

**A 'MANAGEMENT STANDARDS' APPROACH TO TACKLING WORK-RELATED
STRESS – PART II PRACTICAL DEVELOPMENTS**

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A 'MANAGEMENT STANDARDS' APPROACH TO TACKLING WORK-RELATED STRESS – PART II PRACTICAL DEVELOPMENTS

ABSTRACT

The British Labour Force Survey of 2001/02 (Jones *et al.*, 2003) indicated that an estimated 563,000 people in Great Britain reported work-related stress, depression or anxiety, and the onset for almost half of these was in the previous 12 months. The estimated prevalence rate of stress and related conditions has almost doubled since 1990, when there was already cause for concern. It is increasingly clear that the problem is not being adequately tackled using case-based methods. Research commissioned for the Health & Safety Executive (HSE) supports the view that a preventative, risk-assessment based approach would be a more effective way of achieving a nationwide reduction in work-related stress. The rationale and scientific underpinning for this approach is described and discussed in an accompanying paper in this issue (Mackay, Cousins *et al.*, 2004). This paper describes the development and validation of HSE's stress Management Standards, which essentially afford organisations continuous improvement through a three-phase preventative process, and the development of a supporting Indicator Tool. The Management Standards are comprised of a series of 'states to be achieved' which are essentially good practice in six key stressor areas: demands, control, support, relationships, role and change. An organisation's current state can be broadly assessed using a two-part Indicator Tool; liaising with workers in focus groups enables a further bottom-up exploration of issues raised, and formulation of interventions and subsequent review. HSE's specific aim is that the Management Standards and associated methodology will enable organisations to effectively tackle work-related stress, and subsequently reduce both its incidence and prevalence.

Keywords: Work-Related Stress, HSE, Management Standards, Risk Assessment

1 INTRODUCTION

Under the Health & Safety at Work etc. Act 1974, employers have a duty under the law to ensure, so far as is reasonably practical, the health and safety of their employees at work.

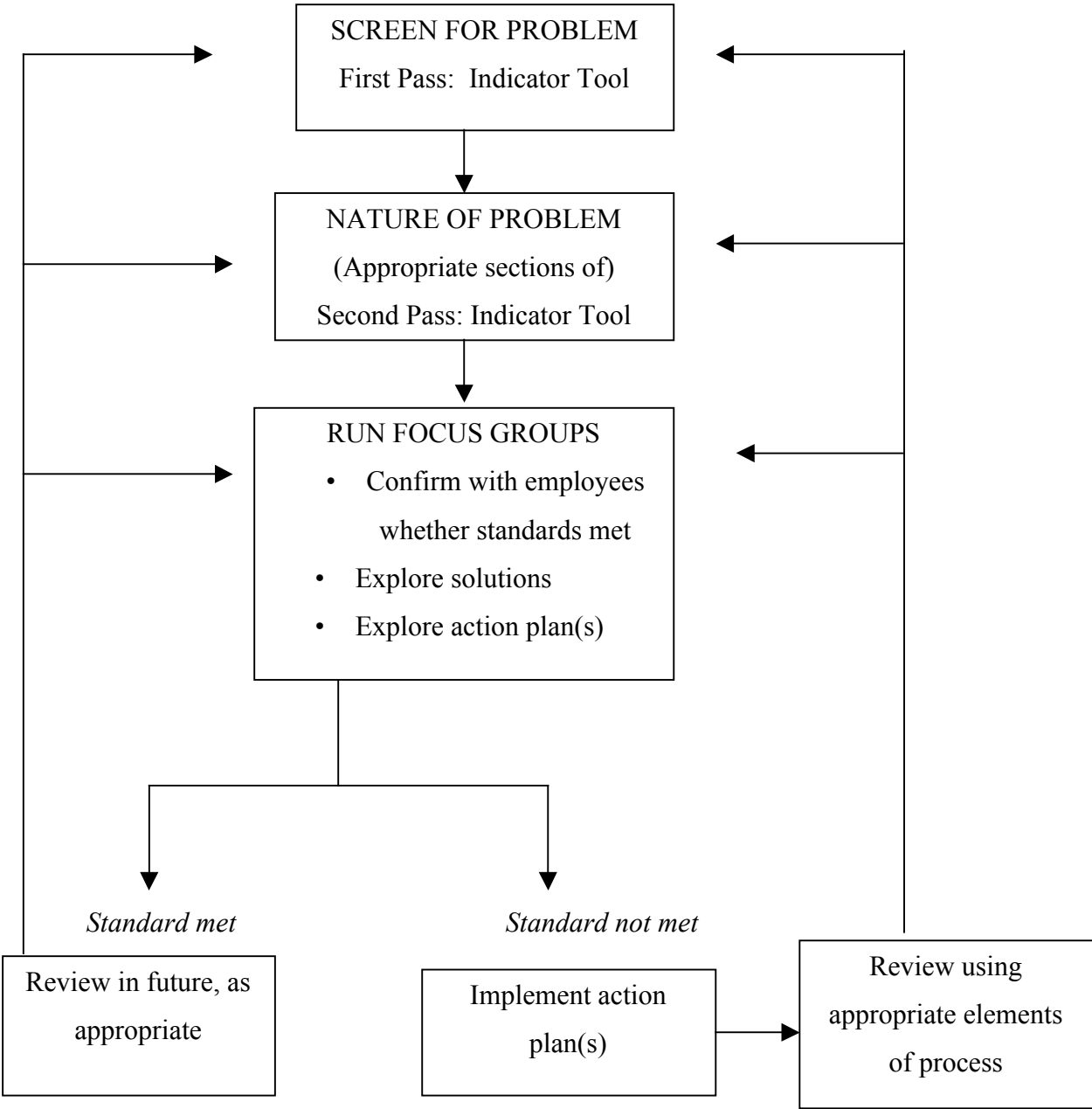
Initially the “duty of care” was focused upon physical well being, but with the increasing recognition that the experience of stress at work was having a negative impact on employees, there has been a shift in the interpretation to include both physical and mental well being.

In 1991, HSE commissioned an overview of the scientific literature to assess the nature of work-related stress and inform ways to tackle the problem (Cox, 1993) following on from recognition of the scale (Hodgson *et al.*, 1993) and importance (c.f. Mackay *et al.*, 2004) of this occupational health issue. In his seminal review, Cox noted that (1) there is evidence that the experience of stress at work is associated with changes in both behaviour and physiological function, which may both be harmful to employees’ health; (2) only a minority of organisations were purposely practising stress management in their workplace; (3) most stress management interventions (although not in Scandinavia) were individually focussed; (4) stressor reduction / hazard control is the most promising avenue for intervention; and (5) measurement of the current state of work-related stress and the effectiveness of an intervention requires a standard or target, to be meaningful.

A critical argument for tackling stress at work under the remit of health and safety law is that stress related to work must be risk assessed and managed like any other hazard (c.f. *Reducing Risks, Protecting People*, HSE, 2001). Cox and colleagues have advocated such a risk assessment approach for managing work-related stress (e.g. Cox, and Cox, 1993; Cox, and Griffiths, 1996), although Rick, and Briner (2000) have questioned its effectiveness, largely based on the difficulties in recognising psychological harm and hazards relative to their physical counterparts. Cooper, and Cartwright (1997) acknowledge these difficulties, but suggest that greater skills and training could enable adequate risk assessments for stress in organisations. Indeed, Cooper, and Cartwright go on to assert that health and safety authorities

in the UK and the EU should be “providing appropriate advice and support to organisations to enable them to perform their own [risk] assessment” (p.13) as an effective strategy for managing workplace stress. In line with this, HSE have developed the Management Standards programme, which is essentially a three-phase process based on a risk assessment to identify potential stressors in the workplace and associated targeted interventions.

