East Sussex Healthcare
NHS Trust

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FOI REF: 25/774

14th November 2025

FREEDOM OF INFORMATION ACT

I am responding to your request for information under the Freedom of Information Act. The answers to your specific questions are as follows:

Would you be able to provide your policy on how to support staff that have experienced violence from service users or their carers please?

Please see attached East Sussex Healthcare NHS Trust's 'Psychological Wellbeing and Safety of Staff Policy'.

Whilst the Trust holds the information requested, in respect of the Trust's Violence and Aggression Policy, it is applying a Section 31(1)(a) exemption to this part of your request, because disclosure of this information under the Act would, or would be likely to, prejudice the prevention or detection of crime.

The Trust considers that the release of this information would make the Trust more vulnerable to crime.

In applying the exemption consideration has been given to the public interest in enabling scrutiny of public sector decision making and the general public interest in accountability and transparency.

In this instance, we consider that the public interest in preventing the prejudice outweighs the public interest in disclosure due to the significant impact successful violence and aggression against staff can have.

Please note that we have redacted the names of staff that no longer work for the Trust from the 'Psychological Wellbeing and Safety of Staff Policy' and also the names of the Trust's IT Systems and are applying Sections 40(2) and 31(1)(a) respectively, please see below:

I can confirm that we hold this information, but it is exempt under section 40(2) of the Freedom of Information Act 2000 – Personal Information of third parties. This is because

this information may allow the identification of individuals and disclosure would breach the principles of the Data Protection Act.

This is an absolute exemption and there is, therefore, no requirement to consider the public interest.

Section 31(1)(a) has also been applied to the names of the Trust IT systems within this document; therefore, these have also been redacted.

Under Section 1(1)(a) of the Freedom of Information Act (FOIA), the Trust can confirm that it holds information relevant to your request, however, we are unable to disclose it for the reasons explained below.

Historically, we would disclose information relevant to the Trust's IT systems, infrastructure and software as part of our transparency agenda under the terms of the Freedom of Information Act (FOIA). However, in light of the recent cyber-attacks on NHS hospitals and the serious impact these have had on patient services and the loss of patient data, we are having to reconsider this approach. Please see several links to news articles about these recent cyber incidents provided below for your information.

- *NHS England — London » Synnovis Ransomware Cyber-Attack*
- *NHS England confirm patient data stolen in cyber attack - BBC News*
- *Merseyside: Three more hospitals hit by cyber attack - BBC News*

As a result of these attacks, thousands of hospital and GP appointments were disrupted, operations were cancelled, and confidential patient data was stolen which included patient names, dates of birth, NHS numbers and descriptions of blood tests.

When we respond to a Freedom of Information request, we are unable to establish the intent behind the request. Disclosure under the FOIA involves the release of information to the world at large, free from any duty of confidence. Providing information about our systems or security measures to one person is the same as publishing it for everyone. While most people are honest and have no intention of misusing information to cause damage, there are criminals who look for opportunities to exploit system weaknesses for financial gain or to cause disruption.

In the context of the FOIA, the term ''public interest'' does not refer to the private or commercial interests of a requestor; its meaning is for the "public good". The Trust receives a significant number of requests each year regarding our IT systems, infrastructure and cyber security measures. Most of these requests are commercially driven and serve no direct public interest. Information relevant to our IT portfolio is often requested by consultancy companies who then pass on this information to their client base. Many of these requests are submitted through the FOI portal whatdotheyknow.com who publish our responses, making this information available to an even wider audience.

As a large NHS Trust we hold extensive personal data relevant to our patients and staff, much of which is considered very sensitive. A lot of this information is held electronically on various administration and clinical systems. We have a duty under the Data Protection Act 2018 and the UK GDPR to protect this personal information and take all necessary steps

to ensure this data is kept safe. This means not disclosing information that could allow criminals to gain unlawful access to our systems and infrastructure. The Trust can be heavily fined should it be found to have acted in a negligent way which results in a personal data breach. We need to demonstrate that we comply with our legal obligations under data protection and freedom of information legislation, but we must be careful that too much transparency does not result in harm to our patients or staff, or cause disruption to our services.

Moreover, under the Network and Information Systems (NIS) Regulations Act 2018, operators of essential services such as NHS organisations like ours have a legal obligation to protect the security of our networks and information systems in order to safeguard our essential services. By releasing information that could increase the likelihood or severity of a cyber-attack, the Trust would fail to meet its security duties as stated in section 10 of the Network and Information Systems Regulations 2018. Should we not comply with these requirements regulatory action can be taken against the Trust. Further information about the Network and Information Systems (NIS) Regulations Act 2018 can be found here – The Network and Information Systems Regulations 2018: guide for the health sector in England - GOV.UK

Your request asks for policy documents which unfortunately mention specific details regarding our IT Systems which, for the reasons explained above, would be inappropriate to release into the public domain. If disclosed, it is possible that patient data as well as other confidential information would be put at risk. Such disclosure could also impact on the security of our systems and result in serious disruption to the health services we deliver to the local community. Section 31(1)(a) of FOIA provides that information is exempt if its disclosure would, or would be likely to, prejudice (a) the prevention or detection of crime. In this case, disclosure would be likely to prejudice the prevention of crime by enabling or encouraging malicious acts which could compromise the Trust's IT systems and infrastructure. The Trust's capacity to defend itself from such acts relates to the purposes of crime prevention and therefore section 31(a) exemption is applicable in these circumstances. For these reasons, the Trust considers disclosure of the information you are seeking to be exempt under section 31(1)(a) [*law enforcement*] of the FOIA and the names of the systems within the policy is being withheld. The full wording of section 31 can be found here: Freedom of Information Act 2000

Section 31 is a *qualified* exemption and therefore we must consider the prejudice or harm that may be caused by disclosure of the information you have requested, as well as apply a public interest test that weighs up the factors in maintaining the exemption against those in favour of disclosure.

In considering the prejudice or harm that disclosure may cause, as explained should the Trust release information into the public domain which draws attention to any weaknesses relevant to the security of our systems or those of a supplier, this information could be exploited by individuals with criminal intent. Increasing the likelihood of criminal activity in this way would be irresponsible and could encourage malicious acts which could compromise our IT systems or infrastructure, result in the loss of personal data and/or impact on the delivery of our patient services. We consider these concerns particularly relevant and valid considering the increasing number of cyber incidents affecting NHS systems in recent years and the view by government, the ICO and NHS leaders that the threat of cyber incidents to the public sector is real and increasing.

- Organisations must do more to combat the growing threat of cyber attacks | ICO

In the Government's Cyber Security Strategy 2022-2030, the Chancellor of the Duchy of Lancaster and Minister for the Cabinet Office states on page 7:
"Government organisations - and the functions and services they deliver - are the cornerstone of our society. It is their significance, however, that makes them an attractive target for an ever-expanding army of adversaries, often with the kind of powerful cyber capabilities which, not so long ago, would have been the sole preserve of nation states. Whether in the pursuit of government data for strategic advantage or in seeking the disruption of public services for financial or political gain, the threat faced by government is very real and present.

Government organisations are routinely and relentlessly targeted: of the 777 incidents managed by the National Cyber Security Centre between September 2020 and August 2021, around 40% were aimed at the public sector. This upward trend shows no signs of abating."

With this in mind, we then considered the public interest test for and against disclosure. It should be noted that the public interest in this context refers to the public good, not what is 'of interest' to the public or the private or commercial interests of the requester. In this case we consider the public interest factors in favour of disclosure are:

- Evidences the Trust's transparency and accountability
- Provides information relevant to the IT systems and applications the Trust uses
- Reassures the public and partners that the Trust procures these systems in line with Procurement legislation
- Reassures the public and partners that the Trust's IT infrastructure and systems are secure

Factors in favour of withholding this information are:

- Public interest in crime prevention
- Public interest in avoiding disruption to our health services
- Public interest in maintaining the integrity and security of the Trust's systems
- Public interest in the Trust avoiding the costs associated with any malicious acts (e.g. recovery, revenue, regulatory fines)
- Public interest in complying with our legal obligations to safeguard the sensitive confidential information we hold

In considering all of these factors, we have concluded that the balance of public interest lies in upholding the exemption and not releasing the information requested. Although disclosure would provide transparency about our software systems and IT infrastructure, this is outweighed by the harm that could be caused by people who wish to use this information to assess any vulnerabilities in our security measures and consequently use

this information for unlawful purposes. Cybercrime can not only lead to major service disruption but can also result in significant financial losses. As a publicly funded organisation, we have a duty for ensuring our public funding is protected and spent responsibly. Moreover, as a public body the Trust must demonstrate that it keeps its confidential data and IT infrastructure safe and complies with relevant legislation, but at the same time we must be vigilant that transparency does not provide an opportunity for individuals to act against the Trust. In considering the impact that recent cyber-attacks have had on NHS services, including the cancellation of thousands of patient appointments and procedures as well as the loss of confidential patient data, we consider the overriding public interest lies in withholding this information. The private or commercial interests of a requester should not outweigh the public interest in protecting the integrity of our systems and continuity of our essential patient services. Although we appreciate there may be legitimate intentions behind requesting this information, we must take a cautious approach to requests of this nature and appreciate your understanding in this matter.

It is important to note that the Trust and its commissioning partners are required to follow very specific rules when procuring equipment or services. Information about procurement and tendering can be found on our website –
Governing documents, incorporating: Standing Orders, Standing Financial Instructions, Scheme of Delegation.

To contact the Procurement Service, please email - esht.procurement@nhs.net

If I can be of any further assistance, please do not hesitate to contact me.

Should you be dissatisfied with the Trust's response to your request, you have the right to request an internal review. Please write to the Freedom of Information Department (esh-tr.foi@nhs.net), quoting the above reference, within 40 working days. The Trust is not obliged to accept an internal review after this date.

Should you still be dissatisfied with your FOI request, you have the right of complaint to the Information Commissioner at the following address:

The Information Commissioner's Office
Wycliffe House
Water Lane
Wilmslow
Cheshire SK9 5AF

Telephone: 0303 123 1113

Yours sincerely

Freedom of Information Department
esh-tr.foi@nhs.net

East Sussex Healthcare NHS Trust

Psychological Wellbeing and Safety of Staff Policy (Formerly stress and mental wellbeing)

Document ID:	830
Version:	V3.1
Ratified by:	Clinical Documentation and Policy Ratification Group
Date ratified:	13 December 2022
Name of author and title:	Liz Lipsham, People Potential Manager, Engagement and Wellbeing
Date originally written:	April 2012
Date current version was completed:	July 2022
Name of responsible committee/individual:	Health & Safety Steering Group
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Target audience:	All ESHT employees
Compliance with CQC	Good Governance
Compliance with any other external requirements (e.g. Information Governance)	Health & Safety Executive. (2022). *What are the Management Standards?* Available from What are the Management Standards? - Stress - HSE NHS. (2020) *NHS People Plan*. Available from NHS England » Online version of the People Plan for 2020/2021 NHS. (2022) *NHS People Promise.* Available from NHS England » The Promise NICE. (2022) *Mental Wellbeing at Work*. Available from Mental wellbeing at work (nice.org.uk) World Health Organisation. (2020) *Doing What Matters in Times of Stress. An Illustrated Guide.* Available from: Doing What Matters in Times of Stress (who.int)
Associated Documents:	• ESHT People Strategy • Trust Health and Safety Policy • Dignity & Respect at Work Policy • Violence & Aggression Policy • Resolution Procedure • Freedom to Speak Up; Raising Concerns (whistleblowing) Policy • Attendance Management Policy • Flexible Working Policy • Agile Working Policy

Version Control Table

Version number and issue number	Date	Author	Reason for Change	Description of Changes Made
V1.0 2012151	April 2012	[redacted]	New policy for merge of Trusts	
V1.1 2012201	September 2012	[redacted] & Nicky Creasey	Minor changes. Approved by Chair, Health and Safety Steering Group	Updated 25/04/2013 following meeting with Moira Tenney and Paula Hunt
V1.2 2013120	May 2013	[redacted] & Nicky Creasey	Review and update required – Minor changes request for HSSG chairs action to approve – completed	Additions to monitoring table and text
V1.3 2013127	May 2013	[redacted] & [redacted]	Additional review following NHSLA requirements for level 2. Minor changes. Chairs action to approve 29th May – completed.	Requirement for annual departmental assessments. Additional audit standard and reporting requirements
V1.4	April 2015	Nicky Creasey following email confirmation from OH – [redacted] Dec 2014 no change to the policy	Review date and monitoring tool	Minimal corrections only
V2	March 2019	Liz Lipsham with Health & Safety representation	Rewrite to include a different approach to undertaking stress risk assessments and combining team and individual stress risk assessment templates	Agreement on recording and reporting of team stress risk assessments and content of policy
V2.1	Oct 2019	Liz Lipsham		Minor amendment to working in Appendix E 3.5 and 4.7
V2.2	June 2022	Liz Lipsham	This needs a full review, extension from May 22 to December 2022	Extended the review date
V3	July 2022	Liz Lipsham	Expiry date reached	Review of content to demonstrate current support available for staff. Change to title
V3.1	March 2023	Liz Lipsham	Update to Appendix C	Appendix C has been changed

Consultation Table

This document has been developed in consultation with the groups and/or individuals in this table:

Name of Individual or group	Title	Date
All members	OD, Staff Engagement & Wellbeing Senior Leads	Virtual agreement August 2022
Steve Aumayer	Chief People Officer	Virtual agreement August 2022
[redacted]	Deputy Director or Culture	Virtual agreement August 2022
Ruth Agg & Dominique Holliman	Freedom to Speak up Guardians	Virtual agreement August 2022
All members	Occupational Health Governance Group	Virtual agreement August 2022
All members	Staff Networks	Virtual agreement August 2022
All members	Health and Safety Steering Group	Aug 2022 Final ratification Nov 2022
All members	Workforce & People Policy Group	Sept 2022
All members	Policy Ratification Group	Dec 2022

This information may be made available in alternative languages and formats, such as large print, upon request. Please contact the document author to discuss

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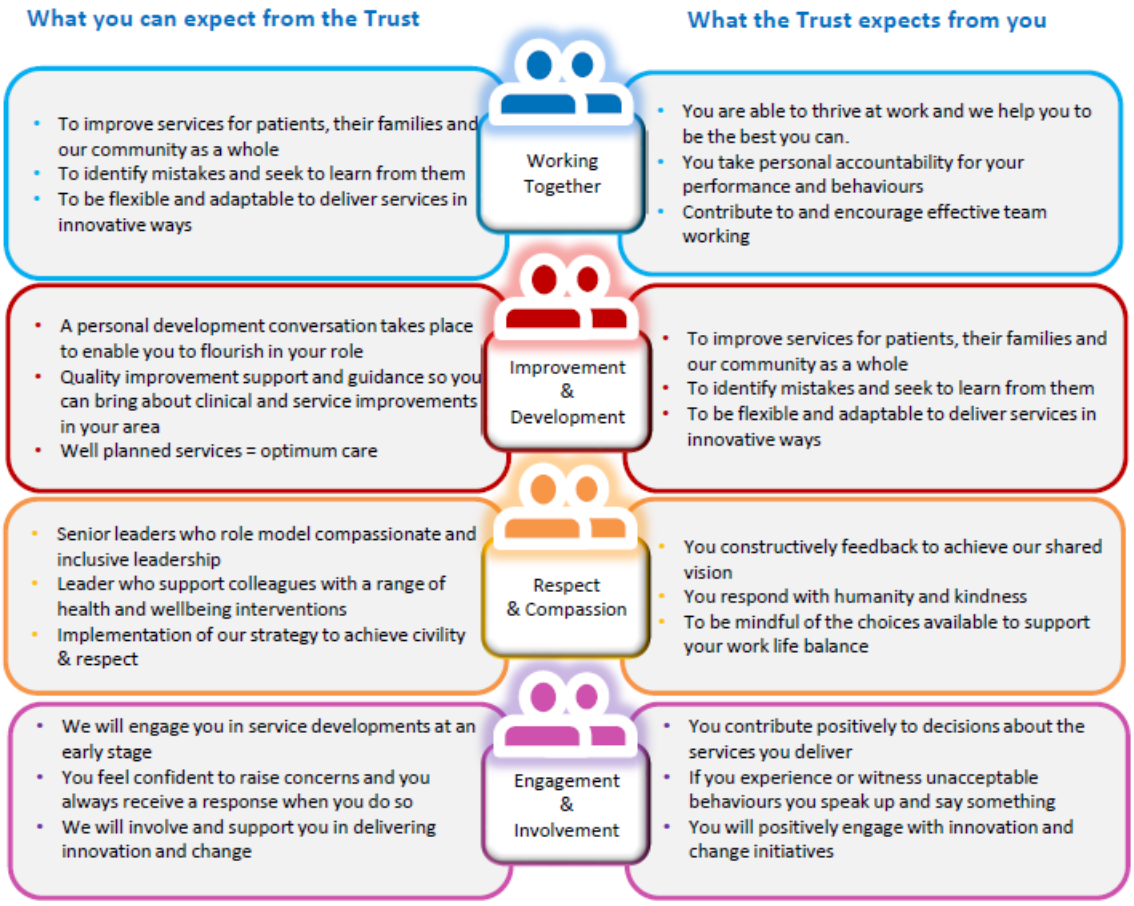
Summary of our 'Charter': Positive outcomes



1.0 Introduction

1.1 East Sussex Healthcare NHS Trust is committed to protecting the health, safety and wellbeing of all its people by creating a psychologically safe work environment.

1.2 Trust objectives and strategies are aligned in supporting this endeavour as reflected in the People Strategy based on the NHS People Plan.

1.3 The Trust recognises that there may be times when an individual experiences excessive or prolonged pressure at work or who are experiencing psychological distress and/or suffering from mental ill-health/symptoms that are impacting on their ability to work. The Trust is committed to both minimising work-related stress and supporting staff, by ensuring there is access to appropriate services and resources.

1.4 Work pressures, personal issues, or a combination of both can impact on the psychological wellbeing of employees. This policy aims to actively support staff who experience psychological distress as a result of their work whilst also considering the needs of staff suffering from a mental health condition or symptoms, impacting on their ability to work.

2.0 Purpose

2.1 The purpose of this policy is to:

- Set out the Trusts approach and commitment to supporting the psychological wellbeing and safety of staff through a tiered infrastructure, (see appendix B).
- Promote psychological wellbeing and safety in every aspect of the organisation.
- Provide direction and guidance to staff and managers on the identification, prevention and management of work-related stress alongside the promotion of psychological wellbeing for all our People, (refer to section 5).
- Provide mechanisms to identify causes of work-related stress, in line with HSE standards and offer solutions to eliminate, mitigate or escalate these when found, (refer to section 5).
- Provide staff and managers with skills required to create an inclusive and compassionate approach to supporting staff experiencing psychological distress and/or suffering from mental ill-health symptoms that are impacting on their ability to work, (refer to section 5.4, 5.5, 5.6).
- Improve the working experience of all our People so that optimum care can be delivered to our patients and service users.
- It is the responsibility of all staff including temporary workforce and volunteers to promote a culture and climate that is inclusive, where each colleague feel that they are treated according to Trust values.
- It is the responsibility of managers to promote a culture and climate that is positive, inclusive, engaging and a psychologically safe working environment

that inspires each staff member / volunteer to thrive to develop their full potential.

2.2 The anticipated benefits from implementing this Policy include:

- Creation of a positive, inclusive culture and psychological safe working environment
- Collection of accurate intelligence indicating the sources of work-related stress at all levels of the organisation
- To gain a top-level overview of the areas where work-related stress is high or enduring, so that interventions to mitigate this can be considered
- Early identification of stress in individuals and teams and promotion of actions to alleviate or eliminate the causes
- Improved awareness about the possible causes of work-related stress and opportunities to promote positive psychological wellbeing and safety with our People
- Improved awareness and knowledge about psychological and mental distress and ways in which to both prevent and manage staff suffering from this in a compassionate and inclusive way
- Greater awareness of sources of support available to staff and teams
- Collection of accurate intelligence that indicate the sources of positive, inclusive and engaging culture and climate, and psychological safe working environment at all levels of the organisation.
- To gain a top-level overview and insight of the areas with positive, inclusive and engaging culture and climate, and psychological safe working environment at all levels of the organisation.

2.3 Principles

2.3.1 The Health and Safety Executive (HSE) identified six key 'Management Standards' that represent a set of conditions that reflect high levels of health, wellbeing, and organisational performance. These management standards provide a practical framework which comprises a series of 'states to be achieved'. (Refer to Appendix C)

2.3.2 This policy sets out an organisation-wide approach to promoting the psychological wellbeing of all employees. This approach should be reflected and integrated into all policies and practices concerned with managing our People, including those related to employment rights and working conditions.

2.3.3 The Trust has committed to endorsing the use of Team Stress Questionnaires and Individual Stress Risk Assessments for both teams and individuals to promote early identification of sources of work-related stress so that solutions and mitigations can be considered to reduce or eliminate these

2.3.4 The Trust has committed to endorsing the use of the Managers Stress Audit and Action Plan for managers to use as a tool to respond to unacceptable levels of work-related stress reported via the Team Stress Questionnaire. This promotes action around measures that can be implemented to reduce, eliminate or escalate, (where local solutions cannot be achieved), sources of work-related stress and identify interventions that can be applied to support staff who are experiencing unacceptable and prolonged levels of work-related stress.

2.4 Scope

2.4.1 This policy will apply to all staff working for East Sussex Healthcare NHS Trust including temporary workforce staff and volunteers

3.0 Definitions

[redacted]

An online Health and Safety risk assessment platform and audit software used for the undertaking and recording of health and safety documentation including the Team Stress Questionnaire and Managers Stress Audit and Action Plan. (Currently Individual Stress Risk Assessments cannot be completed on the [redacted] system)

Compassionate Leadership

As defined by West, (2021), involves four components:
Attending – being present with and listening to those you lead,
Understanding – appraising situations through dialogue and reconciling conflicting perspectives
Empathising – feeling the distress and frustrations of those we lead without becoming overwhelmed
Helping – removing obstacles and providing resources to deliver high quality care

Management Standards

Standards indicated by the HSE that fall into 6 categories Demand, Control, Support (management and collegiate), Relationships, Role and Change, with associated goals to be achieved. (Appendix C)

Mental Health

Defined by World Health Organisation, (WHO), 'as a state of wellbeing, in which the individual realises his, her, [or their], own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community'. ESHT acknowledges Mental health includes our emotional, psychological and social wellbeing.

Stress

For the purposes of the Policy, East Sussex Healthcare NHS Trust adopts the HSE's definitions of stress:
'Stress is the adverse reaction people have to excessive pressure or other types of demand placed on them'.

This includes:

Positive Stress - A manageable degree of stress which is short lived and feels like acceptable pressure and can be a motivating factor.

Negative Stress - Excessive stress or distress, which can occur when pressure becomes too excessive, is prolonged or happens too frequently.

Psychological Safety

An absence of fear which requires candour: where individuals can have productive disagreement and free exchange of ideas. Where all staff have the confidence to offer ideas and voice concerns. Where staff believe they can and must be forthcoming at work. It sets the stage for a more honest, more challenging, more collaborative and more effective work environment, (Edmonson, 2019)

Psychological Wellbeing

A core feature of mental health, psychological wellbeing can be defined as including enjoyment, pleasure, meaning, fulfilment, and happiness, as well as resilience (coping, emotional regulation and healthy problem solving)

4.0 Roles and Responsibilities

4.1 Chief Executive

The Chief Executive has overall responsibility for the management of health and safety at work in the organisation, and for the health, safety and welfare of employees and others who may be affected. This includes ensuring the implementation of effective, up to date policy arrangements for the assessment of risk to employees, guaranteeing that sufficient funds and resources are available to carry out the procedures and actions stated within this and related policies and supporting staff in the implementation of this policy.

4.2 Chief People Officer (CPO)

The Chief People Officer is the lead Executive for these policy arrangements within the Trust and is responsible for ensuring the implementation of this policy. In addition, the CPO ensures that the Human Resources Department performs effectively in its role to manage the workforce including their attendance at work, in a way that is in line with the purpose of this policy and the Trust Attendance Management procedure. This includes providing relevant data to monitor and evaluate reasons for absence including stress, which will provide guidance for the effectiveness of this policy and its procedures.

4.3 Human Resources Team will:

- Raise awareness of problems related to staff psychological distress and mental health through collection and analysis of workforce data.
- Communicate and promote relevant training programmes for staff and managers.

- Work with the Occupational Health team and local managers to effectively and compassionately manage absence resulting from stress and mental health issues in line with the Attendance Management Procedure.
- Work with the Occupational Health department and local managers to effectively and compassionately manage and support staff who experience difficulties in completing their substantive duties as a result of stress and mental health problems.
- Work with the Occupational Health department and local managers to effectively and compassionately manage and support staff experiencing psychological distress as a result of work.
- Collect, analyse and track data from staff leaving the Trust via exit interviews and leavers data in order to identify any areas of concern where interventions are required to improve working conditions or practices affecting our People.

4.4 Health and Safety Department will:

- Audit the undertaking of the Managers audit and action plan, (completed annually), through Occupational Health and Safety Management audits on a three-year risk-based cycle.
- Ensure an effective template for the undertaking of the Team Stress Questionnaire and Managers Stress Audit and Action Plan is available for use on the [redacted] system.
- Identify potential advancements in the use of the [redacted] system to further enhance information relating to work-related stress.
- Provide training for staff in the use of the Team Stress Questionnaire and Managers Stress Audit and Action Plan on the [redacted] system.
- Provide expert advice and guidance on any legislative changes related to work-related stress that the Trust needs to be aware of.

4.5 Occupational Health will:

- Provide impartial advice to managers and staff in order to support the management of workplace stressors and contribute to the implementation of these policy arrangements.
- Work with the Human Resources team by offering specialist advice, in respect of employees suffering the effects of stress, on fitness to work and return to work strategies.
- Work with managers and Human Resources team to manage sickness absence as a result of stress or mental health.
- Provide onward referral and signposting for staff to relevant professionals and agencies as indicated. This includes specialist professionals if required e.g. counselling for those who have fled their home countries or counsellors trained in gender transitioning.
- Provide support and guidance to managers on the completion of Team Stress Questionnaires and Individual Stress Risk Assessments.

- Support, advise and guide managers and teams around possible mitigations to address the causes of work-related stress.

4.6 People Potential Manager, (within Engagement & Wellbeing Team), will:

- Regularly review the content and delivery of psychological wellbeing and trauma interventions provided by the Trust, leading on changes and adaptations, in order to meet the emerging needs of staff.
- Regularly review and evaluate the effectiveness of psychological wellbeing and trauma interventions provided by the Trust.
- Work with key stakeholders responsible for the delivery of psychological wellbeing and trauma interventions to ensure appropriate interventions for employees are offered within an acceptable timeframe.
- Work with key stakeholders responsible for the delivery of affiliated support services to ensure appropriate interventions for employees are offered within an acceptable timeframe.
- Work collaboratively with affiliated support services to agree mechanisms for staff user feedback and be the first point of contact for staff raising concerns about services received.
- Consider and act upon anonymised intelligence gathered as a result of both internal and external psychological wellbeing and trauma interventions and support services, that identify trends or themes indicating departmental or organisational issues of concern.

4.7 Wellbeing team will:

- Support and promote positive mental health and psychological wellbeing for staff in the workplace through a range of programmes.
- Ensure training for line managers includes the ability to promote mental health and psychological wellbeing and to be aware of the signs and symptoms of poor mental health and distress.
- Develop and deliver programmes that raise mental health awareness among employees.
- Encourage open conversations about mental health and psychological distress promoting the support available to employees if they are struggling.
- Act upon intelligence provided via workforce data and staff feedback in order to develop and amend wellbeing interventions for staff which may include taking into account culturally and socially different approaches to any interventions.
- Work with Occupational Health to provide interventions that support team and individual self-care and reduce stress.
- Work with Occupational Health to respond to staff need where areas of concern have been identified.

4.8 Divisional Leads will:

- Support and enable leaders within their area to create a psychologically safe culture where the wellbeing of staff is prioritised.
- Be responsible to act upon escalated concerns relating to work-related stress in areas that they manage, identifying and working towards solutions.
- Report through IPRs any areas of concern where work-related stress is prolonged and unacceptably high, providing detail as to the main causes of stress and the actions being taken to mitigate this.
- Consider actions to reduce causes of work-related stress and take responsibility to escalate issues that are beyond their sphere of control.
- Consider and support actions to reduce work-related stress and role model behaviours that are aligned with compassionate and inclusive leadership.

