# Risk control

## Stress Risk Management for Emergency Services

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## Introduction

With the last decade of cuts to emergency services funding and increasing demand for service delivery with diminishing resources, emergency services frontline staff constantly find themselves being stretched.

The emergency services environment can be inherently challenging, with the additional burdens of renewed public scrutiny and belt-tightening pushing some workers to breaking point.

## What is Stress?

Stress is a major cause of sickness absence in the workplace and costs over £5 billion a year in Great Britain. It affects individuals, their families and colleagues by impacting on their health. Stress also impacts on employers with incurred costs including sickness absence, replacement staff, lost production and efficiencies, and increased accidents (ref 1).

Stress has been defined in different ways over the years. Originally stress was believed to be caused by the environment in which one was put or found oneself then, later, as a strain from within. Today the definition focusses on both the situation and the individual. Basically stress results from a lack of ability to cope with the demands and pressures of the situation (ref 2).

At one time or another most of us will experience stress. Some individuals find stress motivating whilst in others it can be debilitating (ref 3).

This document will focus on work related stress, its causes, signs and symptoms as well as management responsibilities and requirements to meet legal requirements.

## Work Related Stress

Work-related stress is one of the most commonly reported causes of occupational ill health in Great Britain, accounting for 40% of all work-related ill health cases, and 49% of all working days lost due to ill health in 2016/17. The emergency services along with other public services record the highest incidence rates of stress (ref 4)

Work-related stress is defined as a harmful reaction that people have to undue pressures and demands placed on them at work. By its very nature, stress is difficult to measure and HSE has two different data sources from which to conduct analysis. The preferred data source used by HSE for calculating rates and estimates for stress, depression or anxiety is the Labour Force Survey (LFS).

The LFS is a household survey consisting of around 37,000 households per quarter across Great Britain which provides information about the labour market. HSE commissions a module of questions in the LFS to gain a view of work-related illness based on individual perceptions (ref 5).

There are six main areas that can lead to work-related stress if they are not managed properly. These are: demands, control, support, relationships, role and change.

For example, employees may say that they:

— are not able to cope with the demands of their jobs

— are unable to control the way they do their work

— don't receive enough information and support

— are having trouble with relationships at work, or are being bullied

— don't fully understand their role and responsibilities

— are not engaged when a business is undergoing change

Stress affects people differently – what stresses one person may not affect another. Factors like skills and experience, age or disability may all affect whether an employee can cope (ref 6).

## Stress within Emergency Services

Over the years the emergency services have used various different means to manage work related stress. These have included processes designed to normalise emotional responses such as group debriefings. These critical incident stress sessions were team focussed and designed to allow all parties involved to realise that their response may be different but it is not wrong (ref.7). It has long been recognised that trauma and exposure to critical incidents can lead to Post Traumatic Stress Disorder (PTSD). Post-traumatic stress disorder has had a substantial impact on employer liability for workplace psychological injury. The emergency services are an example of high-risk workforces that demand clear policies and procedures within an organisation. The challenge is to minimise the injury to individuals and lessen the cost to organisations through the optimal application of preventative strategies. Organisations need to anticipate the possible traumatic exposures that may affect the workforce and have strategies to deal with the effects in the workplace, particularly the negative mental health outcomes in some personnel. This domain is relevant to all employers as accidents and violence are possible in most workplaces.

Screening should be considered for high-risk individuals, particularly following a major traumatic event or cumulative exposure, such as in the emergency services. While psychological debriefing has no demonstrated benefit, the benefits of early intervention necessitate ready access to evidence-based treatments that have minimum barriers to care. Managers within the emergency services should be aware that distress may present indirectly in a similar way as conflict with management, poor performance and poor general health (ref 8).

## Signs and Symptoms of Stress

These can be divided into two distinct areas for the workplace. There are 'team' signs but also individual ones.

## Teams

Teams can experience stress at times where there could be heightened or just simply unusual activity which removes them from their usual work place. Some simple signs can include;

— arguments

— higher staff turnover

— more reports of stress

— more sickness absence

— decreased performance

— more complaints and grievances

## Individuals

With individuals it is important that we look at the person to see how behaviour and attitude may have changed. Individual stress can manifest itself in various forms such as:

— mood swings

— being withdrawn

— loss of motivation, commitment and confidence

— increased emotional reactions – being more tearful, sensitive or aggressive

— becoming nervous or 'twitchy'

Or they may seek to remove themselves more from the workplace by:

— taking more time off

— being late or later to work or leaving earlier

## Stress Management Standards

The Health and Safety Executive (HSE) have laid out six key areas to support organisations in their task of managing stress in the workplace and failing to do so can negatively impact on employee's health and wellbeing.

The six areas are:

1 **Demands -** Includes issues such as workload, work patterns and the work environment.

2 **Control -** How much say do the people have over the way they work?

3 **Support -** Includes encouragement, sponsorship and resources provided by the organisation, line management and colleagues.

4 **Relationships -** Includes promoting positive working to avoid conflict and dealing with unacceptable behaviour.

5 **Role -** Do people understand their role within the organisation and does the organisation ensure roles are not conflicting?

6 **Change -** How organisational change is (large and small) managed and communicated?

It is important that each of these areas is identified and that systems are in place to respond to any group or individual concerns (ref 9). It is important that those involved in the Management Standards approach understand the need to focus on prevention and on managing the root causes of work-related stress, rather than trying to deal with problems only after they occur and people are suffering from exposure to excessive pressure. This will stop the problem from developing to the position where people are negatively affected.

The HSE has developed a stress risk assessment template to be used in managing this area of business which is available from their website (ref 10). These standards are equally applicable to any emergency service and provide a useful framework allowing the vast variety of differing stressors to be assessed.

## Management Intervention and Support

Line managers should be expected to identify potential traumatic or stressful situations and support staff through such events. Furthermore, managers should be trained to identify and support workers who may be having difficulties not just through those unusual and traumatic events but to general day to day issues. Employees should as a minimum have awareness training, needs-based interventions and access to independent counselling support services via the

Occupational Health team or Employee Advisory Service (EAS).

Some instances may require that the organisation has in place a system for on-going support for events that may be protracted and unusual. It is important that all employees should have access to an Occupational Health Service practitioner or some other qualified person.

It is vital that, where managers have themselves identified or had such events or issues brought to their attention, they ensure that wherever possible mitigating factors are put in place. Any person or persons identified as possibly being affected by such incidents should have properly trained interventions to assess what the need may be.

Most emergency services have a tradition of recognising and responding to employees who experience traumatic situations. Most utilise such systems as Trauma Risk Management (TRiM) and have identified staff members who have been properly trained and can deliver such interventions locally. However services also need to have identified processes that go beyond TRiM interventions to support staff who develop issues.

Services should have identified within any stress management policy the following three principle intervention types; primary, secondary and tertiary (see below table). Organisations need to be proactive in order to demonstrate both compliance with the Health and Safety Executive's Management Standards and protect their own employees from harm.


4 Managing Work Related Stress as part of a prevention culture; https://books.hse.gov.uk/gempdf/Managing_WRS_as_part_of_a_prevention_culture.pdf

5 Work-related stress, anxiety or depression statistics in Great Britain, 2019 https://www.hse.gov.uk/statistics/causdis/stress.pdf

6 https://www.hse.gov.uk/stress/causes.htm

7 Debriefing with emergency services: Critical Incident Stress Management - https://books.google.co.uk/books?hl=en andlr= andid=N4wrOjlZBjIC andoi=fnd andpg=PA91 anddq=stress+risk+management+in+emergency+services andots=Qn4_J9m9xi andsig=FavWZ3H1jkPUK2b5QBPVjzaUXOc#v=onepage andq=stress%20risk%20management%20in%20emergency%20services andf=false

8 Post-traumatic stress disorder in occupational settings: anticipating and managing the risk: Occupational Medicine 2007;57:404–410 doi:10.1093/occmed/kqm070 : https://academic.oup.com/occmed/article-abstract/57/6/404/1376894

https://www.hse.gov.uk/stress/standards/downloads.htm

HSE Resources: https://www.hse.gov.uk/stress/resources.htm


| Intervention Type | Response Type | Orientation | Focus | Example |
|---|---|---|---|---|
| **Primary** | Proactive | Prevention and Awareness | All employees/ Organisation wide | Conflict-management training, work management awareness, wellness programmes. TRiM awareness |
| **Secondary** | Proactive and potentially reactive | Prevention - Removal of risk | At risk employees and/or Organisational risk factors | Coping skills training, job redesign, employee fitness assessments, targeted attention on known risks.<br>TRiM intervention |
| **Tertiary** | Reactive | | Employees in need of support/assistance | Personal Cognitive behavioural intervention sessions, post illness support programmes, external independent counselling |

## References


1 Stress Workbook (HSE) https://www.hse.gov.uk/pubns/wbk01.pdf

2 Causes and management of Stress at work Dr S Michie: https://oem.bmj.com/content/59/1/67

3 Stress: https://www.nhs.uk/conditions/stress-anxiety-depression/understanding-stress

## Further information

For access to further RMP Resources you may find helpful in reducing your organisation's cost of risk, please access the RMP Resources or RMP Articles pages on our website. To join the debate follow us on our LinkedIn page.

## Get in touch

For more information, please contact your broker, RMP risk control consultant or account director.

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