Figure 1. The Process of doing a Risk Assessment for Stress



Timms (2004) presented the case that Standards are the cornerstone of sustainable risk control, and this should equally apply to psychosocial risk control. This is not new - Cox (1993) advocated that stress measurement has to be against standards or targets to provide any meaningful assessment. Much of the UK and EC legislation in Health & Safety sets out minimum acceptable standards, but, as Cox (1993) noted, organisations that are actively monitoring stress tend to be much more aspirational in their targets, preferring to evaluate their performance against standards of excellence. This suggests that a standard for assessing psychosocial risk factors associated with work-related stress should be much more informative than merely being a pass / fail marker. To be in line with HSE's aims of making a population shift towards improved health and safety through effective stress management, a standard that acts as a yardstick, to enable organisations to plot and target progress is likely to be most effective.

In April 1999, the Health & Safety Commission issued a Discussion Document called *Managing Stress at Work*, to encourage a debate about the best way to ensure risks from work-related stress in Britain are properly controlled. Eight hundred and forty five responses were received; these came from a wide-cross section of people. Overwhelmingly (98%), respondents thought that more needed to be done to tackle stress, and, (94%), that stress at work is at least partially a health, safety and welfare issue. Moreover, respondents broadly supported the concept that the ideal was to prevent stress before it occurred, through the adoption of good job design, and good management practices, in line with a risk assessment approach. A range of options from Regulations (i.e. enforceable legislation) to Approved Codes of Practice (ACoP – a quasi-regulatory tool) those endorsed guidance was suggested to support discussion of what action HSE should take on stress. However, there was no clear consensus. Comparison of employer and employee opinions indicated equal proportions were in favour of an ACoP. Of those calling for something else, employees preferred stronger action (i.e. regulation), whilst

employers preferred weaker action (i.e. guidance). The consultation also indicated that the proposed partnership approach would be favourably received.

Following from this, in 2000, the Health & Safety Commission (HSC) agreed to the development of a plan, involving key partners, to tackle work-related stress. This plan included work to develop clear, agreed standards of good management practice for a range of stressors with the option to develop an ACoP later being kept under review.

The remainder of this paper describes the methodology in the development of HSE's Management Standards approach. Briefly, there are three strands: Management Standards (and associated 'states-to-be-achieved'), the risk-assessment process, and an Indicator Tool. Piloting, evaluation and revision of these three distinct component parts was separate, although necessarily overlapping both in time and in practice.

To summarise, HSE's specific aim is that the introduction of Management Standards will enable organisations to adopt good management practices for tackling work-related stress, such that there is a reduction in the number of employees reporting that they suffer from work-related stress, and being absent from work as a result of workplace stress. In turn, this will contribute to the larger 10 year (2000 – 2010) *Revitalising Health & Safety* (DETR, 2000) targets to reduce the incidence of self-reported work-related illness by 20%, and to reduce the number of working days lost from work-related illness by 30%.

2 MANAGEMENT STANDARDS

As outlined in the companion paper on HSE's Management Standards approach (Mackay *et al.*, 2004), research has identified a taxonomy of work-related stressors. Specifically, there is accumulation of evidence that six particular stressors – demands, control, support, relationships, role and change have the potential to have a negative impact on employee well being (and productivity), regardless of type or size of organisation. HSE chose to focus on these six stressors to provide six Management Standards, and associated states to be achieved that

suggest generic principles and interventions which will achieve a positive effect for the workforce, and a reduction in the national incidence of work-related stress.

At the very beginning of our consultations, employers told us that any formal Standards should be written in plain English, short and succinct, and applicable across organisations, irrespective of sector or size. A steering group made up of representatives from HSE Stress Management Team² called upon knowledge from the literature and commissioned research to consider (a) what is good / best practice, and following from that, (b) what an organisation should be doing to manage threats to best practice, for each of the six areas we recognize as being central to managing work-related stress. The steering group developed a draft platform statement, that included a percentage *to act as a target*, and series of decrees, each essentially a “state to be achieved” that reflected some aspect of good management practice, for each of the six stressors: demand, control, support, relationships, role and change.

To consider whether the draft Management Standards adequately captured the principles of sound management practice to reduce the likelihood of work-related stress, the steering group organised a series of four workshops to consult with experts working in the stress field. The primary aim of the workshops was to guide the development and revision of the draft Management Standards so that the end product comprehensive enough to capture the key issues known to be associated with the particular work-related stressors, realistic of work situations, helpful to organisations in terms of intervening and fully accessible in terms of clarity.

2.1 Participants

The experts were drawn from a wide range of fields consistent with the multidisciplinary interest in work stress and included academics, trade union representatives, human resources specialists, lawyers, independent consultants, occupational psychologists and occupational physicians. An invitation to a workshop was sent out to all the experts we knew to be working in the area. To ensure that we canvassed the opinion of as many relevant experts as possible, we also used a snowball approach whereby invited recipients could pass on the information to

Figure 2. Draft Management Standard for Demands. Each of the six Management Standards has a “Platform Statement” that delineates how that Standard is achieved, and a series of “States to be achieved”, that outline organisational practices.

DRAFT STANDARD – DEMANDS

The organisation has achieved the standard if:

- at least 85% of employees indicate that they are able to cope with the demands of their jobs; and
- systems are in place locally to respond to any individual concerns

States to be achieved:

- The organisation provides employees (including managers) with adequate and achievable demands at work [D.S.1]
- Job demands are assessed in terms of quantity, complexity, and intensity and are matched to people’s skills and abilities [D.S.2]
- Employees have the necessary competencies to be able to carry out the core functions of their job [D.S.3]
- Employees who are given high demands are able to have a say over the way the work is undertaken (see standard on Control) [D.S.4]
- Employees who are given high demands receive adequate support from their managers and colleagues (see standard on support) [D.S.5]
- Employees in safety-critical roles are competent and able to cope with the pressures of their jobs [D.S.6]
- Repetitive and boring jobs are limited, so far as is reasonably practicable [D.S.7]
- Employees are not exposed to a poor physical working environment (the organisation has undertaken a risk assessment to ensure that physical hazards are under appropriate controls) [D.S.8]
- Employees are not exposed to physical violence or verbal abuse [D.S.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 working patterns (e.g shift work systems, uncertain hours, etc.) and where necessary appropriate action is taken [D.S.10]

others we may have missed, and experts who were not able to attend the workshops could contribute via a questionnaire that accompanied the first round of invitations.

Initially, 64 experts were invited to the first workshop in July 2003. That grew to 75 through additional snowball sampling of invitees. Of these 43 participants attended the workshop (and an additional eight experts who did not attend the workshop returned comments). This workshop was an all-day event held at Manchester Airport. The participants were largely academics and stress consultants but there were also Trades Unions representatives, and other relevant Occupational Health experts.

Approximately 86 invitations were sent out for the second workshop, resulting in 64 attendees. This all day workshop took place in September 2003 in a central London hotel. The participants were largely academics and stress consultants but also included Trades Unions officials, lawyers and some other Occupational Health experts.

Sixty-three participants attended the third workshop. This was incorporated into a CIPD *Managing Stress in the Workplace* training day in Manchester, November 2003. Half a day was given over to discussions of the draft Management Standards. All the participants were members of CIPD; most were working in Human Resources / Personnel offices of large Organisations, with a few working as independent consultants.

Thirty-five participants attended the fourth workshop, which was organised in partnership with the Advisory, Conciliation and Arbitration Service (ACAS). The participants were largely Trades Unions health and safety representatives. A full morning in November 2003 was dedicated to feeding back on the draft Management Standards.

