Stress Management Policy

# Document Control:

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| Responsible Executive Director | Executive Chief People Officer |
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| Target Audience | This policy applies to all employees and workers engaged by the ICB. This includes temporary/bank/agency/work experience staff, students and volunteers. It does not include those engaged on a contract for service. |
| Stakeholders engaged in development of Policy (internal and external) | * Trade Unions |
| Impact Assessments Undertaken  *(Delete if non-applicable)* | * Equality Impact Assessment |

# Version History

| Version | Date | Author (Name and Title) | Summary of amendments made |
| --- | --- | --- | --- |
| 0.1 | Feb 2022 | Senior HR Business Partner | First draft ICB Policy |
| 0.2 | April 2022 | Viv Barnes, Governance Lead | Review of compliance with policy template |
| 1.0 | June 2022 | Senior HR Business Partner | Appendix updated re Health & Safety Lead responsibilities. Final draft for ICB approval |
| 1.0 | 9/8/2022 | Senior HR Business Partner | Final Review of Version 1.0 |
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## