because of stress, depression and anxiety.<sup>26</sup>

Producing accurate estimates of the costs associated with work-related stress illness is difficult because of the different methodologies adopted by different researchers. In November 2009 the Government's National Institute for Health and Clinical Excellence (NICE) said the cost to the British economy of work-related mental illness in the UK was £28bn and HSE more recently has put the cost at £30 billion. The CBI estimates a cost of £17 billion to business during 2012 for all work absences.<sup>27</sup> The NHS Mental Health Strategy 2011 postulates a much larger overall figure of £1,000 per employee absence or £26 billion in total. We know that stress-related absences account for about 45% of the total. This would put a cost to the economy of £7.7 billion on CBI figures or £11.7 billion on NHS figures. However, all of these figures are likely to be serious underestimates because they ignore the costs to the NHS of treating the casualties of work-stress and the wider social costs which may be as much as £105 billion. They also fail to recognise the high number of cases that go unreported. The present hostile political and economic climate has created a culture of fear in workplaces and many cases are simply hidden away.

According to the Labour Force Survey, some occupation groups have particularly high levels of work-related stress, including teachers, nurses, housing and welfare officers, customer service workers, and certain professional and managerial groups. These groups report high rates of work-related mental illness, along with medical practitioners and those in public sector, security-based occupations such as police officers, prison officers, and UK armed forces personnel. A Freedom of Information request to Derbyshire Constabulary in 2009 revealed that in a force of 2,128 police officers the estimated cost of sickness absence owing to acknowledged work-related stress illnesses was in excess of £1 million.

<sup>25</sup> [www.hse.gov.uk/statistics/publications/swi.htm](http://www.hse.gov.uk/statistics/publications/swi.htm)

<sup>26</sup> Sickness Absence in the Labour Market, 2011, Office for National Statistics

<sup>27</sup> CBI 2012

## The Human Costs of Stress

The cost of work-related stress illness to business and to the national economy is high but of far greater importance is the personal cost to employees and their families in terms of ruined lives, serious illness and even premature death. Only those who have been victims can appreciate the torment and the horrifying debilitating effects of clinical depression, anxiety and other mental health problems brought on by work-related stress. The current position is dire with a staggering rise in mental ill health related to the current economic down turn and Government austerity measures emerging. According to MIND, the recession “has had a devastating effect on the wellbeing of British workers”.<sup>28</sup> Government statistics show the biggest rise in antidepressant prescriptions ever, showing a massive rise from 35.9 million in 2008 to 50 million issued in 2011.<sup>29</sup> Every year, one in six people of working age experiences a mental health problem<sup>30</sup> and 5 million people rate themselves as very or extremely stressed by their jobs<sup>31</sup>.

But it is not only mental health that suffers as a result of work-induced stress. There can be real and serious physical consequences of high, sustained levels of stress, chief amongst which is a greatly increased risk of heart disease. Studies have shown that the physiological syndrome linked to heart disease increases under conditions of stress. Tarani Chandola, Professor of Medical Sociology, University of Manchester, has said of a twelve year study of Whitehall civil servants: “We found that chronic work stress was associated with coronary heart disease and this association was stronger both among men and women aged under 50.” Those under 50 who said their work was stressful were nearly 70% more likely to develop heart disease than the stress-free.

To add insult to injury it is not employers who carry the major financial costs associated with workplace injury and ill-health but, as TABLE 4 compiled by the Health and Safety Executive (HSE) clearly shows, it is the hapless victims.

### Estimated costs of work-related injuries and ill-health 2010/2011

Cost bearer	Estimated cost (£billions)	% of total cost
Individuals	7.2	54%
Employers	3.2	24%
Government	3.1	23%
<b>TOTAL COST</b>	<b>13.4</b>	<b>100%</b>

TABLE 4 (Source: ‘Costs to Britain of workplace injuries and work-related ill health: 2010/11 update’ (HSE))

<sup>28</sup> <http://www.mind.org.uk/news/show/3372>

<sup>29</sup> Data from ‘Prescriptions Dispensed in the Community: England, Statistics for 2001 to 2011’

<sup>30</sup> Office of National Statistics, 2001, Psychiatric morbidity among adults living in private households in GB – cited on the Mind website

<sup>31</sup> Sinclair, A. O’Reagon, S. (2007) ‘Mental health and work’ Brighton: Institute for Employment Studies – cited on the Mind website

## Presenteeism

There has been a decline in sickness absence since the beginning of the recession in 2008. According to Office for National Statistics (ONS) figures the average number of sick days per employee fell from 5.6 days in 2007 to 4.1 days in 2012. In other circumstances this would be a welcome development, but the decline masks the disturbing trend of 'presenteeism' where workers who should be off work ill with stress-related mental or physical problems are too afraid to take time off, sometimes because of fear of losing their jobs in the present climate of cuts and job insecurity and sometimes because of aggressive performance management and 'return to work' policies and procedures. 80% of employees report that they would not take time off work for stress-related illnesses.<sup>32</sup> There is growing anecdotal evidence that many employees are taking leave days rather than calling in sick for fear of disciplinary actions and of totting up scores under the Bradford Formula Sickness Absence scoring system.<sup>33</sup> Research conducted amongst employers by the Chartered Institute of Professional Development (CIPD) in 2012 reported that one third said there was an increase in the number of their employees going in to work ill and of these more than half reported an increase in stress-related absence and mental health problems.<sup>34</sup> Not only is this storing up trouble for the future of the individual but it represents a hidden cost for the employer in terms of lack of productivity, proneness to accidents and poor concentration. A Canadian study quoted by leading researcher in the field, Professor Tarani Chandola found that of the cost to employers of work-related stress, approximately 80% was owing to absenteeism and approximately 20% to presenteeism.

Research undertaken on behalf of MIND, the mental health charity, in March 2013 found that 19% of workers had time off work during 2012/13 as a result of stress-related illness although, worryingly, over 90% lied about the cause of their time off work blaming stomach bugs or headaches rather than the true causes of long hours, unmanageable workload and workplace bullying. Surveys continue to reflect high levels of work-stress in the UK. The CIPD survey referred to above reported that for the first time, work-related stress illnesses were the major cause of long-term absence from work. GPs report that approximately one-third of all diagnoses of work-related ill-health are cases of mental ill-health, with an average length of sickness absence per certified case of 26.8 working days.

<sup>32</sup> Canada Life Group, cited by [cipd.co.uk](http://cipd.co.uk) May 2013

<sup>33</sup> The Bradford Factor or Bradford Formula is a much disputed system used in human resource management as a means of measuring worker absenteeism.

<sup>34</sup> Chartered Institute of Personnel and Development (CIPD)/Simplyhealth Absence Management survey 2012.

## THE CASE FOR ACTION

In the face of such overwhelming evidence of a major health and safety problem in the workplace with its significant costs to business, the economy, society and the individual, it is reasonable to ask why effective and urgent action is not being taken to combat it. The answer seems to be a combination of staggering complacency on the part of many British employers and managers in the private and public sectors, a weak legislative framework resulting from the lack of resolve of successive governments and weak enforcement action by the Health and Safety Executive (HSE), which has been consistently underfunded and has been a major casualty of the Conservative/Liberal Democrat programme of cuts. We need to take action on all of these fronts.

### *Employer complacency*

The complacency of British industry is amply illustrated by the response of the CBI to the NICE report in 2009 when a spokesman said: “The mental health of staff is something firms have been making a priority. More and more schemes have been set up to support staff in recent years.” Research by the employment charity, the Shaw Trust<sup>35</sup> challenged this view in May 2010 when, according to the Independent on Sunday<sup>36</sup>, it showed that: “The vast majority of employers and HR directors have no idea about the mental health of employees. Half do not believe any of their employees ever suffer from a mental health problem.” In the CIPD survey of employers carried out in 2012, 31% of respondents confessed that they were doing nothing about stress. The view of the Shaw Trust together with the information provided by CIPD accords with the experience of the Stress Network. Outside of some public sector organisations there has been little serious attempt to tackle the problem of work-induced stress illness beyond some cosmetic exercises and sporadic attempts to shut the stable door after the horse has bolted by instituting employee counselling schemes and similar palliative measures often under the umbrella term of ‘Wellbeing’ initiatives.

In the best cases, Wellbeing initiatives can be a genuine attempt by good employers to repair the damage done to their employees and may enable access to activities and therapies that may offer some relief. However, even in these best cases such paternalistic measures miss the point, which is that prevention of work-related stress illness must be the goal and not simply the treatment of victims when the damage is being done. Such schemes may be necessary but they are not sufficient in the same way that Accident and Emergency Departments are necessary but do nothing to reduce the number of accidents. These are the best cases. In the worst cases such schemes can be a cynical move on the part of some employers in the belief that they create a defence in case the victims of their indifference seek damages in court. Regrettably this belief has been

<sup>35</sup> “Mental Health-Still the last Workplace Taboo?” The Shaw Trust, December 2010.

<sup>36</sup> Independent on Sunday 16 May 2010

encouraged by some judicial decisions in stress cases. Such actions can seek to undermine, not only the work and influence of trade union health and safety representatives, but also the seriousness of the stress related problems suffered by workers and regularly tackled by these reps. A Trade Union perspective will highlight issues of employer responsibility (and liability) for workplace stress.

Another reason for the complacency of many employers may be that there is little financial incentive for them to confront this problem. In the USA and some other countries where the extent of work-related stress illness seems to be declining, employers carry the full cost of the health needs of employees and so have an incentive to keep their workforce healthy. In the UK, as we have seen earlier, this incentive is lacking; the employer picks up only a fraction of the cost of employee ill-health with three-quarters of the cost being borne by the tax-payer and the victim. As Jill Earnshaw and Professor Cary Cooper put it “at the present time there is no accountability of, or incentive for, employers in the UK to maintain the health of their employees”.<sup>37</sup>

The complacency of employers may also be due in part to a lack of awareness of the scale of the problem because of the unwillingness of employees to admit to suffering from stress-related illnesses (90% lie about their condition according to MIND, the mental health charity). However, in the opinion of the Stress Network, the weakness of the civil and criminal law in this area is the main contributory factor. Judges have led employers to believe that providing a metaphorical sticking plaster in the form of counselling and other alternative therapies for employees can relieve them of the responsibility of having inflicted the wound in the first place.

Neither, it would seem, do employers have much to fear from the criminal law. Although the Health and Safety at Work Act 1974 requires employers to ensure the health of their workers so far as is reasonably practicable and the Management of Health and Safety at Work Regulations 1999 require the identification of workplace risks and their eradication or amelioration, employers seem to be able to disregard with impunity this duty when it comes to the serious risk of mental and physical illness posed by work stress. As Brendan Barber, former TUC General Secretary, has said, employers put this duty in the ‘too difficult’ box. The preferred approach of HSE to tackling the problem of work-related stress has been to educate and persuade. But, despite the efforts of the HSE to encourage employers to adopt the advisory “Management Standards for Work Related Stress” and the wealth of advice on the process of risk assessment in this area there remains widespread ignorance and apparent indifference amongst many employers and senior managers. In a pan-European survey<sup>38</sup> conducted in 2009, ‘lack of awareness’ of the issue of work stress was cited by 61% of managers interviewed in the UK as the major reason for failing to take effective action; only Turkey (75%) and Estonia (64%) revealed greater ignorance amongst senior managers.

<sup>37</sup> “Stress And Employer Liability (Developing Practice)” Jill Earnshaw and Cary L. Cooper

<sup>38</sup> EU-OSHA and the UK Data Archive bear no responsibility for their further analysis or interpretation.

HSE has seen enforcement as a last resort and, indeed, although all of the evidence shows that the problem of mental and physical ill-health caused by excessive stress at work is acute and getting worse and that the majority of employers simply ignore their responsibilities in this area, examples of enforcement action by HSE are few and far between.

### *Negative attitudes to health and safety*

In one sense it is not surprising that work stress is not given the attention it deserves by British employers. When faced with many competing demands in other areas, many of them statutory, the temptation to ignore mere guidance must be great. In addition, the negative attitude to health and safety legislation displayed by the right wing media and by the Conservative/Liberal Democrat Government, which consistently portrays the duty on employers to protect the health and safety of their employees as a 'burden' on business, may well have led employers to regard progress in this area as of low priority.

The wholesale onslaught on health and safety protections since the election of 2010 has simply reinforced the belief amongst some employers that they have little to fear from the Health and Safety Executive enforcement authority. Their reaction, while deplorable, is rational because 35% budget cuts to an already weakened HSE and the Government decision to ban pro-active inspections in supposedly 'safe' sectors of the economy have rendered it even more powerless to enforce the law and surrenders millions of workers to the tender mercies of their employers. It is in many of these supposedly 'safe' workplaces that the epidemic of stress related illness is at its most virulent.



## DEALING WITH STRESS ISSUES IN THE WORKPLACE

The problem of work-related stress illness is extremely serious for the individual, for the organisation and for the country and needs to be tackled with greater urgency than has been shown to date. The priorities must be to reduce to the lowest practicable level the incidence of avoidable stress-related illness in the workplace and then to give maximum support to those workers affected.