2.2.3 Procedure

An introductory letter and background briefing note was sent to participants in advance of the workshops. On the day, there was also a succinct presentation of the aims and objectives of HSE's Management Standards. Delegates were randomly appointed to small groups of 10 –16, to deliberate the six Management Standards – and especially whether the states to be achieved

captured the issues associated with each of the six stressors adequately, noting gaps and overlaps.

Each workshop was facilitated by an experienced member of HSE's Stress Programme, supported by a dedicated note taker from HSE or CIPD. The workshops were deliberately solution focused – that is, when a problem or challenge was identified within the draft Management Standards, the group spend some time considering and suggesting the way to deal with it. A *rapporteur* for each group was appointed on the day to report back to other delegates in the feedback sessions. The *rapporteurs* were always one of the invited experts - independent of HSE.

The six Management Standards were explored separately; there was also time for consideration of the validity and design of the approach, and the use of target percentages as part of the Management Standards. All the points made by the experts were noted and collated for formal evaluation. It is worth noting here that similar points were being raised at each of the workshops, and this enabled us to be confident that we had fully analysed the potentials of the draft Management Standards.

2.2.4 Results of Evaluation

Workshop participants almost unanimously endorsed the idea of the Management Standards and the associated process. They particularly commended the value of an approach that moved away from merely identification of “stress”, and towards recognition that good management practices can avoid making people ill by their work. Delegates also welcomed an approach that was based on employee involvement, was outcome focussed, and which can run alongside existing organisational systems. It was noted that supporting guidance was essential, as some of the ‘states to be achieved’ were very general, and hence vague. This has been taken on board and guidance to accompany the Management Standards is now in preparation. A sample of the issues raised can be seen in Figure 3 below. (A more detailed summary can be obtained from the lead author, on request).

Figure 3. An example of issues raised and suggestions for improvement to the Management Standards 'states to be achieved' from expert and stakeholder consultation workshops 2003.

DRAFT STANDARD – DEMANDS

1. The organisation provides employees (including managers) with adequate and achievable demands at work

Challenges

- Problem with definitions – what does 'adequate' and 'achievable' mean?
- May not adequately address external pressures (e.g. visit from OFSTED)
- Consider scrapping as the principles are contained within other states. Either that or provide definitions and linkages to other standards
- Why are managers defined as a separate group of employees?
- Need to define what is reasonable and agreed in terms of time frame.

Recommendations

Guidance should define what 'adequate' and 'achievable' are and how organisations can work with employees to assess whether they have the right balance. This would also help to overcome the 'external pressures' point - would be part of the assessment.

2. Job demands are assessed in terms of quality, complexity, and intensity and are matched to people's skills and abilities

Challenges

- Wording will not work in a competency framework
- Statement is generic
- Needs to be split up to aid clarity – assessing 'quantity', 'complexity', and 'intensity' are likely to require different types of skills/information
- If Demand State 2 (above) were properly worded, then Demand State 6 would not be needed. Demand States 2 and 3 may also cover the same things.
- People's skills and abilities should be matched to the quantity, complexity and intensity of job demands – not the other way round.

The draft Management Standards contained 9 states-to-be-achieved for Demands, 7 for Control, 5 for Support, 7 for Relationships, 6 for Role, and 6 for Change. Following from the experts and stakeholders challenges, it was acknowledged that there were overlaps, a few gaps, and the potential for making the states to be achieved more focused and succinct. There was also a call for a clear ‘essence’ statement and for a revision of the platform statement of each Management Standard. Generally there was consensus on the issues raised - the major exception to this was with respect to the incorporation of percentages in the Management Standards. There was almost a 50-50 division for and against inclusion. Of particular note, there was concern about whether the given percentages (85% for Demands, Control and Support – based on evidence from Whitehall 2 (Head et al., 2002; Stansfeld, Head & Marmot, 2000), and the Bristol Study (Smith et al., 2000a; Smith et al., 2000b); and 65% for Relationships, Role and Change – based on the acknowledgement that the evidence base that these stressors have a negative impact on health is not as developed) was a true reflection of sufficient / satisfactory stress management; and, whether having a percentage that in essence served as a pass/fail target was in accord with the HSE’s broader aims of continuous improvement in stress management.

On the positive side, the inclusion of target percentages in each of the Management Standards was recognised as providing an encouragement – but it was acknowledged this would remain if there were benchmark figures in accompanying guidance. The status of the percentages - whether they remain part of the Management Standard, whether they are presented in guidance as a yardstick for motivation and encouragement, or whether they are not included at all, is to be explored further in the public consultation exercise in Summer 2004. Following from that, the *level* of any percentages associated with the Management Standards will be reviewed using evidence from ongoing research.

To summarise, the six draft Management Standards have been revised using the consensus of opinion voiced at stakeholder workshops. Each Management Standard includes a platform statement, and states to be achieved that are based on known best practice. The revised

Management Standards are comprised of 4 states to be achieved for Demands, 6 for Control, 6 for Support, 5 for Relationships, 4 for Role, and 5 for Change. The second draft Management Standards, with percentage issue, will be put out for public consultation Summer 2004, and further refined, as necessary, before the formal launch in Winter 2004.

Figure 4. Revised Management Standard for Demands. Each of the six Management Standards has a “Platform Statement” that delineates how that Standard is achieved, and a series of “States to be achieved”, that outline organisational practices.

<p style="text-align: center;">DEMANDS</p> <p style="text-align: center;">– includes issues like workload, work patterns and the work environment</p> <p><i>The Standard is:</i></p> <ul style="list-style-type: none">• [85% of] Employees indicate that they are able to deal with the demands of their jobs; and• Systems are in place for individuals’ concerns to be raised and addressed <p><i>States to be achieved:</i></p> <ol style="list-style-type: none">1. The organisation provides employees with adequate and achievable demands in relation to the agreed hours of work.2. Peoples’ skills and abilities are matched to the job demands3. Jobs are designed to be within the capabilities of employees4. Employees’ concerns about their work environment are addressed

3 PROCESS

To ascertain whether an organisation is adequately managing the potentials for work-related stress in their employees, and how they are doing, with respect to the management standards, the organisation will need to look at its policies, and ask its workers, essentially by undertaking a (regular) risk assessment for stress. HSE recognised that this could be difficult for those organisations that have never investigated whether they have a problem with stress. In response to this, HSE developed a simple risk assessment methodology, or *process*, as part of the wider Management Standards programme of work. The aim of developing a simple but specific process of doing a risk assessment for stress (see *Figure 1, above*) was to enable organisations to assess their current performance against the Management Standards, and to go on to investigate any problem areas that are identified in the initial stages further in consultation with employees and their representatives.

To examine whether the risk assessment process was suitable for stress management, HSE conducted a 12-month pilot exercise in a variety of volunteer organisations from both the public and private sectors. The aims of the pilot were to test:

- the given process of identifying hazards and introducing control measures for work-related stress; and
- the feasibility of implementing the draft Management Standards

As part of the exercise of validating the process, the ‘piloteers’ were given a draft version of the indicator tool, which they were able to pass comment on, however, the primary purpose of this pilot exercise was to determine the usefulness of the proposed risk assessment process. The indicator tool was formally refined using a separate, dedicated large pool of participants. This is described below in section 4.

3.1 Design

The Management Standards risk assessment process is essentially a structured inquiry of working conditions that aims, in the first instance, to identify broad areas of potential concern in a particular workplace, and then goes on to explore the specifics with a view to providing targeted and effective interventions. In practice, this means that all employees are given a two-part Indicator Tool¹, and then this is followed by more in-depth discussion (via a focus group) with a representative sample of employees (see *figure 1*, below) that is informed by the outcomes of the Indicator Tool. The ‘first pass’ part of the Indicator Tool serves as a screen for problems in a particular area, and the ‘second pass’ examines more specifically the broad nature of the problem in any of the six areas covered by the first pass of the Indicator Tool. The idea is that organisations can then “home in” or focus on the idiosyncratic specifics of a problem area identified by the Indicator Tool by consulting with a representative sample of employees, and draw up an action plan that includes interventions to manage the problem(s). We acknowledge that small enterprises, or those organisations that are well acquainted with their ‘hotspots’ may prefer to make greater use of the focus group phase; this is well within the remit of the approach.