4.9 Divisional Governance Managers/Leads will:

- Ensure departments and teams within their area of responsibility are accurately recorded on [redacted] and maintain a top-level overview, via [redacted], of annual Team Stress Questionnaires and Managers Stress Audits and Action Plans undertaken in their area ensuring a minimum 90% compliance.
- Provide a top-level overview to Divisional leads of recurring themes emerging from Team Stress Questionnaires, mitigating actions being implemented by managers and escalating any barriers or challenges in reducing work-related stress.
- Within quarterly Health & Safety report, highlight insights and any areas of concern regarding the management of work-related stress in teams within their area, reporting this back to the Health & Safety Steering Group, (HSSG).

4.10 Service and Line Managers will:

- Create a positive, inclusive and engaging culture and climate and psychologically safe working environment for staff / volunteers.
- Carry out wellbeing conversations as part on-going conversations and one-to-ones with their staff.
- Ensure teams are provided with the time and access to undertake a Team Stress Questionnaire on an annual basis or more frequently if indicated.
- Actively encourage and promote participation from all team members by highlighting the reasons and benefits for this approach.
- Consult and communicate to their teams the findings of the Team Stress Questionnaire and work with their teams to identify and implement changes with a view to mitigating work-related stress.
- Regularly review, update and adapt mitigating actions within the Managers Stress Audit and Action Plan with their teams in response to any work-based changes.
- Be responsible for escalating to their seniors, work-related stressors that are beyond their sphere of control, that are impacting on the psychological wellbeing of their staff.

- Review and repeat the Team Stress Questionnaire if prolonged or high levels of stress are identified.
- Respond to individual staff members who are experiencing stress by discussing the issues causing their stress, supporting them and if appropriate asking them to complete an Individual Stress Risk Assessment and offering the opportunity to complete the (dis)Ability and Health Passport.
- To consider interventions that will alleviate work-related stress as identified through risk assessment.
- To work with individual staff members in addressing work-related stressors identified within their stress risk assessment and consider referral to Occupational Health if stressors cannot be alleviated at a local level.
- To ensure new staff have a comprehensive induction, clearly defined roles and responsibilities with an early opportunity to clarify any issues.
- To promote and role model behaviours aligned with compassionate leadership and that promote psychological wellbeing and safety, actively encouraging staff to speak out if they are feeling stressed or their mental health is compromised.
- To promote use of clear, transparent and respectful communication within the team, particularly where there are organisational or procedural changes to ensure staff feel engaged and considered at every stage.
- To be familiar with and draw upon Trust resources to support individuals and teams during times when levels of stress are increased or anticipated to be so.
- To ensure that jobs are properly designed, with realistic demands and workloads and that expectations and job roles are clear.
- To ensure that staff are trained to undertake the demands of their job and are able to contribute to decisions about how the job is done.
- To ensure that there are regular opportunities to discuss work and obtain feedback on performance during regular one-to-one meetings and/or team meetings.
- To monitor working hours and annual leave to ensure that staff are not overworking and are taking appropriate breaks.
- To ensure that bullying and harassment is not tolerated and agreement around acceptable behaviours is clearly confirmed and communicated with staff and teams.
- To be alert to signs of staff experiencing difficulties and offer additional support to any member of staff who is known to be experiencing stress or mental ill health whether work related or not.

4.11 Employees will:

- Take responsibility for managing their own health and wellbeing, by adopting positive health behaviours.
- Improve their knowledge of stress so they feel able to take ownership of the issue by seeking information and making use of training and support offered by the organisation at an early stage.
- Bring to their managers attention any concern relating to their mental health or psychological wellbeing, this could be through completing the (dis)Ability and Health Passport.
- Actively participate in the Team Stress Questionnaire and contribute to identifying solutions that will resolve or alleviate work-related stressors.
- Contribute to a psychologically safe working environment by demonstrating Trust values and compassionate, inclusive behaviours to all colleagues.
- Access sources of additional support if required, actively engaging with services that will improve their mental health and psychological wellbeing.
- If ability to work is being affected by mental health or psychological distress, to request referral to the Occupational Health Department and engage with any support services being offered to them.

5.0 Procedures and Actions to Follow

In order to provide the appropriate direction and guidance to staff and managers on the identification, prevention and management of work-related stress the following questionnaire, assessment and plan should be adopted:-

5.1 Annual Team Stress Questionnaire

Managers are required to enable their teams to undertake an annual Team Stress Questionnaire which must be recorded in the appropriate section on the [redacted] system. (Refer to Appendix D Team Stress Questionnaire Managers Guidance and Appendix E Team Stress Questionnaire Staff Guidance)

5.2 Evaluate Risk, Record Findings and Implement Plan.

See Appendix F for Responsibility Tree for Team Stress

The results from the Team Stress Questionnaire must be shared with all staff and arrangements made for consultation to confirm findings and evaluate the risk. Managers must review the results from the Team Stress Questionnaire and in consultation with their teams, complete a Managers Stress Audit and Action Plan to identify actions that will reduce or eliminate work-related stressors. This must be regularly reviewed and progress recorded.

Consideration can be given to other departmental data and whether there is any correlation with the Team Stress Questionnaire responses i.e. sickness absence, staff turnover, accidents/incidents.

Managers are responsible to lead on the implementation of any actions and to monitor and review these as necessary or where significant changes occur.

Communication and consultation with all members of the team is crucial to the success of this and should be delivered in a proactive, positive and inclusive way. Ensuring that all staff have a chance to engage and contribute to the process of identifying risks and offering suggestions to mitigate these will help to create a culture of psychological wellbeing and safety.

Managers should note that the results of the annual Team Stress Questionnaire will provide indicators as to work-related stress and as such they may want to explore issues in more detail with smaller groups of staff or as part of a wider divisional plan.

5.3 Individual Stress Risk assessments

The Individual Stress Risk Assessment, (Appendix G), should not be completed on the [redacted] system. This can be found on the Trust Extranet.

Employees are encouraged to complete this with their line manager so that an open dialogue about work-related stress can be initiated and where ways to alleviate this can be discussed. If for any reason, this is not practicable, the employee can request that the assessment is completed with another line manager, senior colleague or their Human Resources representative.

A copy of an individual's stress risk assessment must be retained in the employee's personnel file. Should an individual wish to receive additional support in relation to work-related stress, they can ask their line manager to refer them to Occupational Health where a copy of their completed individual stress risk assessment should be enclosed. Occupational Health can then assist or signpost the employee as indicated and provide the line manager with guidance as to how best to support their employee.

Individual stress risk assessments should be used in the following instances:

- When an employee is displaying signs of stress or mental distress
- When an employee reports experiencing unacceptable levels of stress
- When an employee is absent from work due to stress. This should be completed during the return to work interview though can be utilised for staff who continue to be absent due to stress to aid their return to work
- If the Team Stress Questionnaire has indicated a cause for concern

Additional Support

5.4 Work-related Trauma

In recent years and accelerated by the COVID pandemic, the psychological impact of work-related trauma on teams and individual staff members has increased. Staff may experience this as a result of a Potentially Traumatic Event, (PTE), or as an accumulation of trauma at any level. It is widely recognised that the quality, content and governance arrangements around the interventions offered to staff following a PTE must be evidence-based and provided by appropriately trained staff. This is to avoid any unnecessary risk or further distress for the staff involved.

With that in mind the Trust has invested in specific evidence-based interventions to assess, support and manage staff who have experienced trauma as a result of work. Full details can be found on the Wellbeing pages of the Trust extranet but the following provides a summary of these interventions.

5.4.1 TRiM

TRiM is a means of supporting staff after a Potentially Traumatic Experience (PTE) or accumulation of experiences and to early identify symptoms of stress. TRiM is not a treatment for stress, however, processing and talking about the event can be beneficial.

Experiences may include: unexpected death of a patient or colleague, injury to staff, violence and aggression, major incidents, 'never events' and other potentially traumatic experiences. TRiM may not be appropriate for personal trauma or other forms of stress such as workload pressure where other support should be sought.

TRiM is delivered by ESHT staff who have been trained as TRiM Practitioners, from all levels within the organisation. They are not counsellors or therapists but they will provide a confidential space to talk about the experience and carry out a simple risk assessment to gauge how much stress may have been taken on board. The staff member may be offered a referral for the most appropriate source of support if necessary.

5.4.2 Defuse

Defusing is the immediate actions managers and shift leaders can take to support their staff following a potentially traumatic event at work. These actions may be deemed as common sense but under stressful conditions can be used as a guide to ensure staff are supported appropriately and that any staff who are significantly impacted are identified quickly.

It involves practical actions such as: checking in with staff and being present if possible immediately after the event, offering them the opportunity to take a break, ensuring they are ok and safe to travel home, enquiring if they have support once they leave work, following up with them the next day. It also prompts managers to follow up on affected staff within the next day or so and referring them to the TRiM team, Occupational Health, Wellbeing team or other supportive services offered by the Trust.

5.4.3 Psychological Wellbeing & GREP, GTEP for teams

Group Resilience Episode Protocol (GREP)
Group Traumatic Episode Protocol (GTEP)

This intervention is delivered by appropriately trained Therapists experienced in Trauma working alongside the Occupational Health and Staff Engagement & Wellbeing teams. It is offered to teams of staff who have recently shared a work-based trauma or accumulative work pressure. This was initially offered to support ESHT staff who worked through the COVID pandemic but is now being used to support staff as we all move forward. This programme has already been successfully rolled out to personnel working within the armed forces, the Police force, humanitarian workers and many others who face traumatic experiences in their work.