The preceding sections of this booklet have painted a bleak picture and there is no doubt that workers and their representatives face major challenges in tackling the problem of work-related stress. However, the situation, although grave, is far from being hopeless and there are actions that can be taken by individuals to protect themselves, and by trade unions and worker representatives to protect their members. The task is to persuade or to force employers to take their responsibilities seriously. Employers are obliged by law to consult with employees on health and safety matters either through their trade union representative if the union is recognised, through their Representative of Employee Safety if there is one or with them individually. All of these have an opportunity to press the legal, business and moral cases for taking action to remove the causes of stress in their workplace. Obviously in unionised workplaces where proper consultative structures exist and where union representatives have both statutory rights and access to advice and support from their unions, the task is easier than where these factors are not present.

### *Statutory underpinning*

The Stress Network wishes to see effective and well enforced statutory underpinning of the HSE Management Standards for Work Related Stress in the form of Regulation or an Approved Code of Practice. We also seek the inclusion in the Management of Health and Safety at Work Regulations 1999 of a specific duty to carry out risk assessments of the factors in the workplace which put at risk the mental health of employees such as hours of work, pressure of work, shift work, temporary contracts, casual working, pace of work and its distribution, as well as the style and manner of management.

We also want the recognition of work-related stress illness as an industrial injury for the purpose of sickness benefits and specific statutory recognition of the right of people at work to be treated with dignity and respect.

### **Using Health & Safety law**

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Employers may be persuaded to take action if they are reminded of their legal obligations to do so and are presented with a framework for action. There are a number of pieces of core legislation and guidance, which lay down obligations

<sup>39</sup> Although Health & Safety and Employment Law apply in the same way in England, Scotland and Wales, there are some procedural differences in Scotland arising from its different legal system. Separate laws exist in Northern Ireland. Always check for compatibility and take legal advice before taking any action.

and processes that, if followed, would go a long way to tackling the problem of workplace stress. These are described, below.

Mental and physical illness caused by work-induced stress is like any other occupational injury and needs to be controlled in the same way by the process of risk assessment laid down in the Management of Health and Safety at Work Regulations 1999. The HSE 'Management Standards for Work Related Stress' define both the issues that need to be addressed by employers and the processes they should undertake.<sup>40</sup> These are discussed in the following pages.

### *Health & Safety at Work Act (1974)*

Whilst there is no specific legislation in the UK dealing directly with work-related stress, the Health and Safety at Work Act 1974 (HASAWA), part of the criminal law, requires all employers to ensure 'as far as is reasonably practicable' the health, safety and welfare of all of their employees. This duty extends to ensuring their mental as well as their physical health and safety. Employers are obliged to draw up a written Safety Policy and to consult with trade union health and safety representatives where trade unions are recognised or with employees or Representatives of Employee Safety in non-unionised workplaces. Where unions are recognised, employers must establish a Safety Committee, if requested to do so by two or more Safety Representatives, on which representatives of employees and management can address health and safety issues. Breaches of the Act are criminal offences and defaulting employers may be served with Enforcement Notices requiring compliance, Prohibition Notices requiring a cessation of a hazardous activity or fines and imprisonment in serious cases. The Health and Safety Executive (HSE) through its inspectorate is the lead enforcing authority for the HASAWA 1974 and other health and safety legislation, although some functions are exercised by local authorities. The legislation is clear although, in truth, there are problems with its enforcement arising from the swingeing 35% cut in the HSE budget imposed by the coalition government (which has reduced the capacity of HSE to enforce the law) and from the government prohibition on pro-active inspections in many workplaces.

Workplace stress, bullying and violence policies – creating a caring, supportive culture  
The Health and Safety at Work Act 1974 requires employers to draw up a written safety policy. In practice, it is probably better to have separate policy documents dealing with work-related stress, bullying and violence. To be effective the policies will have been written after meaningful consultation between workers, their representatives and management. It is essential that accredited and trained Health & Safety Representatives where they are in post are fully involved in developing, agreeing, implementing and reviewing the policies.

If the policies are to have any effect it is vital that there is an acknowledgement of the issues and a commitment to tackle them from the very top of the organisation. Senior managers need to 'buy in' to the policies, actively endorse them, –

<sup>40</sup> See [www.hse.gov.uk/stress/standards/](http://www.hse.gov.uk/stress/standards/)

recognise explicitly their duty of care to employees and make a commitment to identifying and eradicating work-based causes of unacceptable levels of stress, including bullying and violence. The same level of commitment is needed from Directors and members of Boards of Management.

The title given to the policies is also important in setting the agenda and context for action. 'Workplace stress prevention policy', 'Prevention of bullying policy' and 'Prevention of violence' policy are titles which give proactive messages.

#### The content of the policies

The policies should begin with clear statements of intent and include links to (a) relevant health and safety legislation and (b) the employer's own health, safety and welfare policies and procedures. These measures, if properly undertaken, will emphasise that it is the responsibility of supervisory staff at all levels to manage stress, bullying and violence issues and to support the policies.

It is important that the policies contain clear definitions of the issues being tackled and in the case of bullying and violence, unambiguous statements in each case that such behaviour is unacceptable. A mechanism for dealing with breaches of the policies or with complaints under the policies, which includes trade union or employee representative involvement is essential as is the identification, in the case of bullying and violence, of an independent person who can offer the victim/complainant help and support. Sometimes with the help of advice, victims of bullying may be able to resolve the issue themselves. It is important in all of these policies that victims and witnesses are assured of confidentiality when this is appropriate and that there are safeguards against the victimisation of complainants and witnesses. The bullying policy should be fair to both complainant and the accused person. Recognition should be given to the fact that sometimes accusations of bullying may be malicious and that false accusations will be dealt with through the disciplinary procedures.

The agreed policies should be effectively communicated to all employees with an expectation that they will be actively supported across the organisation. Good communication may include: letters to employees; well-produced posters and flyers for display and distribution in the workplace; promotion of the policy through staff briefing sessions and inductions for new staff. The policies should be clearly and equally applicable to all employees. All staff should have access to resources for tackling and counteracting stress, bullying and violence and the policies should not be open to charges of discrimination upon any grounds.

#### Measures and Monitoring

The policies' objectives should be clear and measurable, and should include a commitment to creating a positive workplace culture in which open discussion about the issues is encouraged. They should set out clearly the steps and control measures which the employer intends to employ in realising these objectives. They should contain arrangements for supportive and confidential health monitoring and provide for staff self-referrals to appropriate, independent support services. The effectiveness of the policies should be carefully monitored and evaluated. The mechanism for doing this should have been agreed by all contributing parties, and be set out in the policy documents.

### *The Management of Health and Safety at Work Regulations (1999)*

These Regulations implement the requirements of the European Framework Directive 89/391 laying down the processes that employers must follow in order to fulfil their duties under the HASAWA, and in particular the process of 'risk assessment'.<sup>41</sup> It is by this process that employers are required to identify workplace hazards, assess the risk they pose to employees and to take action to eliminate or reduce to a practicable minimum the risks identified, taking into account individuals' capabilities. Employers must assess the risks that may lead to problems of damaging stress amongst employees and deal with them as they would any other risk. HSE says that "employers have duties under the Management of Health and Safety at Work Regulations, 1999, to assess the risk of stress-related ill health arising from work activities; and under the Health and Safety at Work etc. Act 1974, to take measures to control that risk. HSE will undertake enforcement action where duty holders fail to carry out the legally required suitable and sufficient risk assessment." In recognition of the fact that assessing stress risks may be new territory for some employers, HSE has produced comprehensive guidance in 'The Management Standards for Work Related Stress'.

### *The Management Standards for Work Related Stress*

In 2004, HSE published The Management Standards for Work Related Stress, a non-statutory, voluntary code which sets a number of benchmarks by which employers can judge the level of their compliance with the law. In other words it lists the factors that employers should consider when conducting their risk assessment. The promulgation of the Management Standards and the supporting documentation which has appeared since, should prevent any employer in future pleading ignorance about the steps which he must take to protect the mental and physical health of his employees. The Management Standards are advisory but employers have duties already under the Management of Health and Safety at Work Regulations 1999 to assess the risk of stress-related ill health arising from work activities and under the Health and Safety at Work etc. Act 1974 to take measures to control that risk. The Management Standards advise employers on the specific application of these duties to stress hazards in their workplace. The Standards recognise that, as with other workplace hazards, the causes of work-related stress are rooted in management culture and practices. They are aimed at employers whose responsibility it is to assess the levels and causes of work-related stress that exist in their workplace and then to take action to eliminate or at least reduce these stress factors.

The Standards define the six key areas of management activity that, if not properly managed, can lead to damaging levels of workplace stress, and also indicate what should be happening in the workplace for the standards to be achieved.

<sup>41</sup> See 'Conducting a Stress Risk Assessment' (page 34)

The six areas to be controlled are the:

**DEMANDS** made of workers including issues such as workload, work patterns and the work environment. Demands on the individual are often quoted as the main cause of work-related stress. It is important that job demands are fully evaluated to identify their true extent and to ensure that these demands do not become unmanageable. During the risk assessment, workload, capability/capacity to do the work, physical and psychosocial environments would be looked at here.

**CONTROL** exercised by workers including how much say the worker has in the way they do their work. Research has shown that where an individual has little control in how their work is carried out, this can be associated with poor mental health. Research also suggests that where there are greater opportunities for decision making there is better self-esteem and job satisfaction. An obvious issue for consideration here would be task design.

**SUPPORT** given to workers including the encouragement, sponsorship and resources provided by the organisation, line management and colleagues. To eliminate/reduce any potential stressors identified within a particular role, all the above elements are key in conducting a risk assessment.

All training should be undertaken jointly by management and workers where possible and both should be aware of the total training programme and its content. The ensuing action plan will also incorporate an evaluation of current risk (with existing controls in place); a plan for the implementation of additional control measures; and an evaluation of risk with the additional controls in place.

**RELATIONSHIPS** with and between workers including promoting a positive working environment to avoid conflict and dealing with unacceptable behaviour such as bullying. "Relationships" is the term used to describe the way people interact at work. Other people can be important sources of support but they can also be sources of stress. At work, relationships with colleagues at all levels can dramatically affect the way we feel at the end of the day. Two potential aspects of these relationships that could lead to work-related stress are bullying and harassment.

**ROLE** certainty amongst workers. Whether all workers at every level understand their role within the organisation and whether the organisation ensures that they do not have conflicting roles. The potential for developing work-related stress can be greatly reduced when a role is clearly defined and understood and when expectations do not produce areas of conflict. The main potentially stressful areas are role conflict and role ambiguity, together with the burden of responsibilities.

**CHANGE** to the conditions of workers. How organisational change (large or small) is managed and communicated within the organisation. Many organisations have had to undergo change in recent years sometimes to incorporate the introduction of new technology, new working practices or procedures. Downsizing and complete or partial restructuring are other motivators of change in the workplace. The changes could be to implement one clear overall objective or could be a se-

ries of smaller, on-going, more subtle frequent changes. Poor management of any change can lead to individuals feeling anxious about their employment status and reporting work-related stress. Therefore, it is very important that any change is properly managed.

The Standards help to measure performance in managing work-related stress. They form the basis of an effective risk assessment process<sup>42</sup> by identifying the main risk factors for work related stress; by helping employers focus on the underlying causes and their prevention; and by providing a yardstick by which organisations can gauge their performance in tackling the key causes of stress.

HSE expects organisations to carry out a suitable and sufficient risk assessment for stress, and to take action to tackle any problems identified by that risk assessment. Although HSE prefers to rely on persuasion in this area there have been some examples of enforcement action taken against employers failing to carry out and act on adequate risk assessments of stress hazards. HSE does not see the necessity of an Approved Code of Practice at this stage but in the past promised to keep this option under review. Current coalition government hostility to health and safety makes this unlikely in the near future.

The Management Standards for Work Related Stress can be found on the HSE website.<sup>43</sup>

### *Evaluating the Management Standards*

HSE has not evaluated in any comprehensive way the impact of the Management Standards for Work Related Stress on levels of work-related stress-induced illnesses nor the extent of their use by employers. There is, therefore, little objective evidence on which to draw. However, the Stress Network believes, based on our contact with workers in a wide variety of employment sectors, that while there has been some implementation of the Standards in the public sector and some examples of good practice, particularly in some parts of the National Health Service, generally speaking there is widespread ignorance of the Management Standards and the associated risk assessment processes in much of the public sector and very large sections of the private sector. This impression is supported by the findings of Professor Tarani Chandola who, in his report to the British Academy, "Stress at Work", October 2010 says: "There is little evidence that the management standards on work stress (and related agreed codes of practice) introduced by the Health and Safety Executive in 2004 has reduced work stressors so far. Given the tougher economic environment after the 2008/09 recession, it is possible that these management standards may not be widely used or may become even less effective at reducing work stress....The contribution of specific legislation on work stress and/or enforcement of this legislation to lower work stress in some European countries also needs to be investigated."

<sup>42</sup> See 'Conducting a Stress Risk Assessment' (page 34)

<sup>43</sup> [www.hse.gov.uk/stress/standards/](http://www.hse.gov.uk/stress/standards/) and [www.workstress.net](http://www.workstress.net)

This is despite efforts by HSE since 2004 to publicise the existence of the Standards and to persuade employers to take the issue of work-related stress seriously. In particular, between 2005 and 2007, HSE worked intensively with 100 volunteer organisations (the “Willing 100”) in the high risk sectors of health, education, local government, finance and central government to test the operation of the Management Standards and to provide role models for others to follow.