3.2 Participants

Twenty-eight organisations initially agreed to pilot the Management Standards process. Two organisations withdrew very early on, due to incompatibility of the time limits imposed by the pilot exercise with structures for putting out staff surveys already in place in those organisations. Four other organisations withdrew during the course of the year, largely due to business pressures and large-scale change. The twenty-two organisations who remained committed to the pilot included both public and private organisations; the participating organisations were comprised of four government departments, five local councils and one other local government organisation, two energy production and supply businesses, a rail

engineering firm, a financial institution, an insurance company, two multinational manufacturing businesses, a university, a college, a NHS trust, a police force and a charity. Participants in the pilot included supervisors, managers, factory operatives, administrative staff, front line office staff, teachers, lecturers, salespersons, call centre staff, council employees, policemen, doctors, nurses and scientists. The total number of employees participating in the pilot exercise was approximately 11,000; the range was from 26 in one organisation to 6,000 in another.

The individual pilot organisations were able to select the part of their organisation to take part in the pilot. Some selected parts of the organisation so as to give a “diagonal slice”, whereas others chose to use a self-contained unit. Two of the smaller organisations included everyone in the organisation.

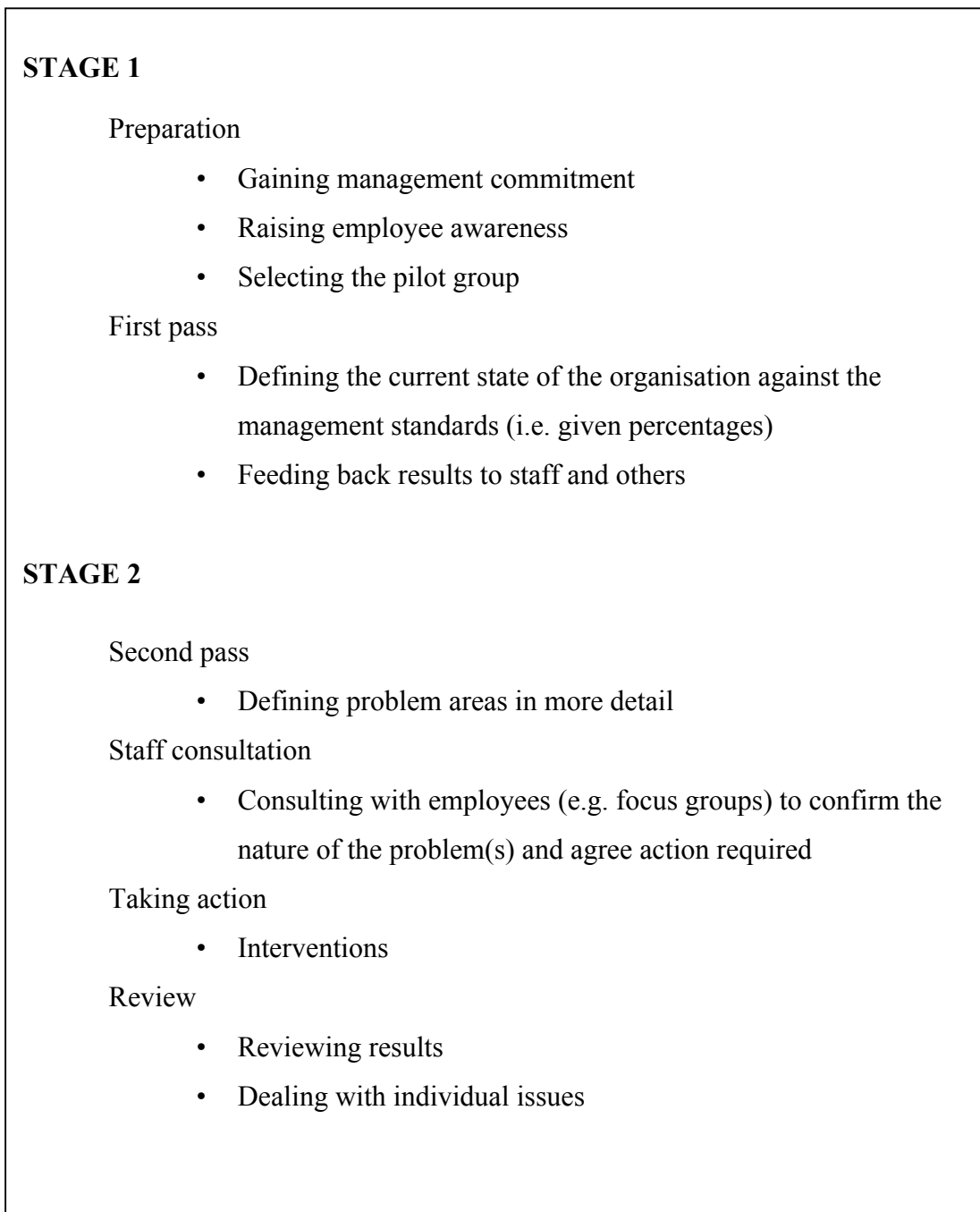
3.3 Procedure

The pilot study commenced in April 2003, and ran for 8 months until December 2003. The pilot organisations were given “The Management Standards Piloteers’ Pack” as a means of getting started, and each pilot organisation was assigned a “buddy” from the HSE Stress Team for support and feedback, as needed.

The pilot pack was essentially a resource guide that described the *Pilot Process*, (see figure 5, below), and gave details of each step of the process.

This pack was also released onto the HSE website (www.hse.gov.uk/stress), so other organisations could make use of the initiative. The fact that the contents of the pack were developmental was clearly noted on the cover, and the fact that both the Indicator Tool, and the Management Standards were still in draft format was clearly emblazoned on the documentation. HSE was content for the information to be used and encouraged feedback and comments for the further development of the materials.

Figure 5. The Pilot Process



The remainder of this section gives a flavour of the experimental work involved in piloting the process. We must emphasize here that the process was designed to be flexible, and as a consequence of this there were differences in interpretation and action in the different organisations that took part in the pilot.

First, the pilot organisations administered the six-items of the first pass of the Indicator Tool to employees. This was achieved using paper copy, by email, and by local intranet. The responses were then loaded into an Excel database provided by HSE. The database allowed computation of the percentage of employees that endorsed the “good” aspects of each question (e.g. always, often). These percentages were given and presented using a traffic lights analogy to show their relationship to the figures of the Management Standards. That is, organisations were given a “green light” if they achieved the draft Management Standard threshold of 85%³ of employees endorsing the positive alternatives to Demands, Control and Support, and 65%³ of employees endorsing the positive alternatives to Relationships, Role and Change. Green was used to indicate that employees, as a group, were not experiencing work-related stress because of a problem in that specific area, and therefore there was no need to go on to investigate that particular domain further using the second pass of the Indicator Tool. However, ‘scores’ less than the standards given above – as indicated by an amber or a red – were to be seen as indicating a problem in that area, and here the second pass should be given to further define the problem.