The Psychological Wellbeing intervention consists of:

- **Session 1: Debrief (2 hours)** Reflective space to give you the opportunity to pause and consider recent events
- **Session 2: GREP (90 mins)** Focus on resilience
- **Session 3: GTEP 1 (90 mins)** Focus on self-care
- **Session 3 GTEP 2 (90 mins)** Continued focus on self-care. Evaluation & post screening

5.5 Violence & Aggression

Issues related to violence & aggression within the workplace and guidance for staff and managers within such situations is covered in the Trust Violence & Aggression Policy. Please also refer to the dedicated Violence & Aggression pages on the Trust extranet for further details.

5.6 Mental Health First Aid

The Trust has invested in the Mental Health First Aid training and offers a rolling programme to any staff within the organisation. This provides a comprehensive, evidence-based training programme, that raises awareness about mental health issues and symptoms whilst providing advice and guidance on action and support that can be offered to staff suffering from mental distress.

6.0 Training

6.1 Principles of risk assessment and the methodology for undertaking risk assessments are covered in risk assessment training

6.2 Resources, guidance and interventions related to work-related stress and psychological wellbeing & safety can be found on the Wellbeing pages of the Trust extranet.

7.0 Monitoring Compliance with the Document

Monitoring Compliance with Psychological Safety & Wellbeing Policy

Element to be Monitored	Process for monitoring Lead	Tool for Monitoring	Frequency of monitoring	Responsible Individual/Group Committee for review of results/report	Responsible individual /group /committee for acting on recommendations / action plan	Responsible individual/group/ committee for ensuring action plan/lessons learnt are implemented
Annual Team Stress Questionnaire compliance	Ward managers/ Matrons/Team Leaders to facilitate completion of the Team Stress Questionnaire annually or more regularly if indicated.	[redacted]	Yearly	Divisional Governance Lead	Divisional Governance Lead	• Ward managers/ Matrons/Team Leaders • Divisional Leads
Managers Stress Audit and Action Plan	Ward managers/ Matrons/Team Leaders to complete Managers Stress Audit and Action Plan in response to the Team Stress Survey	[redacted]	Yearly and in response to Team Stress Questionnaire	Divisional Governance Lead	Divisional Governance Lead	• Ward managers/ Matrons/Team Leaders • Divisional Leads
Individual Stress Risk Assessments	Ward managers/ Matrons/Team Leaders		As required	Ward managers/ Matrons/Team Leaders	Ward managers/ Matrons/Team Leaders	• Ward managers/ Matrons/Team Leaders
Effectiveness of Policy:	• Number of departments completing yearly Team Stress Questionnaires along with Managers Stress Audit and Action Plan. • Results of staff survey • Management Referrals to Occupational Health with a reason code of work-related stress	[redacted] NHS Staff Survey [redacted]	Yearly Yearly Monthly	HSSG POD Workforce Insights Group	Divisional Leads Divisional Leads Line Manager/OH/ HRBP	Divisional Leads Divisional Leads Line Manager/OH/ HRBP

8.0 Useful references and resources

Edmondson, A, C. (2019) *The Fearless Organisation*. USA: John Wiley and Sons.

Health & Safety Executive. (2022). *What are the Management Standards?* Available from What are the Management Standards? - Stress - HSE

NHS. (2020) *NHS People Plan*. Available from NHS England » Online version of the People Plan for 2020/2021

NHS. (2022) *NHS People Promise.* Available from NHS England » The Promise

National Institute for Health and Care Excellence, (NICE). (2022) *Mental Wellbeing at Work*. Available from Mental wellbeing at work (nice.org.uk)

Scott, K. (2019) *Radical Candor. How to get what you want by saying what you mean.* New York: Pan Books.

West, M. (2021) *Compassionate Leadership: Sustaining Wisdom, Humanity and Presence in Health and Social Care.* UK: The Swirling Leaf Press

World Health Organisation. (2020) *Doing What Matters in Times of Stress. An Illustrated Guide.* Available from: Doing What Matters in Times of Stress (who.int)

World Health Organisation Mental health (who.int)

Health & Safety Executive. A Talking Toolkit: Preventing work-related stress. This guides managers into having problem and solution focussed conversations with teams of staff

Health & Safety Executive. Tackling Stress: workbook for managers; This is a large document at nearly 60 pages. This includes detailed information around solutions and expectations

A Guide to Communication and Stress by stress.org.uk. Useful information for every member of staff in how their communication is affected by stress

Chartered Institute of Personnel and Development, (CIPD). Top tips for having a conversation about stress; guidance to support managers when a team stress assessment has identified individuals who need further support

Appendix A: Equality Impact Assessment Form

East Sussex Healthcare NHS Trust

Equality Impact Assessment Form

1. Cover Sheet

Please refer to the accompanying guidance document when completing this form.

Strategy, policy or service name	Psychological Wellbeing & Safety of Staff Policy
Date of completion	August 2022
Name of the person(s) completing this form	Liz Lipsham
Brief description of the aims of the Strategy/ Policy/ Service	To provide clarity on the Trusts commitment to promote psychological wellbeing and safety in every aspect of the organisation by providing direction and guidance to staff and managers on the identification, prevention and management of work-related stress alongside the promotion of psychological wellbeing for all our People
Which Department owns the strategy/ policy/ function	OD, Staff Engagement & Wellbeing Team.
Version number	V3
Pre-Equality analysis considerations	The Equality Act 2010, Human Rights Act 1998 and Public Sector Equality Duties 2011
Who will be affected by this work? **E.g. staff, patients, service users, partner organisations etc.**	All ESHT employees including temporary workforce staff and volunteers
Review date	3 years unless equality legislation changes
If negative impacts have been identified that you need support mitigating please escalate to the appropriate leader in your directorate and contact the EDHR team for	To whom has this been escalated? Name: Click here to enter text. Date: Click here to enter a date.

further discussion.	
Have you sent the final copy to the EDHR Team?	Yes

2. EIA Analysis

	☺ 😐 ☹	**Evidence:**
Will the proposal impact the safety of patients', carers' visitors and/or staff?	Choose: Positive	This policy sets out the Trusts position on supporting the psychological wellbeing of our staff whilst promoting a culture of psychological safety.
Equality Consideration *Highlight the protected characteristic impact or social economic impact (e.g. homelessness, poverty, income or education)*	Choose: Positive	**Race** ☒ · **Gender** ☒ · **Sexual orientation** ☒ · **Age** ☒ · **Disability & carers** ☒ **Gender reassignment** ☒ · **Marriage & Civil Partnership** ☒ · **Religion and faith** ☒ · **Maternity & Pregnancy** ☒ · **Social economic** ☒
Is the proposal of change effective?		Yes: That staff are enabled to work in an inclusive, compassionate and psychologically safe environment.
Equality Consideration *Highlight the protected characteristic impact or social economic impact (e.g. homelessness, poverty, income or education)*		**Race** ☒ · **Gender** ☒ · **Sexual orientation** ☒ · **Age** ☒ · **Disability & carers** ☒ **Gender reassignment** ☒ · **Marriage & Civil Partnership** ☒ · **Religion and faith** ☒ · **Maternity & Pregnancy** ☒ · **Social economic** ☒

<table>
<tr><td>What impact will this have on people receiving a positive experience of care?</td><td>Choose:
Positive</td><td>There is a wealth of evidence that demonstrates that the creation of psychologically safe environments within Healthcare lead to better quality care and standards for patients and service users.</td></tr>
<tr><td>Equality Consideration
Highlight the protected characteristic impact or social economic impact (e.g. homelessness, poverty, income or education)</td><td></td><td>
<table>
<tr><td>Race</td><td>Gender</td><td>Sexual orientation</td><td>Age</td><td>Disability & carers</td></tr>
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<tr><td>Gender reassignment</td><td>Marriage & Civil Partnership</td><td>Religion and faith</td><td>Maternity & Pregnancy</td><td>Social economic</td></tr>
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</td></tr>
<tr><td>Does the proposal impact on the responsiveness to people's needs?</td><td>Choose:
Positive</td><td>The purpose of this policy, in creating an inclusive, compassionate and psychologically safe working environment for staff supports the ability for staff to access support when required and/or identify any issues of concern at an early stage.</td></tr>
<tr><td>Equality Consideration
Highlight the protected characteristic impact or social economic impact (e.g. homelessness, poverty, income or education)</td><td></td><td>
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<tr><td>Race</td><td>Gender</td><td>Sexual orientation</td><td>Age</td><td>Disability & carers</td></tr>
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</td></tr>
<tr><td>What considerations have been put in place to consider the organisations approach on improving equality and diversity in the workforce and leadership?</td><td>Choose:
Positive</td><td>The trust have a number of programmes such as: New managers orientation, bite size training for managers where sessions on improving equality and diversity are delivered to managers

A robust governance structure is in place where reporting on workforce Equality Diversity and Inclusion objectives are reviewed at the People and Organisational Development Committee and Trust Board for assurance</td></tr>
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<tr><td>Equality Consideration

Highlight the protected characteristic impact or social economic impact (e.g. homelessness, poverty, income or education)</td><td></td><td>
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<tr><td>☒</td><td>☒</td><td>☒</td><td>☒</td><td>☒</td></tr>
</table>
</td></tr>
<tr><td colspan="3">Access
Could the proposal impact positively or negatively on any of the following:</td></tr>
<tr><td>• Patient Choice</td><td>Choose:

Positive</td><td>Psychologically safe environments are known to provide better care for patients and service users. This in turn may lead patients to engage more positively in ESHT services.</td></tr>
<tr><td>• Access</td><td>Choose:

Positive</td><td>The purpose of the policy is to promote compassion and inclusivity: to support staff who are struggling with mental health or psychological distress in a non-judgemental and proactive way.</td></tr>
<tr><td>• Integration</td><td>Choose:

Positive</td><td>This policy promotes a culture of positivity for ESHT, where all staff feel safe and belong, knowing that they will be supported if they do experience mental ill health of psychological distress.</td></tr>
<tr><td>Equality Consideration