#### *What is the view of the Stress Network?*

The Stress Network endorses the Management Standards for Work Related Stress and associated procedures as a useful management tool to tackle the problem of work-related stress. We acknowledge the valuable assessment tools which have been developed in order to assist employers to comply with their responsibilities and which are available as free downloads on the HSE website.<sup>44</sup> In particular, some find the HSE Indicator and Analysis Tools particularly useful. Some tools have been developed which go beyond the minimum requirements of the Management Standards such as the highly regarded ‘Work Positive’ tools developed by Health Scotland in collaboration with the Health and Safety Authority in the Republic of Ireland and subsequently involving HSE in Northern Ireland and the mainland.<sup>45</sup>

However, despite these developments, we have always believed that a voluntary approach would not work and that statutory regulation or at least an ACoP combined with strict enforcement was essential. Nothing in our experience since 2004 or in the limited research conducted by HSE has led us to change our mind. For example, in the ‘Willing 100’ project, despite the intense help given by HSE, by the end of two years 38 organisations had dropped out. Many of the others had not even reached the stage of action planning and there was a distinct lack of enthusiasm on the part of senior management. You can read the full evaluation report on the HSE website.<sup>46</sup>

#### *What can you do?*

Until we secure statutory underpinning of the Management Standards, we must work with them as a voluntary tool. This means persuading employers of the business and moral case for tackling the serious problem of work-related stress and working with them to secure a low-stress workplace. Trade Union Safety Representatives and workplace Safety Committees have a vital role to play in this regard. As well as gathering anecdotal evidence of stress-related ill-health in the workplace, a more systematic informal audit of the workforce could be conducted, possibly using the HSE assessment tools referred to above or the simple branch audit form shown and explained in APPENDIX 2, which is used on Stress Network training courses. In this way more robust evidence can be gathered to use in discussions with employers or for presentation to the workplace Safety

<sup>44</sup><http://www.hse.gov.uk/stress/standards/downloads.htm>

<sup>45</sup><http://surveys.healthyworkinglives.com/workpositive>

<sup>46</sup><http://www.hse.gov.uk/research/rpdf/rr693.pdf>

Committee. At the end of the day, employers have a statutory duty to assess risks to the mental as well as physical health of employees and the Management Standards provide a recognised helpful framework within which this can be done.

### *Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) (1995).*

RIDDOR is a set of regulations that require employers, and other people who are in control of work premises, to report and keep records of: work-related deaths; serious injuries; cases of diagnosed industrial disease; and certain 'dangerous occurrences' (near miss incidents). We mention it here because of what the Regulations do NOT do. They are extremely limited in their scope and there is no provision within the Regulations for the gathering of information on work-related stress or on some other threats to the safety and health of workers such as bullying, harassment and violence. It is the view of the Network that the gathering of such information, if not through RIDDOR then through some other vehicle, is an essential step in tackling what are significant health and safety issues in the workplace as we have demonstrated earlier.

Despite the limitations of RIDDOR, employees have a duty under health and safety law to report to their employers any shortcomings in the employer's health and safety provision of which they become aware. Employees should make use of this provision to press for better protection against workplace stressors.

It should be noted that at the present time the Conservative/Liberal Democrat government is undertaking a review of health & safety legislation allegedly to remove so-called trivial and irritating aspects and to tackle what it calls the 'compensation culture', the existence of which has never been demonstrated despite the many reviews instituted by the government. One change has been to remove the requirement on employers to report accidents leading to more than three days absence from work and to replace it with the weakened requirement only to report accidents leading to more than seven days absence from work. The Stress Network deplores this attack on essential protections for working people in the guise of a tidying up exercise.

## **Criminal Legislation**

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Other than laws dealing specifically with health and safety at work, there is other criminal legislation which has a bearing on factors that can lead to unacceptable levels of work stress:

### *Employers' Liability Act (1969)*

This legislation imposes on employers the requirement to have appropriate insurance to ensure that a safer working environment can be achieved and injuries to employees and third party persons can be reduced.

### *Criminal Justice and Public Order Act (1974)*

This Act makes intentional harassment in the workplace a criminal offence, pun-



ishable by law where the perpetrator in speech, or in writing, uses abusive or insulting language or behaviour, or disorderly behaviour so that another person feels harassment, alarm or distress.

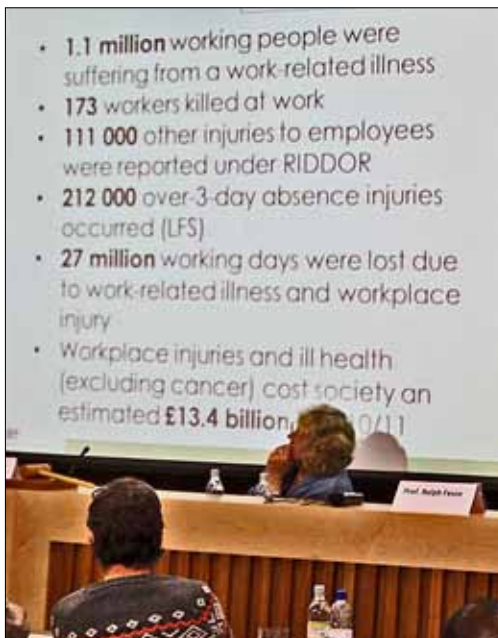
#### *Public Order Act (1986)*

The act defines racial hatred as: "...that hatred against a group of persons in Great Britain defined by reference to colour, race, nationality (including citizenship) or ethnic or national origins". In cases where racist actions and words have caused stress, then the act's provisions may apply, in addition to the discrimination laws below.

#### *Protection from Harassment Act (1997)*

This legislation makes personal harassment illegal. Instances of such behaviour should be reported to the Police, who may take action, and possibly to employers where the acts are work related. There have been a few successful claimants however it is difficult to prove employer liability under the Act. To fall within it in the work context, the offender's behaviour must:

- Have been repeated on more than one occasion;
- Be very serious and not simply either an argument between two fellow workers or reasonable criticism of poor performance by, for example, a manager;
- Be aimed at the victim with the intention of causing distress;
- Be related closely to the job of work.



## CONDUCTING A STRESS RISK ASSESSMENT

As we have seen, employers are required by the Management of Health and Safety Regulations 1999 and with the guidance offered by the Management Standards for Work Related Stress to assess the risk of stress-related ill health arising from work activities and to take action to control that risk. This responsibility is solely that of the employer. Stress in the workplace can be assessed like any other risk if the matter is approached systematically. Such Assessments must be carried out by a 'Competent Person', who is trained in the process and understands the impact of health and safety law, including the HSE Management Standards approach. (See HSE website [www.hse.gov.uk/stress](http://www.hse.gov.uk/stress) for further information and resources – in particular HSG218 "Managing the causes of work-related stress" which incorporates a systematic approach for employers and a number of helpful resources and toolkits. This guidance is free to download.)

### *Convincing the employer*

The biggest hurdle is to convince employers that they should address the issue of workplace stress. As we have described earlier in this booklet, many employers do not attach any urgency to this matter. Managers, employers and Board Directors may try to shy away from the concept, or suggest that people are wimps, should leave their baggage at home and should 'pull themselves together'. There is still a great deal of ignorance and misunderstanding about the subject or (what is worse) insistence that the problems are personal and not work-related at all.

Employers may be persuaded by the case that they are legally obliged to address the issue but, for reasons we have described such as lack of the risk of facing enforcement action, this may not move them. They may be persuaded by the moral argument that on simple grounds of humanity they should care for the well-being of their employees but our experience, regrettably, is that not all businesses are moral enterprises. Or they may be persuaded by the business case that failure to act is going to cost them money in staff absence, loss of productivity, low employee morale and possible litigation.

Once persuaded, it is essential that everybody buys in to the process and that it is actively overseen by a steering group which includes substantial trade union and employee representation. This could be the company Safety Committee. Worker involvement is crucial but it must be clearly understood at all stages that the responsibility lies with the employer. The purpose of the risk assessment is to establish how well or otherwise the workplace meets the benchmark standards in each of the six areas of management activity listed in the Management Standards.

### **The five step approach**

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HSE recommends an approach to the conduct of a risk assessment, which is endorsed by the Stress Network and which is summarised in the diagram "The five step approach to risk assessment" (page 35).

### *STEP 1: Identify the Risk Factors*

Identifying the risk factors is a matter of understanding the six areas identified in the Management Standards as potential risks in any organisation and assessing how each of them might be a factor in producing unacceptable levels of stress. This will involve considering the 'States to be achieved' objectives which accompany each standard as well as the standard itself.

### *STEP 2: Identify who can be harmed and how*

The next stage is for the Steering Group to consider available data that might point to problem areas and help identify those aspects of the Standards which need attention. Examples given by HSE of sources that can be used include: sickness absence data, employee turnover, exit interviews, productivity data, performance appraisals, informal talks with employees, focus groups, surveys and return to work interviews. We would add Safety Inspection reports and issues raised by trade union representatives to whom employees will be more likely to talk frankly. The point is to use as wide a variety of sources as possible and not to jump to conclusions until the data has all been collected and analysed.

Surveys, informal and formal, are rich sources of data and can give an early warning sign of problems. Trade Union Safety Representatives might carry out and analyse a simple survey of staff, such as those in Appendix 1, in order to persuade management that there is a problem. The first is one used on occasions by the Network. The actual factors listed in the survey will vary according to the nature of the workplace and the perceived problems. The second is one suggested by HSE and which links answers to each of the six Management Standards areas. You may find it preferable to design your own. More elaborate surveys are available including the HSE Management Standards Indicator Tool, available on the HSE website<sup>47</sup> and many trade unions produce their own sector specific survey questionnaires and these should be used, where available.



The five step approach to risk assessment

<sup>47</sup> <http://www.hse.gov.uk/stress/standards/pdfs/indicatortool.pdf>

### *STEP 3: Evaluate the risks and formulate solutions*

This step is arguably the most crucial because the main aim here, having identified problems, is to begin to formulate solutions. Once again the central involvement of employees and their representatives is vital since they are closest to the problems and best placed to judge the effectiveness of proposed solutions. In the current Approved Code of Practice (ACoP) to the Management of Health and Safety Regulations 1999, helpful guidance is given to employers as to the hierarchy of measures that should be taken to combat an identified risk (See BOX 5). Although the HSE under intense pressure by the Conservative/Liberal Democrat Government who see health and safety as a 'burden' on business, has decided to withdraw this ACoP on 31st July 2013, it has promised that it will be replaced by a suite of non-statutory guidance documents. The replacement of a statutory ACoP by non-statutory guidance represents a weakening in protection but the principles laid out in BOX 5 will still be relevant.<sup>48</sup>

*In deciding which preventive and protective measures to take, employers and self-employed people should apply the following principles of prevention:*

- (a) if possible avoid a risk altogether, e.g. do the work in a different way, taking care not to introduce new hazards;
- (b) evaluate risks that cannot be avoided by carrying out a risk assessment;
- (c) combat risks at source, rather than taking palliative measures. So, if the steps are slippery, treating or replacing them is better than displaying a warning sign;
- (d) adapt work to the requirements of the individual (consulting those who will be affected when designing workplaces, selecting work and personal protective equipment and drawing up working and safety procedures and methods of production). Aim to alleviate monotonous work and paced working at a predetermined rate, and increase the control individuals have over work they are responsible for;
- (e) take advantage of technological and technical progress, which often offers opportunities for improving working methods and making them safer;
- (f) implement risk prevention measures to form part of a coherent policy and approach. This will progressively reduce those risks that cannot be prevented or avoided altogether, and will take account of the way work is organised, the working conditions, the environment and any relevant social factors. Health and safety policy statements required under section 2(3) of the HSW Act should be prepared and applied by reference to these principles;
- (g) give priority to those measures which protect the whole workplace and everyone who works there, and so give the greatest benefit (i.e. give collective protective measures priority over individual measures);
- (h) ensure that workers, whether employees or self-employed, understand what they must do;
- (i) the existence of a positive health and safety culture should exist within an organisation. That means the avoidance, prevention and reduction of risks at work must be accepted as part of the organisation's approach and attitude to all its activities. It should be recognised at all levels of the organisation, from junior to senior management.

BOX 5 (Source: Management of Health and Safety at Work 1999, Approved Code of Practice and Guidance)

<sup>48</sup>The Conservative/ Liberal Democrat Government plans to exempt certain self-employed people from health and safety law by the end of 2013. Although the proposal has still to go through parliamentary processes and could be blocked, by the time of this booklet's publication, it could well have been enacted, despite the fact that a large proportion of those killed at work are self-employed.

#### *STEP 4: Record your findings*

If the employer has been assiduous in following the steps so far and in making the involvement of employees and their representatives central to his/her activity, by this stage it should be possible to begin to draw up action plans to implement solutions to the identified problems. As the plan/s develop all the stakeholders, management, employees and employee representatives should be consulted at every stage and agree the action plan and the priorities within it. Any plan to be effective must detail clear actions to be taken, by whom they are to be taken, the resources required and a date by which they must be completed. Think SMART: the plan should be Specific, Measurable, Achievable, Realistic and Time-limited.

The plan must tackle the source of any identified problems and not simply offer ameliorative measures such as access to counselling, recreational therapies, yoga or similar relaxation techniques, although these may be of some value in themselves and may form part of an overall plan. The aim must be, as far as practicable, to remove the causes of stress at work and not merely to offer palliative treatment after the event.