The second pass of the Indicator tool can be different for different organisations, as it is tailored to comprise of only items from those areas that had not reached the target percentage of the relevant Management Standard. Some organisations told us, however, that they had used all of the second pass because were not confident of the results they had achieved from the first pass – for example, because despite reaching the target percentage of a Management Standard, they had a known problem in that domain(s), or because they had achieved border line ‘pass’. These had thus gone on to run more of the second pass questionnaires than the process dictated, or indeed all the second pass questionnaires, and this gave us additional useful information. Employee data from the second pass of the Indicator Tool was entered into Excel databases, in the same way as at first pass, for calculation of the percentage of employees endorsing each of the items at second pass. A similar traffic light system was used at second pass.

There were three organisations that used their own staff survey, which was redefined in terms of the six Management Standards for the purpose of piloting the Management Standards process. One organisation acknowledged they had a gap in what was being asked in one stressor area, so they inserted a couple of additional questions. At the evaluation of outcomes stage, a very similar system of using percentages to consider employee's perceptions of working conditions was used.

The feedback from the two phases of the Indicator Tool allowed organisations to begin to see strengths and weaknesses in their approach to stress management. To move this forward towards improving the situation, the third phase of the process is to run a series of focus groups, to allow employees to confirm or challenge the nature of problems identified by the indicator tool, to explore the issues further and define them in more detail, to be able to raise additional locally relevant issues, and critically, to suggest ways of improving the situation. To help organisations with this third, crucial, phase HSE developed an interventions guide (*Real Solutions, Real People: a manager's guide to tackling work-related stress*; HSE, 2003) which includes additional information on the risk assessment approach, basic good advice in the form of a series of "dos and don'ts", 18 case studies outlining effective interventions that can be generalised to other situations, and guidance towards making an action plan for stress management. We suggested that organisations might benefit from considering the interventions made in the selected case studies in this publication as a means of getting started with their own situation.

Whilst the piloteer organisations had a great deal of autonomy in the way they participated in the Management Standards pilot, they were also given substantial support from HSE. This took the form of the provision of materials, having a dedicated buddy to assist with any queries they had, and regular feedback meetings with HSE's Stress Team and other Piloteers to share experiences. Feedback to HSE came via the buddying system and via a formal follow up by psychologists at the Health & Safety Laboratory (HSL)⁵.

3.4 Results and Outcomes

The organisations that piloted the process developed to support the Management Standards all fully endorsed the methodology. The risk assessment process using an Indicator Tool together with consultation with employees to “manage stress together” was deemed to be effective.

To further explore the intricacies of the proposed Management Standards programme, the pilot organisations were also asked to report on other practices they may have undertaken in the course of piloting the proposed methodology for the Management Standards:

How easy was it to secure senior management commitment? How was this achieved? The Piloteers all confirmed that senior management commitment was critical to the success of any stress management initiatives. Whilst there was not a major problem with any of the participating organisations, the drive for participation for most organisations was coming from Human Resources or Occupational Health Departments, so the need for a business case was seen as the way forward. HSE had provided a draft business case for the Piloteers, and their feedback will help inform revisions.

How well did the process fit into existing HR policies and processes? Some organisations reported that they would have to make changes to staff surveys, and their timings. Most were not currently consulting with their employees in the form of focus groups on a regular basis. Critically, the responses given were that the process would work well within current practices. There were some fears of ‘questionnaire fatigue’, but that was largely because the pilot phase was taking place on top of what the organisations were currently doing.

How accurate were the supporting tools in identifying key risks areas? Piloteers recognised that some of the questions being asked were better than others. They called for revisions to items that, for example, were seen as being part of the job, or were ambiguous. Feedback to this section informed revision of the indicator tool, as described elsewhere in this paper. There were also some queries about the scoring methodology used in the Excel tool; specifically there were

queries about the transformation of a 4-point scale to a dichotomous format for translating the responses. For some items this did not work well, but this has been addressed in the revised Indicator Tool.

Were there gaps in current guidance and supporting information? The consensus was that the information provided was comprehensive.

(Piloteers were also asked about the costs of implementing the Management Standards, whether any savings had been identified, and whether they had been any other unforeseen benefits or downsides. The evaluation of these responses is outside the scope of this paper and will be presented elsewhere).

As reported above, the draft Management Standards – indicator tools and process – were posted on the HSE website in June, making them available to other organisations for use, and enabling them to feed back on their experiences. HSE received almost a thousand feedback emails; the majority were positive, and very supportive of the whole package. Only two were negative – the first was a complaint about not being able to get some peripheral information, and the other was airing a view that tackling stress would make UK plc anti-competitive, and ultimately be bad for business – which HSE would strongly argue is not the case.

To summarise, the process associated with the Management Standards was successfully applied in the 22 organisations that took part in HSE's pilot exercise. This has been further endorsed by other organisations who have used the materials on the website without the support of HSE. The risk assessment process described above and depicted in figure 1, provides an effective approach to managing work-related stress.

4 INDICATOR TOOL

HSE research has shown that no single questionnaire, on its own, is sufficient to assess all risks of work-related stress (Rick *et al*, 2001). Nevertheless, in the context of additional inquiry - such as the three-phase Management Standards approach - a questionnaire could be supportive. To this end a questionnaire was developed to support the process (described above), but accepting the known limitations of structured questionnaires it was initially labelled a 'Filter Tool', and later termed an 'Indicator Tool' to reflect its ability to provide only a broad indication to organisations of how well their workforce considers they are performing in managing the risks associated with work-related stress.

4.1 Pilot stage

The first draft of the Management Standards Indicator Tool, which was used in the piloting of the process, described above, consisted of 6 'first pass' questions (one each for the 6 Management Standard areas of demands, control, support, relationships, role and change; see Appendix 1) and 39 'second pass' questions (4 for demands, 15 for control, 6 for support, 6 for relationships, 4 for role and 4 for change; see Appendix 2). It essentially employed the Karasek items for demand, control and support, as adapted by (Marmot, Davey Smith, Stansfeld *et al.*, 1991) for Whitehall II studies of stress and health outcomes; the items for relationships, role and change and the first pass were novel - based on an assessment of their face validity relative to the respective Management Standard.

The use of a 'first pass' screen was strongly supported in early discussions between HSE and businesses. It should be noted, however, that whilst the majority of Piloteers went along with this suggested methodology, some preferred to go straight in at the second pass stage. This is perfectly acceptable, it supports the flexibility of the process; the risk assessment is not jeopardised.

4.2 Revision of draft Indicator Tool after pilot stage

Feedback from the pilot organisations and examination of the full scope of each Management Standard strongly suggested that the Indicator Tool needed development. To this end the authors undertook a review of items that had been used to assess work-related stress in the published literature was undertaken. This included revisiting the measures reviewed by Rick *et al.* (2001), measures that are being used elsewhere in Europe (e.g. APP; Runeson, & Kjölrsrud, 2002; COPSOQ; Kristensen, & Borg, 2000, Kristensen, 2002; SIGMA; Salewski-Renner, Zimolong, & Windel, 1997), published Whitehall II papers (c.f. Head, *et al.*, 2002, Appendix B), recent specific measures of distress (e.g. Cousins, *et al.*, 2002), and the items constructed for piloting the risk assessment process. Following from this study, 100 question items that broadly represented all aspects of the 6 Management Standards were selected towards developing an indicator tool that was statistically reliable and valid.

Questions were largely accurately copied into the item pool, but some were slightly altered to enable them to be answered according to our preferred 5-point Likert scale format. We used two alternative response formats: a frequency response (always to never) and an agree format (strongly disagree to strongly agree).

The 100-item 'pool' questionnaire was piloted in the Children and Family Services (CFS) Division (which includes the education sector) of Hertfordshire County Council. The questionnaire was distributed in 611 batches through Heads of local units of CFS. In total 16,016 questionnaires were sent, but the exact numbers of staff receiving these is unknown as there were inaccuracies in the staff database. However, 3147 questionnaires were returned completed. Based on questionnaires sent this represents a response rate of 19.5%, although given that original total staff numbers were estimated at nearer 15,000 the response rate was probably a little higher.