Highlight the protected characteristic impact or social economic impact (e.g. homelessness, poverty, income or education)</td><td></td><td>
<table>
<tr><td>Race</td><td>Gender</td><td>Sexual orientation</td><td>Age</td><td>Disability & carers</td></tr>
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<table>
<tr><td>Engagement and Involvement
How have you made sure that the views of stakeholders, including people likely to face exclusion have been influential in the development of the strategy / policy / service:</td><td>Choose:
Positive</td><td>• OD, Staff Engagement & Wellbeing Senior Leads
• Chief People Officer
• Deputy Director or Culture
• Freedom to Speak up Guardians
• Occupational Health Governance Group
• Staff Networks
• Health and Safety Steering Group
• Workforce & People Policy Group
• Policy Ratification Group</td></tr>
<tr><td>Equality Consideration
Highlight the protected characteristic impact or social economic impact (e.g. homelessness, poverty, income or education)</td><td></td><td><table>
<tr><td>Race</td><td>Gender</td><td>Sexual orientation</td><td>Age</td><td>Disability & carers</td></tr>
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</table></td></tr>
<tr><td>Duty of Equality
Use the space below to provide more detail where you have identified how your proposal of change will impact.</td><td>Choose:
Positive</td><td>The policy states expectations to all staff of the behaviours from them with regards to the culture in our organisation where psychological wellbeing, safety, compassion and inclusion is prioritised.</td></tr>
<tr><td>Characteristic</td><td>Rating
☺ ☹ 😐</td><td>Description</td></tr>
<tr><td>Race</td><td>Choose:
Positive</td><td>This policy has a positive impact for all staff regardless of their race or ethnicity</td></tr>
<tr><td>Age</td><td>Choose:
Positive</td><td>This policy protects staff from all age groups no matter what age they are as outlined in the Equality Act 2010</td></tr>
</table>

Disability and Carers	Choose: Positive	This policy has a positive impact on all staff that have a disability or long-term health condition. It links into the (Dis)Ability & Health Passport to enable adequate adjustment to take place and the Carers Passport to achieve a work life balance
Religion or belief	Choose: Positive	This policy has a positive impact on all staff who wish to observe religious practices and those that don't
Sex	Choose: Positive	This policy has a positive impact on staff no matter what their gender
Sexual orientation	Choose: Positive	This policy has a positive impact on staff no matter what their sexual orientation is.
Gender re-assignment	Choose: Positive	This policy has a positive impact on those that are transitioning from their gender assigned at birth to another gender.
Pregnancy and maternity	Choose: Positive	This policy has a positive impact on pregnancy, maternity and also including paternity rights with, The Employment Rights Act 1996 which sets out rights to health and safety, time off for ante-natal care, maternity leave and unfair dismissal.
Marriage and civil partnership	Choose: Positive	This policy does not have a negative impact on a member of staffs marital or civil partnership status

Human Rights

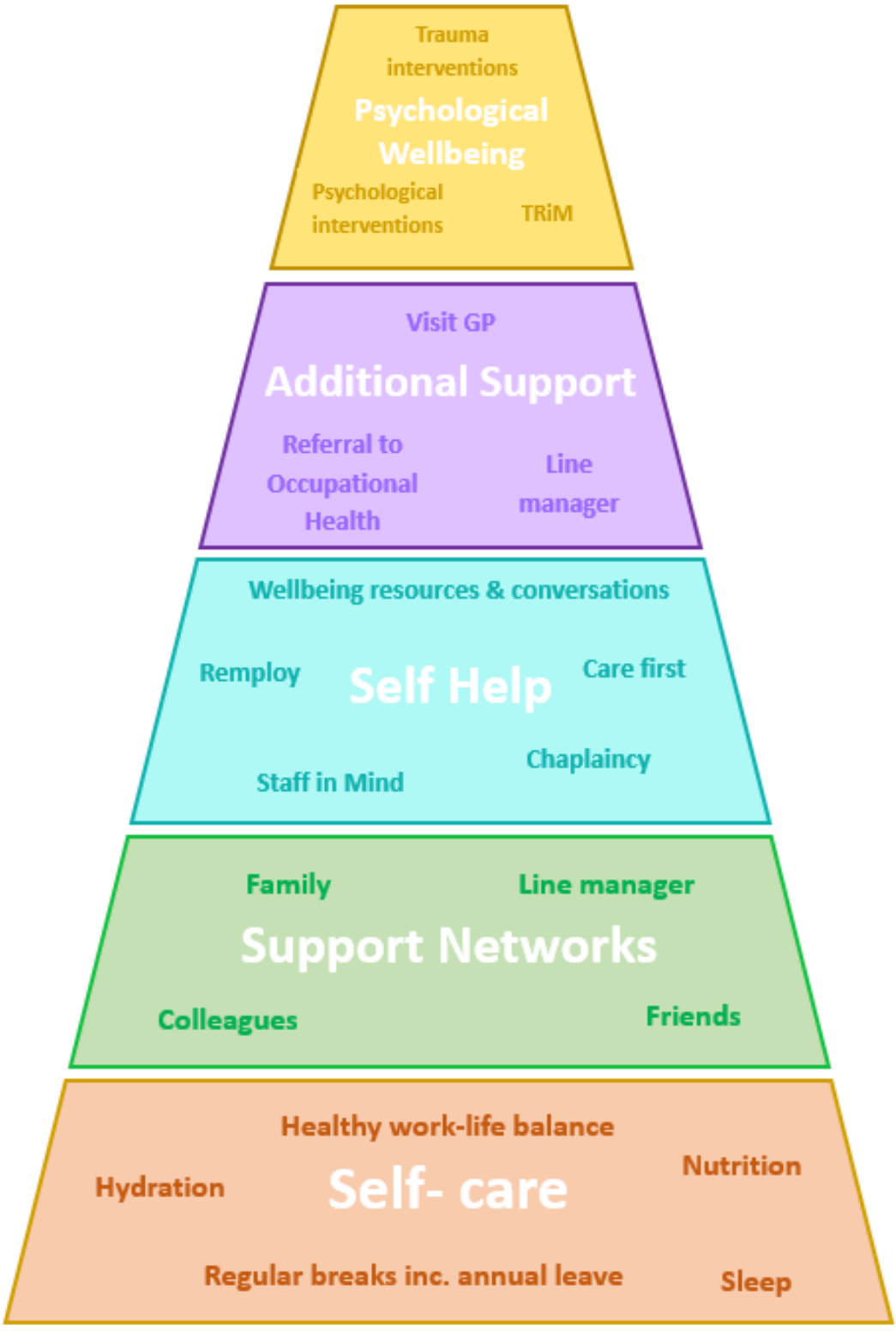
Please look at the table below to consider if your proposal of change may potentially conflict with the Human Right Act 1998

Articles		Y/N
A2	Right to life	**No**
A3	Prohibition of torture, inhuman or degrading treatment	**No**
A4	Prohibition of slavery and forced labour	**No**
A5	Right to liberty and security	**No**
A6 &7	Rights to a fair trial; and no punishment without law	**No**
A8	Right to respect for private and family life, home and correspondence	**No**
A9	Freedom of thought, conscience and religion	**No**
A10	Freedom of expression	**No**
A11	Freedom of assembly and association	**No**
A12	Right to marry and found a family	**No**
Protocols		
P1.A1	Protection of property	**No**
P1.A2	Right to education	**No**
P1.A3	Right to free elections	**No**

Appendix B: Infrastructure of Support

NHS
East Sussex Healthcare
NHS Trust

Pyramid of Staff Support



Appendix C

Team Stress Questionnaire
Managers Stress Audit & Action Plan
Managers Guidance

The Team Stress Questionnaire is an opportunity for you and your team to consider any aspects of work that may be causing stress. It should be completed annually but you have the option to undertake this again for your team at any point during the year if you wish to.

The process consists of two parts:

1. **Team Stress Questionnaire** – completed by all members of your team via the link on the [redacted]). Responses are anonymised so please reassure your team that they can feel confident in giving true and honest answers to the questions. All responses are then collated into a report that provides an overall picture for your team. To increase accessibility, these can be completed by staff using a PC, laptop or alternatively, using the QR code for a smartphone or tablet in the timeframe you have given them.
   https://uk.sheassure.net/esht/portal/portal/index

2. **Managers Stress Survey and Action Plan** – completed by you as the line manager on the [redacted] system. This is found under 'Audits' on [redacted]

1. Team Stress Questionnaire

Planning and preparation:

It's important to consider the following points in preparation for your team completing the Team Stress Questionnaire:

- Ensure that you and your team know where to find the Team Stress Questionnaire on the [redacted] Portal. Please see the QR code above.
- Consider when would be the best time of year for your team to complete the Team Stress Questionnaire. You may want to avoid doing this at the same time as the NHS staff survey, (October/November), so as not to cause any confusion.
- Once you have decided when you want to do this, give your team a set time to respond and clearly communicate this to **all of your team**. Three weeks is a good time frame for your team to complete the questionnaire but you may need to be mindful of annual leave so you can extend this if preferable for you and the team but do be clear about the timings.
- Inform your team in a positive way about the Team Stress Questionnaire: that it is an opportunity to share their views and have a voice rather than it being a task-based assessment.
- Consider enlisting key team members to encourage and motivate their colleagues to complete the survey. You may want to allocate them time to support their colleagues to do this.

The Results:

The actions you take following the outcome of the Team Stress Questionnaire are as important as completing the questionnaire itself.

Once you have reached the closing date you have set for your staff to complete the Team Stress Questionnaire, the anonymised responses are collated into an overall score for each question. There is also an overall score for each of the 7 stress management standards with a risk factor for each.

What are the results telling you?