#### *STEP 5: Monitor and review*

The management of work-related stress is not a one-off exercise. It is vital that the action plan which has been developed is continuously monitored to ensure that it is being properly implemented, to check its effectiveness and, if necessary, to prompt further action. Once again it is essential that employees and their representatives have a meaningful involvement in the process. It may be useful, after a period of time, to repeat a survey conducted at the beginning of the risk assessment process in order to see whether progress towards the objectives of the action plan has been made.

A simple Stress Risk Assessment Pro-forma is available on the UK National Work Stress Network Website<sup>49</sup>

<sup>49</sup> <http://www.workstress.net/downloads.htm>

## DEALING WITH YOUR OWN STRESS

### *Wellbeing initiatives*

The serious consequences resulting from unacceptable levels of stress in the workplace demand action. It is not enough for employers to take steps simply to ameliorate the effects of work-induced stress, which many are tempted to do, believing that such actions as providing counselling services, relaxation lessons or medical referrals for employees relieves them of further responsibility. Although these ‘employee wellbeing’ measures may be necessary actions they are not in themselves sufficient. Such an approach is an attempt to shift the blame for work stress disorders from the employer to the employee who in some way by failing to learn to relax or to resolve conflict through counselling may be deemed responsible for his/her own condition. The primary duty of employers is to identify and to remove the work-related causes of unhealthy levels of stress amongst their employees through the process of risk assessment as laid down in the Management of Health and Safety Regulations 1999 using the guidance provided in the HSE Management Standards for Work Related Stress.

Of course, employees themselves can take steps to control levels of stress by taking time out when they can, learning to prioritise, taking control of their workload where possible, finding ways to relax and sharing their concerns with work colleagues, branch members, stewards and managers – all should lend a helping hand and have a sympathetic ear. A healthy lifestyle avoiding potentially harmful coping strategies such as comfort-eating, alcohol, smoking and drugs (prescribed or otherwise) can also help. However, as has been said, self-help or employer provided help is no substitute for action to reform the workplace.

### *Help for sufferers of PTSD*

It is true that some work has a high stress factor or contains the potential of placing the worker in traumatic situations. Such work is generally easily recognised and those entering upon it are usually trained to understand the issues. It is common for there to be in place measures to control the risk and to support the worker. Workers in these fields should, through trained and elected union representatives, have these measures constantly monitored for their effectiveness. Most workers do not face these situations but nevertheless this argument should not be allowed to excuse employers from taking action to protect workers’ health.

Sufferers from PTSD need medical attention and should always consult their GP if they suffer any of the symptoms listed in the section “Post-traumatic Stress Disorder (PTSD)” or in BOX 4 (page 15). They may well be referred on to specialist help. There are some self-help steps which can be taken by keeping life as normal as possible, by returning to a familiar routine, by eating and resting properly and by talking about the incident to a trusted person. The support of family and friends is important. Concentration is often affected so sufferers may be more accident prone than usual. Post-traumatic stress disorder is a condition that must be reported to the Driver and Vehicle Licensing Agency (DVLA). PTSD, like other work-related stress illnesses is NOT a sign of weakness in the individual and suf-

ferers should avoid isolating themselves from other people and/or not talking about their experience. It will take time for the symptoms to recede and alcohol, tobacco or drugs are not the answer.

## **If all else fails**

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The problem of work-related stress can and should be tackled by employers through the process of risk assessment and with the assistance of the Management Standards for Work Related Stress and associated advice and guidance. However, if employers fail to accept this responsibility and behave irresponsibly they may find themselves subject to Grievance Procedures or compensation claims from employees they have damaged. The following paragraphs offer some advice to those who believe themselves victims and to their representatives. This is followed by an explanation of the current law in relation to work-related stress.

Individuals who believe they have been subjected to workplace stress and wish to seek a remedy should consult their trade union representative. If not a member of a trade union, they should seek legal advice or seriously consider joining a union!<sup>50</sup> The UK National Work-Stress Network does not provide detailed advice or individual casework support. The Network can give only very basic advice and general information, and cannot provide representation for individuals.

### *Trade Union Members*

If you are suffering from stress at work, including harassment or bullying, you should seek help at an early stage from your trade union. It is important that you make notes of any incidents and keep all relevant correspondence or items that refer to your case. This is difficult but important. If you have any witnesses that may support your case this can be extremely useful. You should first discuss the matter with a local representative or Branch Official. If you believe you need more expert help at any stage do not be afraid to contact your Union's Regional or Head Office according to the practice of the individual union concerned. You should discuss with your Trade Union Representative or Safety Representative how to progress your case through internal Grievance Procedures. Do not attend any meetings alone – insist on having your TU Representative or a trusted work colleague with you. Statutory Grievance and Disciplinary and Dismissal Procedures now have to be complied with in most cases before a claim can be taken to the Employment Tribunal.<sup>51</sup> (See: Employment Act 2002 (Dispute Resolution Regulations 2004)). Some specific advice from those who feel they have been subjected to bullying is given in BOX 6.

<sup>50</sup> Be aware that trade unions have no obligation to take responsibility for the handling of pre-existing cases although many will consider doing so.

<sup>51</sup> The Enterprise and Regulatory Reform Act 2013 makes radical changes to the Employment Tribunal system including strengthened requirements for conciliation and mediation. It also makes claims in the Tribunal far more difficult and expensive to pursue for the individual, putting access to redress beyond the means of most working people. It is essential, for purposes of protection if for no other reason, that employees join a trade union.

## How to respond to bullying

- Raise the issue with work colleagues and trade union representatives.
- Keep written records of all bullying incidents.
- Confront the bully about his/her behaviour – however care should be taken not to increase the power of the bully in this process. If necessary always ensure that you have a way out of the room, and that you are accompanied or supported by third party witnesses.
- Use appropriate in-house procedures.
- Share the problem with a friend.
- Respond in writing to bullying memos and keep copies.
- Establish status of meetings before agreeing to attend. Always take a work or trade union colleague with you. If for any reason you are unable to be accompanied try to make as accurate as possible verbatim record of the meeting immediately afterwards.
- Raise issues with appropriate senior managers.
- Seek counselling and support via the employer.
- Record all absences due to bullying and consult with your trade union/ legal representative on the advisability of submitting form BI-95 to the Department of Work and Pensions, keeping a copy. The DWP may not accept such a submission but, if they do, this registers for possible future disability recognition and benefits.

### BOX 6

In time, you may wish to discuss getting appropriate legal advice from union solicitors. If once you have met the solicitor, you have further concerns which you believe have not been addressed you should raise them with the solicitor or if that is not possible contact the appropriate trade union official to discuss these issues further. The union will only pursue a grievance or take other action if you want it to, and if it believes there is a strong enough case. If you would like to discuss your problem confidentially with a union representative but wish it to go no further, then that option is available to you.

*You may also wish to consider:*

- counselling or advice either through your employer's occupational health or employee assistance service stress counsellor, welfare organisation, Wellbeing at Work projects or Human Resources officer;
- services provided through local facilities, e.g. the local hospital, GP surgery or health centre;
- information centres, libraries and Citizens' Advice Bureaux and the Helplines listed in this publication, on the Network website<sup>52</sup> or in your local directories.

The availability of such services will depend on the size and/or type of employer and what resources exist locally.

### *Not in a union?*

If you are not already a member of a trade union you may wish to approach the appropriate union to join. Be aware that the union may not be willing to incur expenditure on already existing casework which is a good reason for ensuring you join before you encounter problems. Many unions, however, will be prepared to

<sup>52</sup> [www.workstress.net](http://www.workstress.net)



offer advice and to deal with further issues which arise after your join date (subject to the union's rules). If you do not wish to pursue your case through that option, you may seek independent legal advice, although you should be aware that you may have to pay the cost of instructing solicitors to advise and represent you privately. You should enquire about the scale of the solicitors' charges when you make your initial enquiry. Some legal firms offer no-win no-fee terms, which may be worth exploring.

The local Citizens' Advice Bureau will probably be able to give you some local contacts e.g. solicitors or law centres. Some 'no-win no-fee' legal companies will advise on the prospects of success of potential cases, but you should remember that proof of injury requires some very detailed evidence. You may also want to consider the other avenues available as outlined in the section above. It is possible though to take a case before an Employment Tribunal without legal support but this is not advisable because this area of the law is complex and difficult. Recent coalition government changes to Employment Tribunal procedures and the introduction of substantial costs simply increase the difficulty in this area.

### *Trade Union Representatives*

If you are a Shop Steward or an appointed Safety Representative make sure that you are familiar with your own union's procedures and advice on the handling of members' casework.

You should be aware that the issues of harassment, bullying and work-related stress are complex. If a member approaches you with a problem of this nature you may need to consult a senior union official at Branch, Regional or National level or, where appropriate within the union's casework policies, seek legal advice. In some cases it may be better to refer the member to a union official with greater experience in dealing with these types of cases.

You may wish to discuss with the member whether they should seek advice within the workplace where this is available from, for example, the Occupational Health Adviser, Harassment and Discrimination Adviser, Stress Counsellor or Human Resources Officer. Where these sources of advice do not exist or are considered inappropriate, you may recommend seeking advice from external advisers, for example, from GPs, Health Information Centres, libraries and Citizens' Advice Bureaux.

Be prepared to have to spend considerable time with a person whose health and family life may be seriously damaged. Be aware that members in such situations are often very anxious that all aspects of their case need to be considered, and that they may demand a lot of your time. Members will often put all the blame for their stress on their workplace but sometimes the workplace will be one aspect of a complex situation which includes difficult personal issues.

Remember that you may not be able to help the member yourself, and if you feel that the case requires expert help then you must refer them on through your trade union procedures to more senior officials who may have access to specialist services in dealing with stress cases.

Once again we emphasise the vital need to keep good written records at all stages.

### *The problem of stress amongst union representatives*

The problem of high levels of stress amongst trade union caseworkers and lay officers is becoming increasingly apparent. It is common for such people to take on workloads and work under pressures that would not be tolerated in normal worker/employer situations. For example, the caseload carried by such people can greatly exceed that of comparable workers in the professions although often of equal complexity. This is not a well-researched area but trade unions would do well to be aware of these pressures and the possible adverse health consequences they can bring. Trade unions may wish to consider the creation of training, monitoring, counselling and support mechanisms for caseworkers and lay officers where these do not already exist.

Being a Trade Union Representative can bring its own stresses. TU Reps do the work because they are committed to improving the working conditions of their members. But it is important that they look after themselves as well. Some advice is offered in BOX 7 and on the UK National Work Stress Network website.<sup>53</sup>

#### Advice for the Rep

- Be careful to establish manageable and realistic boundaries to your contact with members. Some members when in crisis will be focussed on their own problems to the exclusion of everything else and may not recognise the limits on your availability.
- Keep records of your contacts and actions with members.
- Work closely with your Branch and expect support from your Branch officers and/or regional staff, as appropriate.
- As well as ensuring a work/life balance, you may have to balance the demands of your substantive post with those of your trade union role. Your trade union activities may not be supported or appreciated by your colleagues and management. You may find yourself with demands both from your members and your colleagues. This can bring its own stresses and if difficulties arise you should consult a senior union official for advice and support.
- Be careful about over-identifying emotionally with the plight of your member. It is important that you remain focused and realistic.
- Be careful about representing or advising friends! It can be difficult to give or receive advice in these circumstances and can affect friendships adversely.
- Above all recognise that being a trade union representative can be very stressful. So look after yourself. Use the checklist in BOX 4. The trade union representative is often the last to recognise the damaging stress he/she is suffering!

BOX 7<sup>54</sup>

<sup>53</sup> <http://www.workstress.net/downloads.htm>

<sup>54</sup> Advice developed from Workshops conducted at Stress Network conferences 2010/2011

## Sickness absence

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If your health is affected by work and other pressures you will need to consider how to act. You can self-certify for the first few days of absence and after day 7 [including weekends and leave days] must provide a medical certificate for your employer. Make sure you keep copies of all such certificates.

You will need to check your employer's Sickness Absence policies and procedures to see what entitlements there are and the extent of sick leave that is allowed. Statutory Sick Pay [SSP] is paid by the employer for up to 28 weeks often but not always in addition to normal salary, dependent on your employer and any national or local agreements that have been negotiated or indeed imposed.

If your absence needs to be extensive then keep your Union Steward informed and of course maintain such contact as is necessary with your employer. Your managers should not be overly intrusive and demanding or use harassment to force you back to work. Neither can they insist that you do work from home when off sick – to do so may breach sick pay and health and safety regulations.

Try not to be fearful of a medical certificate saying that you are off work through 'stress, anxiety or depression' and if it says 'work-related stress' then that is a clear signal to your employer that there is something wrong. Even where the background causes may be personal and domestic, your employer needs to be aware and to know how to support you. The necessity of an explicit reference to 'work-related' stress on medical certificates is emphasised by legal advisers

It is not a criticism of you, and should not be taken by a manager as a sign of weakness.

### *A note about 'Fit Notes'*

In 2010 the Fitness for Work Note ('Fit Note') replaced the familiar 'Sick Note'. The difference was that whereas the Sick Note had the one option of declaring the recipient unfit for work, the Fit Note allows the doctor to declare the recipient fit for work providing the employer modifies the work demands, perhaps by reducing hours, removing part of the job, modifying the work station or in some other way. From 2012 a computer generated Fit Note replaced the handwritten version. The new note, which is protected against forgery, offers the option of declaring the recipient unfit to work or fit to work providing that one of the following conditions is met:

- a) a phased return to work,
- b) altered hours,
- c) amended duties or
- d) workplace adaptations.