4.3 Analyses and Revision

The data from the 100-item 'pool' questionnaire ($N = 3147$) were entered into a database in SPSS version 10. An exploratory factor analysis was used to extract factors best representing the six Standards areas. Given the known overlap of the stressor areas represented in the Management Standards, an oblique Promax rotation method was employed to ensure maximal loading on the factors extracted.

The factor extraction was initially performed on a random 50% of the data and the number of factors extracted was based on an assessment of the Scree plot, consideration of the six Management Standards and assessment of the proportion of variance explained by an increasing number of factors. Initially eight factors were extracted on this basis. The factor structure was re-assessed in various sub populations by age, sex, occupation and early and late response. Items were removed one or two at a time and the factor structure reconsidered.

A number of criteria were applied to reduce the scales. Item removal was based on low factor loading, and not being conceptually distinct (i.e. loading on more than one factor, and / or items appearing in different factors in different subgroups). One of the factors disappeared during this process. The aim was to ensure all factor loadings per factor were as high as possible and definitely greater than 0.5 on the loading factor.

Correlations between items within the 7 factors were then assessed. Correlations greater than 0.7 resulted in removal of one of the items on the basis of that these item pairs were basically asking the same thing (c.f. Cohen & Cohen, 1983). The criteria for choosing which item to discard were (lower) factor loading and perceived face validity. The resultant factor structure was then tested in the second random 50% data sample ($n = 1575$) to ensure its stability.

The final factor loadings from the full dataset along with individual scale reliabilities are shown in table 1 below.

Table 1. Promax Factor Analysis of Indicator Tool

Scale and Item	Loading	–
DEMANDS		.89
I am pressured to work long hours	0.785	
I have unachievable deadlines	0.773	
I have to work very fast	0.803	
I have to work very intensively	0.767	
I have to neglect some tasks because I have too much to do	0.754	
Different groups at work demand things from me that are hard to combine	0.660	
I am unable to take sufficient breaks	0.612	
I have unrealistic time pressures	0.839	
CONTROL		.78
I can decide when to take a break	0.780	
I have a say in my own work speed	0.711	
Do you have a choice in deciding what you do at work?	0.712	
Do you have a choice in deciding how you do your work?	0.697	
I have some say over the way I work	0.542	
My working time can be flexible	0.635	
SUPPORT - MANAGERIAL		.87
I am given supportive feedback on the work I do	.658	
I can rely on my line manager to help me out with a work problem	.652	

I can talk to my line manager about something that has upset or annoyed me about work	.736	
I am supported through emotionally demanding work	.621	
My line manager encourages me	.765	
SUPPORT - COLLEAGUE		.81
If work gets difficult, my colleagues will help me	.865	
I get help and support I need from colleagues	.850	
I get the respect I deserve from my colleagues	.560	
My colleagues are willing to listen to my work-related problems	.751	
RELATIONSHIPS		.78
There is friction or anger between colleagues	0.615	
I am subject to personal harassment in the form of unkind words or behaviour	0.828	
I am subject to bullying at work	0.827	
Relationships at work are strained	0.596	
ROLE		.83
I am clear what is expected of me at work	0.802	
I am clear about the goals and objectives for my department	0.663	
I know how to go about getting my job done	0.836	
I am clear what my duties and responsibilities are	0.828	
I understand how my work fits into the overall aim of the organisation	0.622	

CHANGE		.83
Staff are consulted about change at work	0.855	
I have sufficient opportunities to question managers about change	0.677	
When changes are made, I am clear how they will work out in practice	0.755	

Loadings are for Promax rotation. Total variance accounted for = 62.58%. Scale reliabilities measurements: Cronbach's alpha. To summarise, the revised Indicator Tool is comprised of 35 items and seven subscales. There is one factor for each of demands (8 items), control (6 items), relationships (4 items), role (5 items) and change (3 items), with the factor analysis indicating that *Support* is made up of two distinct factors according to source. It makes intuitive sense that there is a difference between managerial support (5 items) and peer support (4 items); and to appreciate the distinction should be helpful if an organisation is considering ways to support their workforce (see Appendix 3).

4.2.1 Development of first pass tool

The next step is to develop a first pass from the reliable and valid items identified by the analyses on the larger pool of relevant items. Whilst it would be feasible to just use the large sample we already have, a much stronger case is made for testing in a nationally representative population. Therefore, HSE has commissioned modules in two National Omnibus Surveys (February and March 2004) as a vehicle for identifying potential first items - as well as further validating the Indicator Tool in a very large nationally representative population and ascertaining baseline levels for measuring the anticipated population shift. This study will be published elsewhere.

DISCUSSION

In this paper we have presented empirical evidence to validate the draft Management Standards and associated methodology. In the accompanying paper, Mackay *et al.* (2004) described the scientific underpinning for HSE's Management Standards – essentially a hypothesis, and here we describe the methods we have used to test the hypothesis that HSE's Stress Management Standards campaign is practical and acceptable in the 'real world', and critically, is also scientifically valid.

In the early stages there was some debate about whether stress management standards should define a *process*, or an *outcome*. Because there is no evidence that simply engaging in a specific process to manage stress, for example, by introducing a "stress policy" or carrying out a risk assessment in a specific way, will necessarily reduce the risk of harm to health, HSE favoured Management Standards for stress as outcome standards. We are now at the point where we can assert that adopting the methodology of the Management Standards will normally mean that an organisation is doing enough to comply with the law. Further, the organisation is likely to benefit from a reduced risk of work-related stress and improvements in the way the work is currently designed. This in turn is likely to have a positive impact on organisational productivity and performance.

The Management Standards have been developed using a robust, bottom-up, qualitative approach that included consultation with as many stakeholders as appeared to be necessary; supporting tools have been developed and validated using quantitative scientific principles. The first draft of the Management Standards was based on documented knowledge to provide a firm foundation for refinement using input from expert stakeholders on fitness-for-purpose. The number of experts workshops we held was not pre-determined: it was the realisation that we were not getting new comments at subsequent workshops, but only similar observations, that enabled us to decide that we probably had enough material with which to revise the draft

Management Standards. The *states-to-be-achieved* were revised by taking on board issues on which there was consensus, as described above.

The status of the target percentages – whether they are an integral part of the Management Standards as compliance statements, or whether they are presented in supporting guidance as an indication of how well the organisation is doing will be subject to the outcomes of the three month *Stress Management Standards Consultation Campaign* (launched 25.05.04). There are strengths and weaknesses to both positions, as described in Part I (Mackay *et al.*, 2004), but critically, both alternatives have the potential to embrace HSE’s overarching goal for a population shift towards reducing work-related stress. Some expert commentators have also voiced concern regarding the *level* of the Standards – that is, the percentages associated with each of the Standards, in terms of their accuracy as a yardstick for effective stress management. We acknowledge that the 85% and 65% rules used in the pilot were essentially positioned, based on research that was indicative, rather than grounded. To address this, HSE is committed to attaining accurate baseline figures to support *Securing Health Together* targets from nationwide Omnibus Surveys that include the items of the Indicator Tool; the data from these surveys will also enable us to provide target figures. These will be available for the formal launch of the Management Standards. That said, the argument remains that a population shift towards better stress management, and continuous improvement within organisations is the main aim of the HSE Stress Programme, and this can and should be the aim of each individual organisation, regardless of their particular starting point.