You need to look at the results for your team by clicking on the Insights+ link (view) on the side toolbar of the [redacted] system after logging in. Please contact Health and Safety if you cannot see this or do not have access esh-tr.healthandsafety@nhs.net

Review guidance and information:
Have a look at the information below for guidance around stress conversations and how to put together an action plan with your team based on the priorities that have emerged from the questionnaires.

The Occupational Health section of the extranet has information and resources for you and your team to access including:

- A Talking Toolkit: Preventing work-related stress. This guides managers into having problem and solution focussed conversations with teams of staff
- HSE, Tackling Stress: workbook for managers; This is a large document at nearly 60 pages but does have detailed information around what we need to try and achieve as well as potential solutions
- A Guide to Communication and Stress by stress.org.uk. Useful information for every member of staff in how their communication is affected by stress
- CIPD, Top tips for having a conversation about stress; guidance to support managers when a team stress assessment has identified individuals who need further support

Discussing solutions and actions:

You will need to consider what actions you can take to mitigate any work-related stressors that have been identified by the team, by **eliminating** or **reducing** these. If this is not possible you should **escalate** concerns to your line manager.

Ensure that you discuss the overall results of the Team Stress Questionnaire with your team and ask for their ideas as they are likely to know of possible solutions to some of the challenges they face during the course of their work.

You can approach this engagement in a number of ways that suit you and your team but managers have found the following approaches helpful:

- Feeding back questionnaire results during a team meeting
- Printing out and displaying on staff notice boards, the Insights+ report that clearly illustrate the main causes of work-related stress reported by the team
- Picking out the top three work-related stressors that have been identified by the team; putting each one onto a poster and asking staff to contribute ideas and solutions by writing on the poster. The talking toolkit from the HSE provides good examples and ideas for this.

2. Managers Stress Audit and Action Plan

Finding the template to use on [redacted]

The Managers Stress Audit and Action Plan is found on the [redacted] system by clicking on the 'Audit' button and 'New Record'.

The template is divided into 7 sections with a single statement in each. Score each question from 1 – 5 based on what Insights+ is telling you. There are only 5 factors as 0 is not used in the HSE survey
There is an overall score for each of the management standards which you should use when you complete the Managers Stress audit. These range from 1.00 to 5.00, using the number closest to the 'Main Findings' chart on your [redacted] Insights report.
You can use some degree of discretion when assigning priorities for the actions: low, medium or high, relevant to the level of risk.

Scoring your Audit on [redacted]

Insights Score is closest to	What this potentially means for each of the Standards	What you should score on the audit
1	There is a significant problem around this question and the team clearly have a lot of concerns. Almost all staff have answered negatively. It is longstanding and likely to continue	1
2	The team have raised several issues which have been longstanding and with a common theme. There doesn't seem to be any clear progress or headway on getting where we need to be for this issue.	2
3	Some concerns noted which may be different or a common theme that has been raised by less than half of the team. We need to act on this before it starts to become a problem.	3
4	The team response to this is quite good but we might need to undertake some further work around this standard just to be sure.	4
5	We are in a pretty good place. The question and outcome is fully met or very close and we have very few concerns that stress is caused by this factor.	5

The Insights report will also give you the ability to view the answers to each question within the standard. From this, you will be able to see which specific issue staff are reporting problems with.

Under each section on the Managers audit and action plan you can add a single action or multiple actions. You should only allocate actions for people within your service. The actions need to be proportionate and SMART, (Specific, Measurable, Achievable, Realistic, Timely).

The Main Findings chart indicates the standards that you may need to prioritise and the importance of these standards in terms of risk factors.

Appendix D: Team Stress Questionnaire Managers Guidance

East Sussex Healthcare NHS Trust

Team Stress Questionnaire
Managers Stress Audit & Action Plan
Managers Guidance

The Team Stress Questionnaire is an opportunity for you and your team to consider any aspects of work that may be causing stress. It should be completed annually but you have the option to undertake this again for your team at any point during the year if you wish to.

The process consists of two parts:

3. **Team Stress Questionnaire** – completed by all members of your team via the link on the [redacted]). Responses are anonymised so please reassure your team that they can feel confident in giving true and honest answers to the questions. All responses are then collated into a report that provides an overall picture for your team
4. **Managers Stress Survey and Action Plan** – completed by you as the line manager on the [redacted] system. This is found under 'Audits' on [redacted].

Planning and preparation:

It's important to consider the following points in preparation for your team completing the Team Stress Questionnaire:

- Ensure that you know where to find the Team Stress Questionnaire on the [redacted] Portal
- Consider when would be the best time of year for your team to complete the Team Stress Questionnaire. You may want to avoid doing this at the same time as the NHS staff survey, (October/November), so as not to cause any confusion
- Once you have decided when you want to do this, give your team a set time to respond and clearly communicate this to **all of your team**. Three weeks is a good time frame for your team to complete the questionnaire but you may need to be mindful of annual leave so you can extend this if preferable for you and the team but do be clear about the timings
- Inform your team in a positive way about the Team Stress Questionnaire: that it is an opportunity to share their views and have a voice rather than it being a task-based assessment
- Consider enlisting key team members to encourage and motivate their colleagues to complete the survey. You may want to allocate them time to support their colleagues to do this

The Results:

The actions you take following the outcome of the Team Stress Questionnaire are as important as completing the questionnaire itself.

Once you have reached the closing date you have set for your staff to complete the Team Stress Questionnaire, the anonymised responses are collated into an overall score for each question. There is also an overall score for each of the 7 stress management standards with a risk factor for each.

What are the results telling you?

You need to look at the results for your team by clicking on the Insights+ link (view) on the side toolbar of the [redacted] system after logging in. Please contact Health and Safety if you cannot see this or do not have access esh-tr.healthandsafety@nhs.net

Review guidance and information:

Have a look at the information below for guidance around stress conversations and how to put together an action plan with your team based on the priorities that have emerged from the questionnaires.

The Wellbeing page of the extranet has a wealth of information and resources for you and your team to access including:

- A Talking Toolkit: Preventing work-related stress. This guides managers into having problem and solution focussed conversations with teams of staff
- HSE, Tackling Stress: workbook for managers; This is a large document at nearly 60 pages but does have detailed information around what we need to try and achieve as well as potential solutions
- A Guide to Communication and Stress by stress.org.uk. Useful information for every member of staff in how their communication is affected by stress
- CIPD, Top tips for having a conversation about stress; guidance to support managers when a team stress assessment has identified individuals who need further support

Discussing solutions and actions:

You will need to consider what actions you can take to mitigate any work-related stressors that have been identified by the team, by **eliminating** or **reducing** these. If this is not possible you should **escalate** concerns to your line manager.

Ensure that you discuss the overall results of the Team Stress Questionnaire with your team and ask for their ideas as they are likely to know of possible solutions to some of the challenges they face during the course of their work.

You can approach this engagement in a number of ways that suit you and your team but managers have found the following approaches helpful:

- Feeding back questionnaire results during a team meeting
- Printing out and displaying on staff notice boards, the Insights+ report that clearly illustrate the main causes of work-related stress reported by the team
- Picking out the top three work-related stressors that have been identified by the team; putting each one onto a poster and asking staff to contribute ideas and solutions by writing on the poster. The talking toolkit from the HSE provides good examples and ideas for this.

Managers Stress Audit and Action Plan

Finding the template to use on [redacted]

The Managers Stress Audit and Action Plan is found on the [redacted] system by clicking on the 'Audit' button. The template is divided into 7 sections with a single statement in each. Score each question from 1 – 5 based on what Insights+ is telling you. There are only 5 factors as 0 is not used in the HSE survey

There is an overall score for each of the management standards which you should use when you complete the Managers Stress audit. These range from 1.00 to 5.00, using the number closest to the 'Main Findings' chart on your [redacted] Insights report. You can use some degree of discretion when assigning priorities for the actions: low, medium or high, relevant to the level of risk.

Insights Score is closest to	**What this potentially means for each of the Standards**	**What you should score on the audit**
1	There is a significant problem around this question and the team clearly have a lot of concerns. Almost all staff have answered negatively. It is longstanding and likely to continue	1
2	The team have raised several issues which have been longstanding and with a common theme. There doesn't seem to be any clear progress or headway on getting where we need to be for this issue.	2
3	Some concerns noted which may be different or a common theme that has been raised by less than half of the team. We need to act on this before it starts to become a problem.	3
4	The team response to this is quite good but we might need to undertake some further work around this standard just to be sure.	4
5	We are in a pretty good place. The question and outcome is fully met or very close and we have very few concerns that stress is caused by this factor.	5

The Insights report will also give you the ability to view the answers to each question within the standard. From this, you will be able to see which specific issue staff are reporting problems with.

Under each section on the Managers audit and action plan you can add a single action or multiple actions. You should only allocate actions for people within your service. The actions need to be proportionate and SMART, (Specific, Measurable, Achievable, Realistic, Timely).

The Main Findings chart indicates the standards that you may need to prioritise and the importance of these standards in terms of risk factors.

Appendix E: Team Stress Questionnaire Staff Guidance

East Sussex Healthcare NHS Trust

Team Stress Questionnaire
Staff Guidance

The Team Stress Questionnaire is an opportunity for you and your colleagues to consider any aspects of work that may be causing you stress. It should be completed annually but you have the option to undertake this again at any point during the year if you wish to.

The process consists of two parts:

1. **Team Stress Questionnaire** – completed by all members of the team via the link on the [redacted] Portal. Responses are anonymised but only if completed on the Portal so please be assured in feeling confident to give true and honest answers to the questions. All responses are then collated into a report that provides an overall picture for your team
2. **Managers Stress Audit and Action Plan** – completed by your line manager on the [redacted] system. This is found under 'Audits' on [redacted].