The declared intention behind the Fit Note of keeping sick workers close to the workplace and assisting their rehabilitation was generally welcomed by trade unions and others although many, including the Stress Network, expressed reservations about whether GPs would have the necessary occupational health expertise to make valid judgements and whether employers, many of whom did not have access to occupational health services, would use the provisions supportively, as they were intended, or punitively.

These fears have been born out and there has been disillusionment on all sides with the efficacy of the Fit Notes. In 2013 the BMA, representing doctors, decided by a narrow margin that the fit note was a waste of clinical time and confused employers, patients and doctors. In the same year a survey conducted amongst members by the Engineering Employers' Federation reported high levels of dissatisfaction and a feeling that GPs, far from being a help, were a major hindrance to the rehabilitation of employees. Similarly, trade unions have found the operation of the system failing in its objectives with many employers unable or unwilling to make the modifications that would enable an early and safe return to work.

In January 2013 the Conservative/Liberal Democrat Government announced the setting up of a new Independent Assessment and Advisory Service (IAS) which it says will give doctors, employees and all employers, large or small, access to expert advice on vocational rehabilitation and occupational health matters. Time will tell whether this is a positive development for employees or yet another stick with which to beat them.

At the time of writing, the scheme envisages that a referral to the new service will be made after the employee has been absent for four weeks. It is expected that referrals will be made by GPs but, despite the serious reservations of trade unions, the Government is also looking at ways employers could make referrals. This is not a face-to-face service and interviews will be carried out by telephone and a report sent to GPs, the patient and his/her employer. Giving employers access to the report would seem to breach patient confidentiality and this is a serious worry. However, at the moment the details of the scheme are not clear and you should take advice from your trade union.

### *Frequently asked questions*

*What if I feel that I really need to go to work despite my illness?*

Many people often struggle in to work despite not being 100% fit. In the case of viral infections, coughs, colds etc., it is not acceptable as you may pass on your illness to others and create problems in the workplace. In some professions good medical health is essential to effective and safe work and so you must follow the employer's requirements. Read your body signals, and act accordingly especially where mental health issues are concerned. Take medical advice where you need to.

*What will happen when I am going back to work?*

Your employer may have a Sickness Absence Management policy that requires there to be some investigation into why you have been off ill. It is intended to see how and where you need assistance. The employer has a responsibility to consider your problems and do as much as possible to assist and support your return to work. This should not be a punitive process, issuing blame and for example setting capability targets. It will depend how long you have been off and of course if you have had repeated variable length absences. If there is to be a return to work meeting, then we strongly urge that you take your Trade Union Steward or a trusted work-colleague with you. Do not be forced into accepting someone who is chosen by your management. Try to make notes as the meeting progresses or immediately following its conclusion.

*If the process does not go favourably then talk to your Union (if you are a union member) and consider taking a grievance against the manager in question.*

*My GP has signed me as 'fit for some work' what does that mean?*

Fit notes allow doctors to specify conditions for the employee's return to work such as alteration to working hours or duties, for example. The Department of Work and Pensions (DWP) in an exemplary case study involving an employee off work with a stress-related illness gave the example of a note specifying that the employee should avoid contact with customers and that a workplace support network should be provided. A key question is whether a court would consider an employer not following such advice to be in breach of a duty of care and thus enable a work stress case to succeed. It is obviously helpful if the doctor specifies on the 'fit note' that the illness results from 'work-related stress' and employees should ensure as far as possible that these words are used.

There is the obvious problem that the new note is not legally binding on the employer and is essentially advice directed at the patient. However, is it possible that the production of a 'fit' note will prevent an employer arguing that a subsequent work-related stress illness was unforeseeable? This has yet to be tested in the courts.

A further problem is that many GPs will not know the exact workplace roles and tasks and the employers will not understand how a person can come back and do only part of the job.

We would recommend that the Trade Union becomes involved in helping to agree what can and should be done and if necessary then a referral for Occupational Health assessment should be considered necessary for advice.

*I have been off sick for a long time. What can I expect my employer to do?*

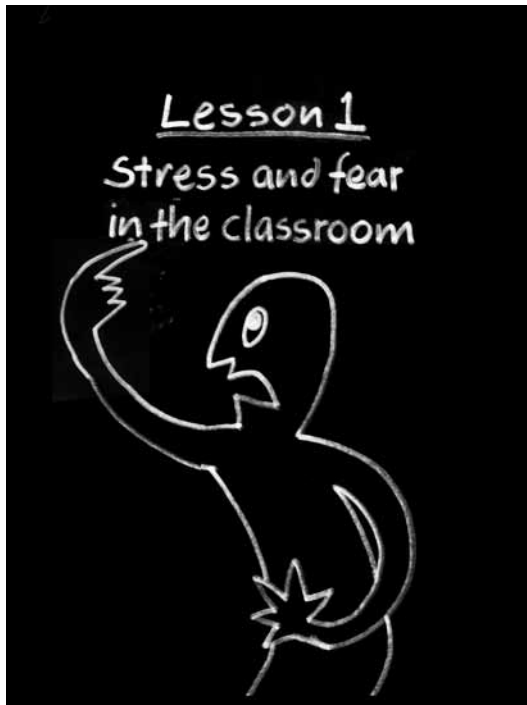
After four weeks of absence you may be referred to the proposed Independent Assessment Service (IAS) for a telephone interview to assess the state of your health and the possibility of a return to work with suitable adaptations. It is essential that you take advice from your Safety Rep or union Steward before the time of the interview. When the interview takes place, tell the truth but do NOT underestimate your health concerns. Answers are likely to be taken at face value so when asked how you are, don't reply 'Fine' if this is not the case.

After long-term illnesses for any reason, be it physical or psychological or indeed following bereavement and family tragedy, the return to work is a challenging situation to contemplate and undertake. It is normal [and to be anticipated] that the employer will want to have assurances that the employee is fit to return. This assessment and any recommendations on how the return is to be effected will come from a formal referral to Occupational Health at the employer's request and expense. You should agree to this and keep copies of all papers, and insist on having a copy of the written report. You can take your Trade Union Representative (preferably) or even a relative or a chosen friend to the appointment if you wish but usually by prior arrangement. Almost certainly there will be a formal return to work meeting to discuss the situation and to receive and consider the report

which will hopefully set out a rehabilitation programme for implementation by the employer. The report will also say whether you are covered by the Disability Discrimination elements of the Equalities Act 2010. This is a signal to the employer that he has certain additional duties in your regard.

You may be placed on light duties and with a phased part-time return to work. This should normally be on full pay and for an agreed period and with regular support and monitoring as necessary. There may also be opportunity for personal confidential mentoring through an agreed third party employee – not usually the line manager, but someone chosen specifically for that role.

Do not attempt to negotiate your own phased return rehabilitation programme – you need trusted help of your choosing and not someone imposed by your managers. Your Trade Union Representative will be ideally placed to ensure that procedures are correctly followed and that you are fairly treated.



## USING THE COURTS

The whole thrust of the work of the Stress Network is to promote ways of eliminating work-related stress and all of its associated harmful effects upon the mental and physical welfare of employees. This is by far and away the best option. However, when employers have neglected to exercise their responsibilities, when internal procedures have failed to resolve problems and when somebody has been damaged as a result, the victim may seek redress through the justice system. Experience has shown that while there have been successful cases, this route is fraught with difficulty, the hurdles facing a complainant are high and the chances of success are not great. The sad truth is that judges have not always been sympathetic to the plight of victims.

In addition the Coalition government's draconian restrictions on the availability of legal aid<sup>55</sup> have added massively to the difficulty of securing justice in this area.

Whilst it must be emphasised that the Stress Network is not in a position to give specific legal advice and advises employees seeking redress to get guidance from their trade union or solicitor, the following sections provide information about legislation that seems to us to have a bearing upon claims for redress in cases of work-related stress.

### Employment law

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Employers must comply with health and safety at work legislation. Under common law, they have a general duty of care to their employees and this duty is an implied term in every contract of employment. If an employer fails to take reasonable care to protect an employee from a foreseeable injury he or she could be found by the civil courts in a negligence action to have breached the 'duty of care' or, in exceptional circumstances be prosecuted in the criminal courts for a criminal offence.

A number of specific acts and regulations are relevant to the issue of work-related stress:

#### *Employment Protection (Consolidation) Act (1978)*

An employee may complain to an Employment Tribunal of wrongful, unfair or constructive dismissal in circumstances where workplace bullying has led him to leave his employment. These employment rights may be dependent on the length of the employee's continuous service.

#### *Working Time Regulations (1998)*

Defines 'working time' and sets maximum limits although there is an opt-out arrangement. Not all workers are covered by these regulations.

#### *Employment Relations Act (1999)*

Amendments to the Employment Rights Act 1996, gave employees the right to 'reasonable' time off to care for dependants and for parental leave. They also provided (amongst other things) for employers to recognise employees' rights to representation at disciplinary hearings which must also be convened at a mutually agreeable time to all parties expected to participate.

<sup>55</sup> <http://www.justice.gov.uk/legal-aid/newlatest-updates/legal-aid-reform>

## *Employment Act 2002 (Disputes Resolution) Regulations (2004)*

This legislation provides for a statutory procedure to enable all workers to raise grievances in the workplace where they have an issue that needs to be addressed by their employer. There is also provision for a statutory procedure to be followed in the event that the employer is contemplating dismissal or action short of dismissal against the employee. Employers will be obliged to ensure that specific procedural steps are taken, and where this is not the case then compensation can be awarded in the Employment Tribunal. Generally speaking before cases which may involve stress allegations can be taken to the Tribunal (e.g. Discrimination, Unfair Dismissal, Constructive Dismissal.) the appropriate Dispute Resolution (Grievance or Dismissal and Disciplinary) procedures must have been complied with. Advice and information about the legal requirements of these procedures can be obtained from Trade Union representatives, ACAS and Citizens' Advice Bureaux.

Actions in relation to the matters above are pursued through the Employment Tribunal system. This process has been made far more difficult and expensive by the Enterprise and Regulatory Reform Act 2013. The coalition government has introduced significant obstacles in the path of complainants seeking redress, including in some cases a lengthening of the qualifying period in employment before action can be taken from one year to two years and a substantial increase in fees that may mean a complainant will need to pay up to £1200 to have his/her case heard. Although at the time of writing of this booklet the trade union UNISON is seeking a judicial review of these provisions,<sup>56</sup> it is clear that increasingly, the law is of little help and in the view of the Stress Network, the best protection for employees is to join a trade union.<sup>57</sup>

## **Anti-discrimination Law<sup>58</sup>**

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### *Equality Act 2010*

The Equality Act 2010, which consolidates and adds to a raft of anti-discrimination legislation, is still fairly new and there is little case law to rely on as yet. However under disability discrimination provisions in the Act, stress may turn out to be the sign of an underlying condition that would amount to a disability. Under the Act, employers are required to make reasonable adjustments to the workplace, such as reducing the employee's workload or pressures on an employee who is under stress. In a similar way under the sex discrimination provisions of the Act if someone is being treated unfairly by, say, a line man-

<sup>56</sup> Initial Judicial Review hearing to be held in October 2013

<sup>57</sup> Refer to ACAS: <http://www.acas.org.uk/index.aspx?articleid=3909>. Also many trade unions have issued advice to members. See also "Justice deferred- a critical guide to the Coalition's employment Tribunal reforms" by David Renton and Anna Macey, available from IER, <http://www.ier.org.uk/publications/justice-deferred-critical-guide-coalitions-employment-tribunal-reforms>

<sup>58</sup> See: ACAS Government Equalities Office [http://www.equalities.gov.uk/equality\\_act\\_2010.aspx](http://www.equalities.gov.uk/equality_act_2010.aspx) and Citizens' Advice Bureaux [http://www.adviceguide.org.uk/england/discrimination\\_e/discrimination\\_about\\_discrimination\\_e/equality\\_act\\_2010\\_discrimination\\_and\\_your\\_rights.htm](http://www.adviceguide.org.uk/england/discrimination_e/discrimination_about_discrimination_e/equality_act_2010_discrimination_and_your_rights.htm)



ager who treats female staff in an overbearing and dominating way, they may be able to argue that such bullying behaviour amounts to sex discrimination. The Act outlaws harassment and victimisation if this arises from one of the 'protected characteristics' under the Act (age, disability, gender re-assignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.) Since harassment and victimisation are well recognised causes of stress, the Act may in the future offer some protection although it should be noted that under the Enterprise and Regulatory Reform Act the Conservative/Liberal Democrat Government has removed the protection for employees against third party harassment, claiming that this is unfair to employers. The Act also prevents Employment Tribunals from making broader recommendations affecting the wider workforce.

### *Human Rights Act (1998)*

This legislation provides for a range of freedoms for individual people. However, care must be exercised in assessing whether there is any scope to use this legislation as it is not automatic that this law will apply to stress and bullying situations. Further, the legislation only imposes duties on public authorities.

## **Other issues**

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### *Work/Life Balance*

There is now a greater emphasis on 'family-friendly' work polices, and recognition of the need for a proper work/life balance, for all workers at all levels. Those employers who run rough-shod over employees and care little for their wellbeing are open to challenge, although it is fair to say that the legal protections for employees in relation to family friendly and work-life balance issues are weak.