Data from the nationwide Omnibus Survey will also be used to determine those items that will work best as ‘first pass’ indicators of stress in a specific area. The ‘first pass’ screen is a critical gateway to the risk assessment process, and any false negatives – i.e. the organisation getting response data that suggests that there is no problem when really there are aspects of stress management that could be improved upon, could be viewed as a critical flaw in the process. There was the potential for this in the pilot – mainly due to insufficiencies in the

questions being asked; this has been addressed. On the face of it, the presence of target percentages is pivotal to perceptions of whether the organisation has got through the ‘first pass’ screen, but if the percentages are presented as being *indicative* of the necessity for further action, and giving the ability to *prioritise* remedial interventions, then the potentials for not acting because employees seem to agree that all is well will be removed. We have mentioned that there was the potential for false negatives to be seen in the pilot, but this was actually limited just to the demands domain, and we acknowledge that the question being asked was not appropriate. It is worth reiterating, however, that even where this was the case, (confirmed by the pilot organisations data from use of the second pass Indicator Tool), there was still strong support for the two-phase screen approach. The pilot organisations told us that they found it helpful to be able to prioritise, via the use of the screen, and also to direct the ‘second pass’ inquiry towards improving their current situation. And, as mentioned above, it is completely acceptable for an organisation to skip the screen, and go straight in at the second pass stage; some organisations may prefer to have the greater depth of information in the first instance. The risk assessment model presented allows this flexibility.

The three-phase risk assessment approach followed from an appraisal of HSE’s work to develop an assessment of the risk of fatigue (Lucas *et al.*, 1997; Cowell, 1998), Health Education Board for Scotland’s *Work Positive* project (Health Education Board for Scotland, 2002), the conclusions of Rick *et al.* (2001), and stakeholder’s calls for a simple but relevant method for assessing stress in the workplace. The procedure of moving from a global, stressor-level screen (i.e. the first-pass Indicator Tool) to more indicative diagnostics (i.e. Indicator Tool or equivalent, and employee consultation via focus groups) to more clearly define problems towards providing effective, targeted interventions has been fully endorsed by those organisations who participated in the formal pilot. Other organisations who have used the Management Standards materials on HSE’s website (see www.hse.gov.uk/stress) also feedback that they approve the process.

Human Resources and Trades Unions expert stakeholders have told us that there is a growing acceptance that stress management is an important issue, but that work-related stress is more of a problem in some sectors than others. This implies that interim targets may be required to maintain a focus on continuous improvement, but alongside this there may be the problem of seeming to condone a situation in which some employees clearly report that they are stressed by some aspects of their work. Critically, there has to be a trade-off between what is pragmatically possible, and what is politically acceptable, and HSE's approach has to be to promote the notion of continuous improvement using the best solution following the *Consultation Campaign*.

We are confident we used a representative sample to pilot the process – both in terms of size range, and sector range. Experts have queried whether the approach will be practical in small businesses; it is true that none of the piloteer organisations truly fell into that category. Nevertheless, initial research has indicated that the risk assessment approach is still valid, and that in small businesses where the concept of survey anonymity is not feasible, then it is acceptable within the remit of the stress Management Standards to “start” at the focus group phase. A difficulty is that there is a dearth of research exploring stress management in small businesses. To address this problem HSE is commissioning research that will look at the effectiveness of the Management Standards approach to provide direction for guidance to those managing small businesses.

An important part of the Management Standards is that organisations do not just make an assessment to see if they have a problem with stress in the work place, but that they also work to eliminate or at least ameliorate the potentials for any identified stressor.

“One of the cardinal sins in the area of occupational health is to conduct elaborate studies, describing in considerable detail the work-related stress of the employees, its causes and consequences – and then leave it at that. To diagnose, but not to treat and even less to prevent, if this is done it adds insult to injury.” [European Commission, 2000]

To date, only a limited number of studies have monitored the impact of Stress Management Interventions (SMIs). Giga *et al.* (2003) undertook a review of extant UK-based SMIs in the scientific literature. They found that the majority (over 80%) were targeted at the individual level, while only 19% adopted strategies to intervene at the organisational level. The former interventions were largely employee assistance programmes (EAPs), or specific stress management techniques such as cognitive-behavioural therapy (CBT); the latter almost exclusively focused on job redesign and restructuring. As Giga *et al.* note, the overall lack of UK-based research on organisational interventions serves to hamper organisations adopting comprehensive stress management programmes.

Parkes and Sparkes (1998) looked more widely at the literature on organisational interventions, but even when including European and US studies, the scope of type of interventions was limited. Six of the nine case studies reviewed by Parkes and Sparkes use participatory action research (PAR), which allows employees to play more active roles in formulating their own interventions, as is endorsed in the Management Standards methodology. Disappointingly, they conclude that “the case studies outlined..... do not present a convincing picture of the value of organisational interventions” (page 43). In response, however, Griffiths (1999), argues that strict attempts to confirm cause-and-effect relationships to endorse the value of interventions are unnatural, and serve to decrease the value of interventions. She proposes that evaluating the effectiveness of interventions in terms of understanding mediating processes is a more (externally) valid approach to understanding work environments, which are essentially open systems not laboratories. There will be unavoidable constraints in many intervention situations, and it is right to acknowledge these rather than to focus on scientific rigour. Nevertheless, there remains the challenge for those working in the field to consider how best to intervene where there is a clear need for therapeutic action.

Jordan *et al.* (2003) undertook research to look for best practice in stress management, realising that it is not the norm for organisations to come forward and report what they are

doing about problems they have. They advertised for organisations to tell them of their methods of stress management. They found that, in the 19 organisations that completed their study, there were examples of very good practice in stress management, but that no one organisation was doing everything right. HSE supports the point that it is still worth supporting and promoting the good practice, even if there remain some weaknesses, for this still moves the organisation towards continual improvement, and the nation towards a population shift.

To summarise, HSE is actively supporting a programme of continuous improvement in stress management in the UK. To assist any organisation that wishes to embark on the Management Standards approach to stress management, HSE has developed a free, openly available, Indicator Tool. As described above, we have used a well-established scientific protocol to develop and validate a questionnaire that can reliably indicate whether and in what domain there may be stress-related problems in the workplace. With respect to the ability of this tool to relate to targets associated with the Management Standards – both at the level of the organisation, and the population – further work is necessary. HSE is currently participating in a nationwide National Statistics Omnibus Survey that will give baseline levels of work-related stress in the general population. Figures will be available from the Omnibus Survey before the launch of Management Standards (expected to be November 2004). There remains the need for a large longitudinal research study to (a) ascertain how well HSE's Indicator Tool maps onto states to be achieved and (b) derive weightings for prioritisation of interventions.

Notes:

1. The HSE Indicator Tool is essentially a two-part questionnaire that has been developed to enable all organisations to have access to a suitable measure of employee's perceptions of their working conditions. Use of HSE's Indicator Tool, however, is not mandatory, nor favoured above other formulations that can make a reliable and valid assessment of the risk of work-related stress in an organisation.
2. Psychologists, statisticians, epidemiologists and policy personnel.
3. For discussion of 85% and 65% thresholds used in draft Management Standards see Mackay *et al.* (2004).
4. The *Evaluation Of The Management Standards Pilot Study* undertaken by the Health & Safety Laboratories will be published May 2004 to coincide with the launch of the *Stress Management Standards Consultation Campaign*.

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APPENDIX 1

Draft First Pass Indicator Tool used in risk assessment process Pilot

Demands

1. I am able to cope with the demands of my job

Control

2. I am able to have a say over the way I do my work

Support

3. I believe that I receive adequate support and information from my colleagues and superiors

Relationships

4. I am subjected to unacceptable behaviours (e.g. bullying) at work

Role

5. I understand my role and responsibilities within the organisation

Change

6. The organisation engages staff frequently when undertaking organisational change

APPENDIX 2

Draft Second Pass Indicator Tool used in risk assessment process Pilot

Demands

1. Do you have to work very fast?
2. Do you have to work very intensively?
3. Do you have enough time to do everything?
4. Do different groups at work demand things from you that you think are hard to combine?