Planning:

- Your line manager will advise you as to where to find the Team Stress Questionnaire on the [redacted]
- Please choose your area of work and team from the drop-down menu on the [redacted] system. Please do this carefully so that your questionnaire goes to the right area. (Ask your manager for guidance if you are unsure)
- Your line manager will allocate a set time for you to respond
- This is a great opportunity to share your views and have a voice about how work can impact on your wellbeing

Results:

- When the closing date for your Team Stress Questionnaire arrives, your line manager will access a report combining all the responses from everyone within your team
- Your line manager will then discuss the results of the Team Stress Questionnaire with you and your colleagues and ask you for your ideas as to how to eliminate or reduce any work-related stressors. If this is not possible, your line manager will agree with you what aspects may need to be escalated to your senior managers
- We encourage this approach as we know that you are likely to have solutions to some of the challenges you face during the course of your work that may be causing you stress

Please be aware that undertaking this Team Stress Questionnaire may cause you to feel unsettled so do seek out support from colleagues and your line manager or look at the Wellbeing resources on the Extranet for other sources of support.

Appendix F - Responsibility Tree for Team Stress

NHS
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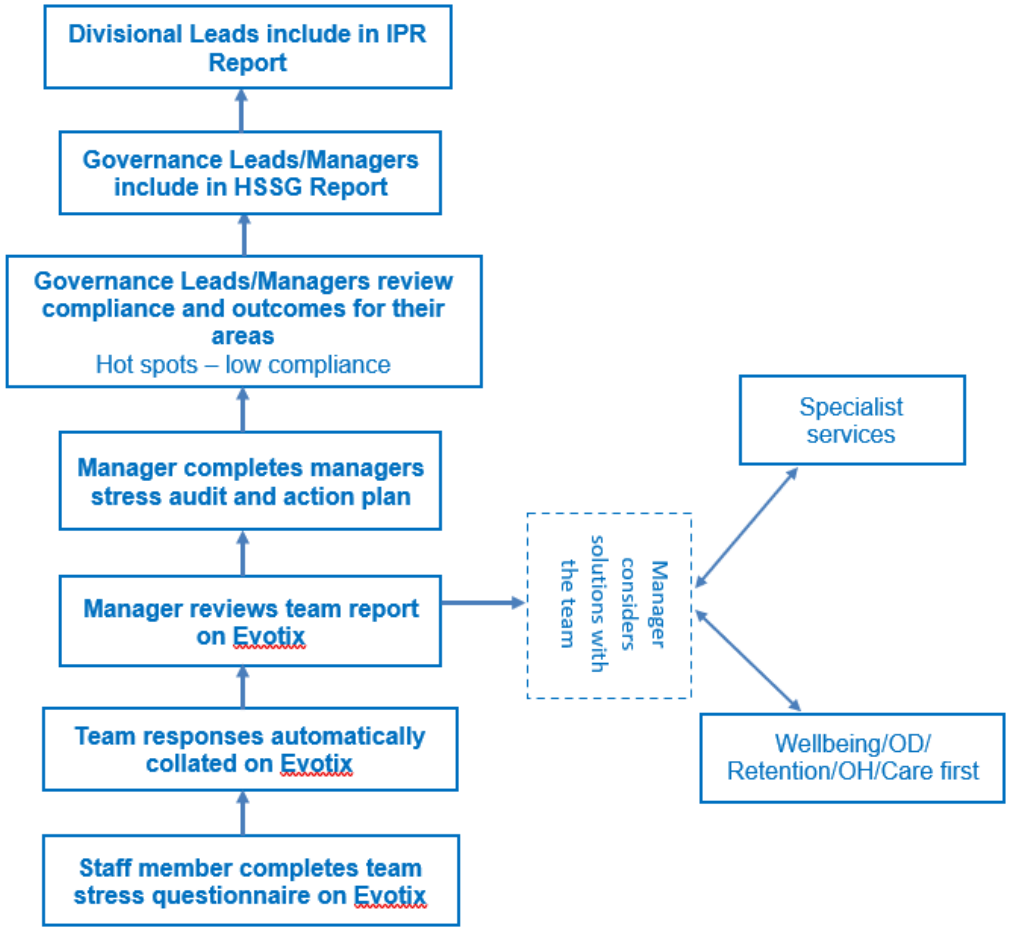
Responsibility Tree for Team Stress



Appendix G Individual Stress Risk Assessment.

East Sussex Healthcare
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Occupational Health
What matters to you, matters to us all

Individual Stress Risk Assessment

Please save a copy of this stress risk assessment on the employee's personnel file.
Individual stress risk assessments should not be recorded on [redacted]

Stress Risk Assessment	
Demands: Employees are able to cope with the demands of their jobs	**Answer (Yes/No)**
1.1. The organisation provides employees (including managers) with adequate and achievable workload	
Comments:	
1.2. Job demands are assessed in terms of quantity, complexity and intensity and are matched to people's skills and abilities.	
Comments:	
1.3. Employees have the necessary competencies to be able to carry out the core functions of their job.	
Comments:	
1.4. Employees who are given high demands are able to have a say over the way the work is undertaken (see standard on Control).	
Comments:	
1.5. Employees who are given high demands receive adequate support from their managers and colleagues (see standard on Support).	
Comments:	
1.6. Repetitive and boring jobs are limited, so far as reasonably practicable.	
Comments:	
1.7. Employees are not exposed to poor physical working environment (the organisation has undertaken a risk assessment to ensure that physical hazards are under	

appropriate control).	
Comments:	
1.8. Employees are not exposed to physical violence or verbal abuse.	
Comments:	
1.9. Employees are provided with mechanisms which enable them to raise concerns about health and safety issues (e.g. dangers – real or perceived), working conditions and work patterns and where necessary appropriate action is taken.	
Comments:	
Control: Employees have a say about the way they do their work	**Answer (Yes/No)**
2.1. The organisation provides employees with the opportunity to have a say about the way their work is undertaken.	
Comments:	
2.2. Where possible, the organisation designs work activity so that the pace of work is rarely driven by an external source (e.g. a machine).	
Comments:	
2.3. Where possible, employees are encouraged to use their skills and initiative to complete tasks.	
Comments:	
2.4. Employees are supported, even if things go wrong.	
Comments:	
2.5. Employees are able to exert a degree of control over when breaks can be taken.	
Comments:	
2.6. Employees are able to make suggestions to improve their work environment and these suggestions are given due consideration.	
Comments:	
Support: Employees receive adequate information and support from their Managers and Peers, (you may wish to comment separately for both).	**Answer (Yes/No)**
3.1. The organisation provides employees (including managers) with adequate support at work.	
Comments:	

3.2.	**There are systems in place to help employees (including managers) provide adequate support with their staff or colleagues.**	
Comments:		
3.3.	**Employees are encouraged to seek support at an early stage if they feel as though they are unable to cope.**	
Comments:		
3.4.	**The organisation has systems to help employees with work-related or home-related issues and employees are aware of these.**	
Comments:		
3.5.	**If there has recently been a traumatic or stressful event in the department the process for supporting staff has been followed: [redacted] completed, signposted to Wellbeing extranet page for TRiM or additional support, signposted to Violence & Aggression extranet page for guidance, referral to Occupational Health considered.**	
Comments:		
Relationships: Employees are not subject to unacceptable behaviour e.g. bullying at work		**Answer (Yes/No)**
4.1.	**The organisation has in place agreed procedures to effectively prevent, or quickly resolve, conflict at work.**	
Comments:		
4.2.	**These procedures are agreed with employees and their representatives and enable employees to confidentially report any concerns they might have.**	
Comments:		
4.3.	**The organisation has a policy for dealing with unacceptable behaviour at work. This has been agreed with employees and their representatives.**	
Comments:		
4.4.	**The policy for dealing with unacceptable behaviour at work has been widely communicated in the organisation.**	
Comments:		
4.5.	**Consideration is given to the way teams are organised to ensure that they are cohesive, have a sound structure, clear leadership and objective.**	

Comments:	
4.6. Employees are encouraged to talk to their line manager, employee representative, and external provider about any behaviour that is causing them concern at work.	
Comments:	
4.7. Individuals in teams are encouraged to be open and honest with each other.	
Comments:	
Role: Employees understand their role and responsibilities	**Answer (Yes/No)**
5.1. The organisation ensures that, so far as possible, the demands it places upon employees (including managers) do not conflict.	
5.2. The organisation provides induction for employees to ensure they understand their role within the organisation.	
Comments:	
5.3. The organisation ensures that employees (including managers) have a clear understanding of their roles and responsibilities in their specific job (this can be achieved through a plan of work).	
Comments:	
5.4. The organisation ensures that employees understand how their job fits into overall aims and objectives of the organisation/department/unit.	
Comments:	
5.5. Systems are in place to enable employees to raise concerns about any uncertainties or conflicts they have in their role.	
Comments:	
5.6. Systems are in place to enable employees to raise concerns about any uncertainties or conflicts they have about their responsibilities.	
Comments:	
Change: Employees are engaged frequently by the organisation when undergoing an organisation change	**Answer (Yes/No)**
6.1. The organisation ensures that employees (including managers) understand the reason for proposed changes.	
Comments:	
6.2. Employees receive adequate communication during the	

change process.	
Comments:	
6.3. The organisation builds adequate employee consultation into its change programme and provides opportunities for employees to comment on the proposals.	
Comments:	
6.4. Employees are made aware of the impact of change on their jobs.	
Comments:	
6.5. Employees are made aware of the timetable for action and the proposed first steps of the changing process.	
Comments:	
6.6. Employees receive support during the change process.	
Comments:	
Conclusion	
Conclusion	
Risk:	
Actions to eliminate, reduce or escalate work-related stressors:	

Appendix H: Psychological Safety