### *Whistle-blowers*

Employees who criticise or draw attention to their employer's unsafe practices at work have some limited protections in law if someone's health and safety is in danger; there is risk of damage to the environment; a criminal offence is being committed; the company isn't obeying the law in other respects (like not having the right insurance) or the organisation is attempting to cover up wrongdoing. The employee must not be acting out of malice and must believe that the disclosure is in the public interest.<sup>59</sup>

## **Taking a Stress Action to Court**

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Please note that the Network does not provide any direct and detailed legal advice, representation or guidance. These notes are merely an assessment based on knowledge openly available on the interpretations of legal cases and precedents. It is essential that independent legal advice is taken in the event of legal action being contemplated.

<sup>59</sup> For a full explanation of the law in this area see: <https://www.gov.uk/whistleblowing/overview>

Despite an array of statutes it has proved very difficult, indeed nigh on impossible, for workers to establish employer liability for their stress-related illnesses. Whereas courts are used to dealing with claims for damages in the case of physical injury sustained at work, where they can both discern the injury and link it with a discrete incident in the workplace, or with some cases of work-related ill health, they have proven very unwilling to accept easily the link between working conditions in the broadest sense and mental illness.

Courts have established very restrictive conditions in stress cases. For a case to succeed the employee must be able to prove all of the following:

*That the employer should have foreseen the injury.*

It is essential that the employee has made the employer aware that he/she is suffering from stress-related ill-health caused by work. If the employer subsequently fails to take action to protect the employee and the ill health re-occurs then the first hurdle in the way of a successful action may have been overcome.

The problem here is that many workers are afraid to admit to employers that they are suffering from a mental condition fearing that they leave themselves open to capability procedures and prejudicial treatment. Research has shown that in the vast majority of cases workers on stress-related sick leave lie about the nature of their illness.

*That the employer failed in his duty of care.*

The law requires employers, as far as is reasonably practicable to provide a safe system of work for their employees and to protect them from foreseeable risks to their health and safety. The problem here is that the court, in making a judgement about whether the employer has acted reasonably, will feel it necessary to weigh the risk of mental injury caused by work against the 'practicability', including the cost of preventing the risk. Courts have tended to err on the side of the employer.

*That mental injury was caused by the failure of the employer in his duty of care.*

This is possibly the greatest problem of all in pursuing a claim for damages against an employer in a stress case. The onus of proof is on the claimant to establish firstly that he/she is suffering from a clinically recognised health condition and that there is a direct and objective causal link between a failure of the employer's duty of care and the employee's ensuing mental illness. This is extremely difficult and often impossible since there is frequently a complex web of circumstances that has led to the employee's mental ill health.

In the face of such demanding tests, employees suffering from work-related stress illnesses will often face disappointment when told by their Trade Union or solicitor that, following an assessment of their circumstances, their case is judged not viable in law and not capable of being pursued.

## Significant cases

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### *Walker vs. Northumberland County Council, (1995)*<sup>60</sup>

The first notably successful case was that of John Walker [Walker vs. Northumberland CC [1995] IAER 737]. Claimant Walker was a Social Worker subjected to considerable workload related to child abuse cases. Walker duly advised his managers of his high work overload.

“I have been working under great pressure which has been physically and mentally tiring. The point I make in requesting a week off in lieu of an excess of 100 hours overtime, is that I am exhausted and need a break without using up too much annual leave,” he reported two years prior to his initial breakdown.

The employer did carry out a review of working practices which revealed that staff found it difficult to handle work allocations. Shortly after this, Mr Walker suffered his first breakdown. In time he was able to return to duty under an agreement whereby the employer would do what was necessary to prevent any further breakdowns. They failed to adhere to this agreement, causing a second breakdown.

In court despite the warning signs issued by Mr Walker that he was under high stress levels, the employer was found guilty only of the second episode of ill-health. Whilst this was a ground-breaking case, the findings were restrictive, leading to the issue of foreseeability being a key feature of such claims.

### *Hatton vs. Sutherland (2002)*<sup>61</sup>

Four stress cases, including that of teacher MS Hatton had been successful in County Court with damages awarded, but were appealed under the collective title of Hatton vs. Sutherland, whereby the Courts sought to clarify the law in depth. Lady Justice Hale in her judgment set out 16 propositions in Para 43 of the judgment. These propositions subsequently had the effect of reducing levels of success in many further cases. Significant barriers were now raised related to the issue of foreseeability and causation. The matter of foreseeability has become the key threshold test, and the question as to whether it was reasonably foreseeable that a claimant carrying out particular work was liable to suffer psychiatric illness as opposed to simple emotional responses which were and could be attributable to work-stresses caused by any breach of duty of care on the part of the defendant [employer]. The 16 propositions have become of such importance in work-related stress cases that we reproduce them in BOX 8.

### *Barber vs. Somerset County Council (HOL 2004)*<sup>62</sup>

One of the unsuccessful Hatton cases, that of another teacher Mr Barber in Somerset, was further appealed in the House of Lords on the issue of whether a breach of duty of care had occurred. Barber’s workload increased and caused him stress; following a brief period off he returned having presented a sick note

<sup>60</sup> [http://www.safetyphoto.co.uk/subsite/case%20u%20v%20w/walke\\_v\\_northumberland\\_county\\_c.htm](http://www.safetyphoto.co.uk/subsite/case%20u%20v%20w/walke_v_northumberland_county_c.htm)

<sup>61</sup> <http://www.bullyonline.org/action/hatton.htm>

<sup>62</sup> <http://www.publications.parliament.uk/pa/ld200304/ldjudgmt/jd040401/barber-2.htm>

## Hatton vs. Sutherland (2002): 16 Propositions

- 1 There are no special control mechanisms relating to work-related stress injury claims; ordinary principles of employers' liability apply.
- 2 The "threshold" question is whether this kind of harm to this particular employee was reasonably foreseeable.
- 3 Foreseeability depends on what the employer knows or should know about the individual employee. Unless aware of a particular problem or vulnerability, the employer can usually assume that the employee can withstand the normal pressures of the job.
- 4 The test is the same for all occupations; no occupation is to be regarded as intrinsically dangerous to mental health.
- 5 Reasonable foreseeability of harm includes consideration of:
  - the nature and extent of the work;
  - whether the workload is much greater than normal;
  - whether the work is particularly intellectually or emotionally demanding for that employee;
  - whether unreasonable demands are being made of the employee;
  - whether others doing this job are suffering harmful levels of stress;
  - whether there is an abnormal level of sickness or absenteeism in the same job or department.
- 6 The employer can take what the employee tells it at face value, unless it has good reason not to and need not make searching enquiries of the employee or his/her medical advisors.
- 7 The duty to take steps is triggered by indications of impending harm to health, which must be plain enough for any reasonable employer to realise it has to act.
- 8 There is a breach of duty only if the employer has failed to take steps that are reasonable in the circumstances, bearing in mind the magnitude of the risk of harm occurring, the gravity of that harm, the costs and practicability of preventing it and the justifications for running the risk.
- 9 The employer's size, scope, resources and demands on it are relevant in deciding what is reasonable (including the need to treat other employees fairly, for example in any redistribution of duties).
- 10 An employer need only take steps that are likely to do some good; the court will need expert evidence on this.
- 11 An employer that offers a confidential advice service, with appropriate counselling or treatment services, is unlikely to be found in breach of duty.
- 12 If the only reasonable and effective way to prevent the injury would be to dismiss or demote the employee, the employer will not be in breach in allowing a willing employee to continue working.
- 13 In all cases, it is necessary to identify the steps that the employer could and should have taken before finding it in breach of duty of care
- 14 The claimant must show that that breach of duty has caused or materially contributed to the harm suffered. It is not enough to show that occupational stress caused the harm; it must be linked with the breach.
- 15 Where the harm suffered has more than one cause, the employer should only pay for that part caused by its wrongdoing, unless the harm is indivisible.
- 16 Assessment of damages will take account of pre-existing disorders or vulnerability and the chance that the claimant would have suffered a stress-related disorder in any event.

stating only “Stress”. No action was taken to reduce workload and sometime later he advised senior managers of his situation, shortly followed by a breakdown from which he was never able to return to teaching.

Generally upholding the Hale propositions in the Hatton case, the Lords rejected pleas by the employer that resources were stretched and found that “at very least the school should have taken the initiative making relevant enquires of Barber as to his wellbeing and making adjustments to work to support his return.”

Where employers know that stress-related illness has occurred they should regard themselves under positive duty to initiate and take action. Early intervention is desirable.

After Barber, cases of Stress claims reverted to the Court of Appeal, generally covered by the lead case of Hartman vs. South Essex Mental Health Trust [2005] IRLR 293. The outcome was mostly to reinforce the 16 Hatton principles, reconfirming their validity including the basic threshold question.

Pretty well all cases therefore rely on the Hale 16 Propositions in Hatton, but employers are now obliged to react to employees’ problems where they are highlighted and known.

Two more recent cases have brought a new emphasis on Lord Walker’s judgment in the Barber case.

*Hiles vs. South Gloucestershire NHS Primary Care Trust [2007] and Daw vs. Intel Corporation UK Ltd [Court of Appeal] 2007 2 AER 126*

Both claimants had broken down emotionally in front of line managers, and subsequently suffered breakdowns. In each case the judgements held that breaking down in tears in front of a manager was sufficient signal to the employer to investigate cause, thus allowing for suitable steps to be taken to prevent breakdowns.

In Daw the issue of whether the employer had a counselling provision was sufficient to cover duty of care was closely examined. Intel had such a service, which was available to Daw. The court however found that this was in itself insufficient to fully discharge employer duty over the provision of a safe working environment, and the provision of such a service alone was not a reason to absolve other duties or relieve the employer of liability.

Both cases linked back to the Judgement in Barber through his Lordship’s words:- “a prudent employer faced with knowledge of work overload (over a given period and known to be increasing) such that the employee needed to take time off work for stress, would have instigated an investigation into the employee’s situation to secure improvements as necessary.”

The tears of the two Complainants were not the normal reaction to a work situation and should have been looked into.

*Dickens vs. O2 [Court of Appeal 2008].*<sup>63</sup>

Further steps toward a higher level requirement for employers to react emerged following this case. Complainant Dickens was a finance officer for O2, and she had repeatedly reported workload issues and high stress levels commencing in April 2002. In a subsequent appraisal meeting [end of May] having had other requests to change role ignored, her pleas were again repeated and she stated that she felt she needed a sabbatical. Agreement was reached that she be referred to Occupational Health, but this never happened and after three months she went off sick [June], never able to return. In judgement, Lady Smith indicated that the April signs of trouble were sufficient to have indicated foreseeability of injury. This precedent now sets the Hatton judgment in a different light, drawing on Daw vs. Intel to show that employers have a duty to respond as soon as they have knowledge of health problems. The correct action would have been to send Dickens home at the end of May pending report from Occupational Health to give advice on necessary actions.

### Lessons for employees

In the light of the judgements detailed earlier, employees who feel themselves at risk should:-

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Log, record and report all instances of work overload and stress situations, keeping written records and copies of emails, notes and letters to their employers/managers;

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In case of discrete bullying incidents leading to ill health ensure that a report is made to the employer and attempt to register the incident on Form BI100 with the DWP. Such a registration will not always necessarily be accepted.

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Maintain regular dialogue with managers and TU Stewards/Reps and relevant managers;

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Ensure that all medical notes are copied and retained prior to handing in, and understand that the word "Stress" alone is insufficient. The absence due to stress must be confirmed as work-related by the GP.

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Record any and all references to Occupational Health and retain copies of referral forms, reports and notes of discussions. Where possible when attending Occupational Health appointments, employees should be accompanied preferably by a Trade Union caseworker or if not a trade union member, by a chosen family member. Preparatory notes should be made and discussion recorded in writing to supplement and verify or challenge the eventual report.

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Take and retain notes of all meetings, both the official records taken by managers/clerical staff, and notes taken at meetings by the employee's own representative.

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Insist at all meetings that their statements be recorded in writing, especially that they are being affected by the work problems they have identified.

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BOX 9

<sup>63</sup> Dickens v02 PLC [2008] EWCA Civ 1144; [2009] IRLR 58



## Lessons for employers

All of the above cases have common threads:-

In all the above cases employee problems are reported and largely inadequate steps are taken to tackle them. Breakdown occurs, often followed by unsupported return to duty which can then lead to second more serious breakdowns and possible inability to return to the workplace ever again.

At all such stages the employer should be aware of the issues raised and take the cry for help as serious and not just wait for the calamity to happen.

Stress-related illnesses are not always entirely work-linked and home and family issues can often impact on the ability of the employee to fulfil their job. Where it is known that background issues are coming into play, a good employer will seek to acknowledge those difficulties and be as supportive as possible. If support and assistance is identified as appropriate then it should be provided at the earliest opportunity.

Bullying, harassment and victimisation are common in many workplaces, but all too often regarded as good effective and firm management. Bullying contributes to some 35% or more of stress-related illnesses. Employers have a duty of care to ensure that bullying is identified and stopped, and failure to do so may lead to breach of that duty of care. Any identified humiliation or distress caused to employees requires urgent action.

Employer responsibility extends to recognition of the existence of problems and he should act by:-

Carrying out a full and competent risk assessment

Making references to Occupational Health for suitable advice

Consideration of appropriate adjustments to work and job description

Stress should not be treated differently from other work-health issues – the objective is NOT to cause illness as a result of working practices.