Control

1. Does your job provide you with a variety of interesting things?
2. Is your job boring?
3. Do you have to do the same thing over and over again?
4. Do you have the possibility of learning new things through your work?
5. Does your work demand a high level of skill or expertise?
6. Does your job require you to take the initiative?
7. Do you have a choice in deciding HOW you do your work?
8. Do you have a choice in deciding WHAT you do at work?
9. Others take decisions concerning my work
10. I have a good deal of say in decisions about work
11. I have a say in my own work speed
12. My working time can be flexible
13. I can decide when to take a break
14. I have a say in choosing with whom I work
15. I have a great deal of say in planning my work environment

Support

1. How often do you get help and support from your colleagues?
2. How often are your colleagues willing to listen to your work related problems?

Support from superiors

3. How often do you get help and support from your immediate superior?
4. How often is your immediate superior willing to listen to your problems?

Information from superiors

5. Do you get sufficient information from line management (your superiors)?
6. Do you get consistent information from line management (your superiors)?

Relationship

1. Does your organisation have an effective policy to prevent unacceptable behaviour (bullying and harassment) at work?
2. Does the organisation have effective procedures that enable you to raise concerns about the behaviour of others?
3. I know the organisation's policy for dealing with unacceptable behaviour at work
4. I am aware of the consequences of breaching the organisation's policy on unacceptable behaviour at work
5. Do you work in partnership with your line management to tackle unacceptable behaviour at work?
6. I am subjected to unacceptable behaviour at work and this has affected my health

Role

1. I understand how my work fits into the overall aim of the organisation
2. I often have several people giving me work and I am not always clear about what I am expected to do
3. I have a clear plan of work which is agreed by myself and my line manager

4. I am encouraged to talk to my manager at an early stage if I am not clear about my priorities or the nature of the task to be undertaken

Change

1. I receive information about planned organisational change at an early stage
2. I am given enough information to enable me to understand why organisational change needs to happen
3. The organisation communicates with employees regularly when going through change
4. I have the opportunity to comment and ask questions about organisational change before, during, and after it has happened

APPENDIX 3

IndicatorTool – Revised (Second Pass only).

Demands (8 items)

I am pressured to work long hours

I have unachievable deadlines

I have to work very fast

I have to work very intensively

I have to neglect some tasks because I have too much to do

Different groups at work demand things from me that are hard to combine

I am unable to take sufficient breaks

I have unrealistic time pressures

Control (6 items)

I can decide when to take a break

I have a say in my own work speed

Do you have a choice in deciding what you do at work?

Do you have a choice in deciding how you do your work?

I have some say over the way I work

My working time can be flexible

Managerial Support (5 items)

I am given supportive feedback on the work I do

I can rely on my line manager to help me out with a work problem

I can talk to my line manager about something that has upset or annoyed me about work

I am supported through emotionally demanding work

My line manager encourages me

Work Colleague Support (4 items)

If the work gets difficult, my colleagues will help me

I get help and support I need from colleagues

I receive the respect I deserve from my colleagues.

My colleagues are willing to listen to my work-related problems

Role (5 items)

I am clear what is expected of me at work

I am clear about the goals and objectives for my department

I know how to go about getting my job done

I am clear what my duties and responsibilities are

I understand how my work fits into the overall aim of the organisation

Relationships (4 items)

There is friction or anger between colleagues

I am subject to personal harassment in the form of unkind words or behaviour

I am subject to bullying at work

Relationships at work are strained

Change (3 items)

Staff are consulted about change at work

I have sufficient opportunities to question managers about change

When changes are made, I am clear how they will work out in practice

APPENDIX 4

HSE Management Standards (pre-consultation).

DEMANDS

- includes issues like workload, work patterns, and the work environment

The standard is:

- **[XX% of] Employees indicate that they are able to deal with the demands of their jobs; and**
- **Systems are in place for individuals' concerns to be raised and addressed**

States to be achieved:

- DS1: The organisation provides employees with adequate and achievable demands in relation to the agreed hours of work.
- DS2: People skills and abilities are matched to the job demands.
- DS3: Jobs are designed to be within the capabilities of employees
- DS4: Employees' concerns about their work environment are addressed.

CONTROL

- how much say the person has in the way they do their work

The standard is:

- **[XX% of] Employees indicate they are able to have a say about the way they work; and**
- **Systems are in place for individuals' concerns to be raised and addressed**

States to be achieved:

- CoS1: Where possible, employees have control over their pace of work
- CoS2: Employees are encouraged to use their skills and initiative to do their work

- CoS3: Where possible employees are encouraged to develop new skills to help them undertake new and challenging pieces of work
- CoS4: The organisation encourages employees to develop their skills
- CoS5: Employees have a say over when breaks can be taken
- CoS6: Employees are consulted over their work patterns

SUPPORT

- includes the encouragement, sponsorship and resources provided by the organisation, line management and colleagues

The standard is:

- **[XX% of] Employees indicate they receive adequate support at work; and**
- **Systems are in place for individuals' concerns to be raised and addressed**

States to be achieved:

- SS1: The organisation has policies and procedures to adequately support employees
- SS2: Systems are in place to enable and encourage managers to support their staff
- SS3: Systems are in place to enable and encourage employees to support their colleagues
- SS4: Employees know what support is available and how and when to access it
- SS5: Employees know how to access the required resources to do their job
- SS6: Employees receive regular and constructive feedback

RELATIONSHIPS

- includes promoting positive working to avoid conflict and dealing with unacceptable behaviour

The standard is:

- **[XX% of] Employees indicate they are satisfied with the behaviour of work colleagues, and;**
- **Risks arising from unacceptable behaviour are appropriately managed.**

- **Systems are in place for individuals' concerns to be raised and addressed [this includes individuals and organisation]**

States to be achieved:

- ReS1: The organisation promotes positive behaviours at work to avoid conflict and ensure fairness
- ReS2: Employees share information relevant to their work
- ReS3: The organisation has agreed policies and procedures to prevent or resolve unacceptable behaviour
- ReS4: Systems are in place to enable and encourage managers to deal with unacceptable behaviour
- ReS5: Systems are in place to enable and encourage employees to report unacceptable behaviour

ROLE

- whether people understand their role within the organisation and whether the organisation ensures that the person does not have conflicting roles

The standard is:

- **[XX% of] Employees indicate that their roles and responsibilities are clear and compatible; and**
- **Systems are in place for individuals' concerns to be raised and addressed**

States to be achieved:

- RoS1: The organisation ensures that, as far as possible, the different requirements it places upon employees are compatible
- RoS2: The organisation provides information to enable employees to understand their role and responsibilities
- RoS3: The organisation ensures that, as far as possible, the requirements it places upon employees are clear

- RoS4: Systems are in place to enable employees to raise concerns about any uncertainties or conflicts they have in their role and responsibilities

CHANGE

- how organisational change (large or small) is managed and communicated in the organisation

The standard is:

- **[XX% of] Employees indicate they are consulted about and offered the opportunity to participate in workplace changes; and**
- **Systems are in place for individuals' concerns to be raised and addressed**

States to be achieved:

- ChS1: The organisation provides employees with timely information to enable them to understand the reasons for proposed changes
- ChS2: The organisation ensures adequate employee consultation on changes and provides opportunities for employees to influence proposals
- ChS3: Employees are aware of the probable impact of any changes to their jobs. If necessary, employees are given training to support any changes in their jobs
- ChS4: Employees are aware of timetables for changes
- ChS5: Employees have access to relevant support during changes