## SUMMARY: WHAT TO DO ABOUT STRESS AT WORK:



### **STRESS** bullying and harassment

- Explain your situation and experiences to your line manager.
- Are stress and bullying policies in place?
- Counselling, Employee Assistance and other support.
- Grievance, Dispute resolution or Mediation?
- Legal, regional or national trade union advice.
- If requested agree to see Occupational Health.
- Employment Tribunal or Personal Injury claims?

### **STRESS** sickness

- Counselling, Employee Assistance and other support.
- If need be, make your manager and your TU Steward aware of any caring or home issues.
- Make sure your GP certificate says work-related stress.
- If requested agree to see Occupational Health.
- Sickness Absence Review, return to work with support.



### **STRESS** TU action

- Explain your situation and experiences to your line manager.
- Report your concerns to your TU Steward or Safety Rep.
- Have the issue raised informally at Branch Meetings.
- Obtain absence data, audits and surveys.
- Refer to Safety Committee or Shop Steward Committee.
- Raise collective issues with management.
- Appropriate Risk Assessments and Control Measures.

### **REMEMBER**

- Always keep a log of all meetings, conversations, letters and emails.
- Take a TU representative or family member with you and ensure you have a copy of the proceedings.



## THE INTERNATIONAL DIMENSION

Work-related stress is a problem not only for British workers but for workers throughout the world. In developed economies the psychological pressures on workers are similar to those found in the UK with similar causes and similar effects. The march of globalisation has enabled developed countries to export their health and safety problems, including health threatening working conditions to developing countries.

In the European Union, work stress is recognised as one of the biggest health and safety challenges of the present day. Nearly one in four workers is affected by it, and probably between 50% and 60% of all lost working days are related to it. This represents a huge cost in terms of both human distress and impaired economic performance. In 2002, the annual economic cost of work-related stress in the EU (15 countries) was estimated at 20 billion Euros. A Europe wide survey in 2009<sup>64</sup> covering all EU countries plus Croatia, Turkey, Switzerland and Norway found that awareness of the issue was greatest in northern European countries. Almost 80% of managers interviewed said that work stress was of major or some concern listing time pressures; dealing with difficult customers/clients/pupils; poor communication and job insecurity as major factors. 40% said that violence was an important issue. Despite this perception of psychosocial risks, less than 30% of workplaces had procedures in place to deal with them.

In recognition of the severity of the problem, the member states agreed in 2004 the voluntary Framework Agreement on Work Related Stress and in 2007 the Framework Agreement on Violence and Harassment at Work in which member states undertook to take steps to identify workplace stress and issues of harassment and violence in the workplace according to normal national arrangements. If a problem of work-related stress or violence/harassment was identified, member states undertook to take action to prevent, eliminate or reduce it. The responsibility for determining the appropriate measures would rest with the employer but measures would be carried out with the participation and collaboration of workers and/or their representatives. In 2008 the UK reported compliance because of the introduction of the Management of Stress at Work advisory document. In the opinion of the Stress Network it is debatable whether such a weak policy response adopted by so few employers and hardly enforced at all is an adequate response to the UK's obligations under the Framework Agreements.

According to Professor Chandola<sup>65</sup> many countries in Europe, unlike the UK, already have legislation concerning the organisation of work and working conditions. Legislation in 13 Member States, plus Norway and Iceland, addresses psychosocial risks to varying extents and using different terms. In Bulgaria, Denmark, Estonia, the Netherlands, Iceland, Italy, Portugal, Finland, Sweden and Norway, employers are generally obliged by law, on the basis of the preventive

<sup>64</sup> 2009, European Survey of Enterprises on New and Emerging Risks (ESENER) under the aegis of the European Agency for Safety and Health at Work (EU-OSHA) (EU-OSHA and the UK Data Archive bear no responsibility for the further analysis or interpretation of this research.)

<sup>65</sup> British Academy, "Stress at Work" Professor Tarani Chandola, October 2010

approach set out in the Framework Agreement on Work Related Stress, to assess and take measures against or to actively address psychological and social factors, psychosocial risks, mental workload, or other aspects associated with stress that can have adverse effects on workers' health. In others, the legal framework furthermore defines or gives examples of risk factors and defines areas of intervention (Hungary, Latvia, Lithuania, and Slovakia)<sup>66</sup>. For example, in the Norwegian Working Environment Act there are a number of provisions concerning the organisation of the workplace and the work environment and in the Belgian Royal Decree (May 2007) every employer is obliged to analyse and identify all situations which might entail a psychosocial burden such as work content, working conditions and work relationships.

Workers in some European countries have lower work stressors in terms of low job demands and higher job control than UK workers (e.g. Netherlands, Luxembourg and Belgium), and also in terms of having higher job control and higher job demands (such as Norway, Denmark and Finland). In France there is an industry wide agreement on stress at work between employers and trade unions which builds on the Framework Agreement. The UK National Work Stress Network argues that statutory underpinning in the UK, within the framework of the Health and Safety at Work Act 1974 and with appropriate sanctions for non-compliance, is essential if the serious and growing problem of work-induced stress illness is to be confronted in an effective way. In fact 91% of managers and employers in the 2011 ESENER pan-European survey<sup>67</sup> cited the necessity of complying with legal obligations as far and away the most important driver for addressing work stress health and safety issues.

In November 2012, workers across Europe were asked by the polling organisation Ipsos-MORI about their perception of the problem of work-related stress in their countries. The poll was conducted on behalf of the European Agency for Safety and Health at Work (EU-OSHA) and the results published in May 2013. One of the questions asked was: "How common, if at all, are cases of work-related stress in your workplace?" The results are shown in the table in Appendix 3. No doubt the high scores of countries such as Cyprus, Greece, Portugal and Italy are attributable to the serious economic situation in which they find themselves and to the consequential severe austerity measures and high levels of unemployment. More difficult to explain are the relatively high scores of some of the Nordic countries who on previous polls have been shown to be tackling successfully problems of work-related stress. It could be that these high scores are related to the greater awareness and sensitivity to the issue which exists in these countries. The UK fairs relatively well in the survey so far as worker perceptions are concerned but this should not blind us to the fact that a situation in which 44% of employees report that cases of work-related stress in their workplaces are very or fairly common remains extremely serious and requires the kind of action the Stress Network demands.

<sup>66</sup> EUROPEAN COMMISSION STAFF WORKING PAPER: Report on the implementation of the European social partners' Framework Agreement on Work-related Stress (24.2.2011)

<sup>67</sup> EUROPEAN COMMISSION STAFF WORKING PAPER: Report on the implementation of the European social partners' Framework Agreement on Work-related Stress (24.2.2011)

## CONCLUSION

Work Stress is one of the most important health and safety issues to confront workers in the 21st Century (possibly the most important). The campaign in the 20th Century was to reduce the horrifying toll of work-related death, injury and ill health caused by the physical work environment. Years of exhortation failed to persuade employers to tackle these problems voluntarily. The significant turning point was the passing of the Health and Safety at Work Act 1974 and the regulations that flowed from it. Only then, with the threat of legal penalties hanging over them, did employers begin to take seriously the physical safety of their workers. Although this battle has not yet been finally won significant progress has been made and many workers' lives have been saved. The threat now comes from voices on the political right together with some employers' organisations who are having some success in rolling back health and safety law.

We need to learn the lessons of the past and we also need to learn from our international partners when we turn our attention to the scourge of work-induced mental illness. Exhortation to voluntary action and a 'light touch' approach to enforcement in the area of health and safety simply do not work. Employers have their attention focussed on the bottom line and the shareholder interest. Experience tells us that, when faced with a choice between meeting statutory obligations and an invitation to enter into expensive voluntary commitments, it is hardly surprising that most employers choose the former. This is especially the case in the UK where based on the current legal situation, courts have comforted employers with the view that minimum palliative action in the area of mental health is sufficient. Six years after the introduction of the voluntary 'Management Standards for Work Related Stress' and immense efforts to persuade employers to tackle psychosocial problems in the workplace, the voluntary approach has manifestly failed with widespread ignorance of the Standards amongst senior managers, little obvious enthusiasm for their implementation and no evidence to show that in those six years the work-related mental health of workers has improved. Statutory underpinning of the Management Standards for Work Related Stress is now essential either by Regulation under the Health and Safety at Work Act 1974 or at least by their incorporation into an Approved Code of Practice (ACoP). This legislation must be rigorously enforced.

Research in this country and abroad has shown conclusively that health and safety improvements are greatest where the employee voice is clearly and loudly heard and most of all where that voice is expressed through a trained trade union representative or a workplace Safety Committee. It is essential in the view of the Stress Network that the rights of such individuals in the workplace should be preserved and strengthened, their role applauded and their rights to training and appropriate facilities improved. This is an investment that will save lives.

Organisational culture, which embraces concepts of 'organisational justice' and 'dignity at work', is a key factor in determining how successful an organisation is in managing work-related stress. Organisational culture is often very strong and difficult to change. A healthy culture will be one where communication, support,

and mutual respect are the norm. This would include attention to communications and staff welfare for example. So using the Management Standards approach is a key way of influencing, challenging and changing the organisational culture from one which reacts to individual or team stress problems to one in which the employers seek to prevent these problems happening in the first place.

**In order that people may be happy in their work these three things are needed...**

- they must be fit for it;
- they must not do too much of it; and
- they must have a sense of success in it. (John Ruskin, 1871)



## APPENDIX 1 ABOUT THE STRESS NETWORK (WORKSTRESS.NET)

### Origins

The UK National Work-Stress Network was established following the launch of the European Work-Stress Network at the Rimini Hazards Conference (1994). The National Hazards Campaign<sup>68</sup> Conferences in Liverpool (1995) and Bradford (1996) saw the opportunity to expand the national network here in the UK. From the first Stress Conference organised by the Network emerged a Steering Group which continues to direct its work. The Steering Group consists of volunteers and is open to anybody interested in ridding workplaces of the scourge of work-related stress illnesses.

The Network consists of many hundreds of like-minded people, some of whom have suffered the consequences of work-related stress. Amongst these are experienced caseworkers, Counsellors, Occupational Health Workers, trade union officials at all levels, and those who are just determined to see effective management which recognises the needs of the workforce as well as of business. However, the Network is not equipped to provide individual casework support or representation – that is the role of TU officers or officials, medical experts and where appropriate, lawyers.

### Aims

The UK National Work-Stress Network campaigns for:

- The stricter control and management of stress in the workplace, backed up by effective regulation and enforcement.
- The recognition of work-related stress illness as an industrial injury.
- The recognition of bullying, victimisation, harassment or discrimination as serious workplace hazards, which employers have a duty to prevent.
- Dignity at work within a caring supportive culture.

The UK National Work-Stress Network:

- Attempts to raise awareness of the problem of stress in the workplace.
- Assists groups of workers in tackling workplace stress by the provision of training workshops and seminars.
- Works with other organisations seeking to eliminate bullying, harassment and all aspects of work-related stress.

### The services we provide include:

- this booklet;
- our popular information-packed website ([www.workstress.net](http://www.workstress.net)) including regular e-newsletters (All free to copy and circulate);
- the provision of workshops, seminars and speakers.

### Activities

Apart from constant lobbying of opinion formers and decision makers, the Network:

- organises an annual residential conference with expert speakers and workshop activities;
- campaigns to secure protection for the mental health of workers through involvement with the Hazards Campaign and in conjunction with the TUC, UK trade unions and European organisations;
- plays a significant role at Hazards Conferences in the UK and Europe.
- Maintains a presence on Twitter (@workstressuk) and Facebook (search for UK National Work Stress Network or use the link in the footnote.)<sup>69</sup>

### Funding

The Network is NOT a membership organisation with participation available only to those who pay a subscription. Anybody is welcome to join the Steering Group and to help drive the campaign forward. Our activities are funded solely by very generous donations and sponsorship by individuals, trade union branches and other sympathetic organisations.

### Contact us

To receive more information about how to play an active role in the Network's campaigning work, to contact the Network Co-ordinator, to tell us about your successes in the workplace, to make a donation or to request a workshop/seminar or a speaker, then do please get in touch. Contact us via our website: [www.workstress.net](http://www.workstress.net).

<sup>68</sup> <http://www.hazardscampaign.org.uk/>

<sup>69</sup> <https://www.facebook.com/pages/UK-National-Work-Stress-Network/186041511424635?fref=ts>

### How can I support the network?

- The most direct and useful way you can support the work of the Network is by campaigning in your local area, within your political party, within your trade union and elsewhere for action to be taken to tackle the scourge of work-related stress illness; in the first instance by demanding statutory underpinning in the form of Regulation or HSE Approved Code of Practice (ACoP) for the Management Standards for Work Related Stress.
- If you are able, join the UK National Work Stress Network Steering Group and help to further the campaign. We ask that if possible you secure your own funding.
- Make a donation or ask your union branch, national union, professional association or trade body to make a donation. We try to minimise our administrative and organisational costs as far as possible. However, we are a voluntary organisation and are totally reliant on donations from individuals and organisations. If you would like to make a donation towards these costs we would be extremely grateful. Cheques should be made payable to: UK National Work Stress Network and sent to the Network Treasurer (Name and address available on the website: [www.workstress.net](http://www.workstress.net))
- Ask us to lead a seminar for you and your organisation on the issue of workplace stress or to provide a speaker on the issue of workplace stress at your conference, branch meeting or training event. We ask for a donation and the provision of travel and subsistence expenses. Discuss this with the Network Co-ordinator (Name and address available of the Network website: [www.workstress.net](http://www.workstress.net)).
- Sponsor our website. We provide free reciprocal links for 'not-for-profit' organisations which share our aims and ask for a donation from other businesses/organisations which are not incompatible with those aims. For details of current set-up and renewal fees consult the Network website: [www.workstress.net](http://www.workstress.net).

BOX 11

## APPENDIX 2: SAMPLE WORKPLACE AUDIT FORMS

This form is used on occasions by Stress Network tutors.

For each stress factor indicate the extent to which its presence is an issue for you in your workplace	<i>Risk levels</i>		
	1 Low	2 Medium	3 High
WORK DEMAND			
TARGETS AND DEADLINES			
SHIFT HOURS			
JOB SECURITY			
TIME KEEPING			
WORK-RATE CONTROL			
JOB DEFINITION			
INFORMATION & SUPPORT			
TECHNOLOGY			
WORKPLACE CONSULTATION			
COLLEAGUE ABSENCE			
HOURS, BREAKS, HOLIDAYS			
WORKLOAD MONITORING			
TEAM WORKING			
EXTERNAL FACTORS [e.g. environment]			
PAY/PROMOTION STRUCTURE			
HARASSMENT/BULLYING			
MANAGEMENT ATTITUDE			
PERFORMANCE MANAGEMENT			
WORKLIFE BALANCE			
VIOLENCE, AGGRESSION AND ABUSE			

Individuals are asked to score in the high, medium or low columns as they perceive their situation to be. The more ticks in column three give an indication of where the hotspots are. Other columns may still be important in assessing how the workforce feels that it is under pressure. The statements in the left hand column can be added to, reduced or amended with more specific factors relevant to the individual workplace. Totalling up all responses from a group exercise will give a clear picture of where the worst problems are, and help inform discussions with management.

This form is suggested by HSE

<i>SOURCES OF STRESS</i>	<i>QUESTIONS TO ASK</i>	<i>YES/NO</i>
Demands	Do you feel you have just the right amount of work to do (i.e. not too much or not too little)	
	Have you had sufficient training to do your job?	
	Are there any problems with your work environment?	
Control	Are you able to have some say about how your job is done?	
	Do you feel included in decision making in the team?	
	Do you feel you are using the skills you have got to full effect?	
Support	Do you feel that you get enough support from your line manager?	
	Do you feel you get enough support from colleagues?	
	Do you take the breaks you are entitled to at work?	
	Do you feel you have a healthy work-life balance?	
Relationships	Are you affected by any conflict in the team?	
	Are you subjected to any bullying or harassment at work?	
	Do you feel the team works well together?	
Role	Are you clear about your roles and responsibilities at work?	
	Do you feel that there is any conflict in your role?	
	Do you understand others roles in the team?	
Change	Are you made aware of any changes that are happening at work?	
	Do you understand why the change is happening?	
	Do you understand the impact on your job of any change?	
	Do you feel well supported during change at work?	

The outcomes from this mini survey will help to create a picture from within the workforce or Branch membership, of exactly how the various issues are perceived. The results can be considered alongside other similar audits and a presentation made to managers in the relevant forum to secure commitment to understanding the mental health issues in the workplace, and lead to adoption of the HSE Stress Management Standards approach to a resolution of the problems.



### APPENDIX 3:

Ipsos-MORI European poll conducted on behalf of the European Agency for Safety and Health at Work May 2013

*Interviews conducted 23rd. – 28th. November 2012 by telephone except where indicated by \* in table below, where face to face interviews were held. Weighted sample size: approx. 500 per country except Lichtenstein (200)*

<i>COUNTRY</i>	<i>% answering 'very' or 'fairly' common to the question: "How common, if at all, are cases of work-related stress in your workplace."</i>
Cyprus	88
Greece	83
Slovenia	72
Malta *	62
Slovakia *	62
Portugal	59
Sweden	57
Czech Republic *	55
Italy	55
Norway	53
Bulgaria *	52
Germany	52
Hungary	52
Luxemburg	52
Poland	51
27 countries in EU average	51
ALL countries surveyed	51
Romania *	51
Netherlands	50
Spain	49
France	49
Iceland	47
Belgium	46
Austria	45
UK	44
Finland	44
Latvia	43
Switzerland	43
Ireland	42
Estonia	41
Lithuania	38
Denmark	38
Lichtenstein	27

## SOME PLACES TO LOOK FOR INFORMATION

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Please note that many references to sources of information are contained within the body of the text or in footnotes to this booklet. In addition, the Network website, [www.workstress.net](http://www.workstress.net) contains information and links on all of the issues raised in the booklet. The references below are a sample of the many sources of information available.

### Health and Safety Executive (HSE)

The main resource for information about health and safety regulation and health and safety statistics. The HSE website contains a wealth of useful tools and advice on the management of workplace stress and on many of the issues covered in this booklet.

Publications from: HSE Books, PO Box 1999, Sudbury, Suffolk CO10 2WA  
Direct link to HSE Stress micro-site

The address of your local HSE Office can be found on their website:  
<http://www.hse.gov.uk>

[hsebooks@prolog.uk.com](mailto:hsebooks@prolog.uk.com)

[www.hse.gov.uk/stress](http://www.hse.gov.uk/stress)

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### Trades Union Congress (TUC)

The TUC provides authoritative worker-focused advice on health and safety issues, including stress. It publishes a free health and safety 66 e-zine called RISKS which will be emailed to registered users. Register by visiting the TUC website.

The TUC booklet, *Tackling Stress at Work a TUC guide for Safety Representatives & union negotiators* is a useful resource

TUC publications for Safety Reps, *Hazards at Work* is an essential guide

TUC weekly on-line health and safety bulletin

Trades Union Congress  
Congress House  
Great Russell Street, London,  
WC1B 3LS

Tel: 020 7636 4030  
Fax: 020 7636 0632

<http://www.tuc.org.uk>

[www.tuc.org.uk/risks](http://www.tuc.org.uk/risks)

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### TradeUnions

Trade unions and professional associations can advise on the matters raised in this booklet and many publish occupation-specific advice on workplace stress, bullying and other health and safety issues. They can also assist with individual casework. Addresses of TUC-affiliated unions can be obtained from the TUC, otherwise use a web search engine. The website addresses of unions and professional associations sponsoring this publication can be seen opposite.

ATL: [www.atl.org.uk](http://www.atl.org.uk)  
GMB: [www.gmb.org.uk](http://www.gmb.org.uk)  
NASUWT: [www.teachersunion.org.uk](http://www.teachersunion.org.uk)  
PCS: [www.pcs.org.uk](http://www.pcs.org.uk)  
POA: [www.poauk.org.uk](http://www.poauk.org.uk)  
UNISON: [www.unison.org.uk](http://www.unison.org.uk)  
UNITE: [www.unitetheunion.org](http://www.unitetheunion.org)  
UCATT: [www.ucatt.org.uk](http://www.ucatt.org.uk)

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### Advisory Conciliation and Arbitration Service (ACAS)

ACAS publishes authoritative advice on a range of employment issues. The ACAS/HSE publication, *Stress at Work* is very readable and has worked examples. ACAS also has publications on workplace bullying.

<http://www.acas.org.uk>  
Publications: [acas@ecgroup.co.uk](mailto:acas@ecgroup.co.uk)  
Helpline: 08457 47 47 47

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### Hazards Campaign

The Hazards Campaign is a national network drawing together hazards centres, occupational health projects, health and safety groups, safety reps networks and Trades Union Councils' Safety Committees, specific campaigns and individual health and safety activists from every part of the country. Look on the Hazards Campaign website to see if there is a hazards centre, occupational health project or other group near to you. A copy of the Hazard Campaign Charter can be found on the website.

Hazards Magazine (a vital resource for Safety Representatives)

Hazards Campaign  
c/o Greater Manchester Hazards  
Centre  
Windrush Millennium Centre  
70 Alexander Road  
Manchester M16 7WD  
[www.hazardscampaign.org.uk](http://www.hazardscampaign.org.uk)  
<http://www.hazardscampaign.org.uk/direct/dirindex.htm>

[www.hazards.org](http://www.hazards.org)

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Institute of Employment Rights (IER) Has excellent publications and a very interesting website

[www.ier.org.uk](http://www.ier.org.uk)  
Tel: 0151 207 5265

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Scottish Hazards Campaign Group fulfils a similar role in Scotland to that of the Hazards Campaign in England and Wales.

Scottish Hazards Campaign Group  
c/o Kathy Jenkins  
113 Kingsknowe Road North  
Edinburgh EH14 2DQ  
[www.scottishhazards.co.uk](http://www.scottishhazards.co.uk)

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### Workplace bullying

Apart from the organisations on page 48, which also publish valuable information and advice on bullying, there are a number of useful dedicated sources of information on workplace bullying.

Bully On-line is the bullying information website started by the late Tim Field and now continued by his son and the Tim Field Foundation.

[www.bullyoffline.org](http://www.bullyoffline.org)

The Government website gives some information about the legal issues involved.

[http://www.direct.gov.uk/en/Employment/ResolvingWorkplaceDisputes/DiscriminationAtWork/DG\\_10026670](http://www.direct.gov.uk/en/Employment/ResolvingWorkplaceDisputes/DiscriminationAtWork/DG_10026670)

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### Fit notes

advice can be found on DWP and other Government Websites.

<http://www.dwp.gov.uk/fitnote/>  
[http://www.direct.gov.uk/en/Employment/Employees/Sicknessabsence/DG\\_187161](http://www.direct.gov.uk/en/Employment/Employees/Sicknessabsence/DG_187161)

Hazards Magazine has published advice.

<http://www.hazards.org/workandhealth/fitforpurpose.htm>

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The charity MIND has advice on, amongst other things, Post-Traumatic Stress Disorder.

[http://www.mind.org.uk/help/diagnoses\\_and\\_conditions/post-traumatic\\_stress\\_disorder](http://www.mind.org.uk/help/diagnoses_and_conditions/post-traumatic_stress_disorder)

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### Solicitors

Various firms of solicitors specialising in personal injury and trade union work publish advice on legal aspects of issues covered in this booklet. These are examples; there are others. Appearance in this list does not imply endorsement by the UK National Work Stress Network.

Irwin Mitchell Solicitors

[www.irwinmitchell.com](http://www.irwinmitchell.com)

Thompson's Solicitors Summary, Stress & the Law

<http://www.thompsons.law.co.uk/ltext/I0780001.htm>

Your Legal Rights advice (Slater Gordon)

<http://www.yourlegalrights.co.uk/accidents-and-injury/occupational-stress>

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European Agency for Safety and Health at Work is an agency of the European Union and a useful source of international information on stress at work.

[http://osha.europa.eu/en/topics/stress/index\\_html](http://osha.europa.eu/en/topics/stress/index_html)

The European Framework Agreement on Stress at Work (2004) can be found here.

<http://www.worker-participation.eu/EU-Social-Dialogue/Interprofessional-ESD/Outcomes/Framework-agreements/Framework-agreement-on-stress-at-work>

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Support Networks exist to assist workers in a number of employment sectors. The Teacher Support Network and the FE/HE Support Network are available to workers in the education sector.

Teacher Support Network  
40A Drayton Park, London N5 1EW  
Helplines:  
08000 562561 (England),  
08000 855088 (Wales)  
0800 5642270 (Scotland)  
[www.teachersupport.info](http://www.teachersupport.info)

For FE/HE the web-link is:  
<http://recourse.org.uk>



When we go to work we should be safe in the knowledge that our employers will do all they can to protect us.

Sadly, workers suffer psychological injuries and illness caused by their working conditions every year which can affect their whole life and the lives of their loved ones. If you have suffered from any type of psychological injury or illness as a result of your working conditions, contact Irwin Mitchell for advice and guidance.

## Psychological injury at work legal advice from Irwin Mitchell

To talk to a **specialist advisor** today simply call **free on 08000 23 22 33** or text **CLAIM** to **61993** and someone will call you back

[www.irwinmitchell.com/personalinjury](http://www.irwinmitchell.com/personalinjury)  
Freephone: 08000 23 22 33  
Follow us on Twitter @IMWorkAccident

[www.irwinmitchell.com](http://www.irwinmitchell.com)

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solicitors

# DO YOU GET HAZARDS?



- **Hazards** magazine is the key health and safety resource for union health and safety reps – are you receiving your copy? Safety reps qualify for massive discounts, and the price drops even further the more copies you buy.
- Buying **Hazards** not only helps safety reps do their union job in the workplace, it also helps us continue our essential and groundbreaking campaigning work.
- It was **Hazards** that introduced body mapping and risk mapping to the UK.
- It was **Hazards** that first called for corporate manslaughter rules and jail terms to keep rogue employers in check.
- It was even **Hazards** that coined the expression “the union effect”, spelling out the evidence for safety reps’ lifesaving role. And we have a global impact, including coordinating Workers’ Memorial Day activities worldwide.

Contact the hazards subscription hotline on  
0114 201 4265.  
[sub@hazards.org](mailto:sub@hazards.org)  
[www.hazards.org/subscribe](http://www.hazards.org/subscribe)





[www.workstress.net](http://www.workstress.net)

design: Eve Barker

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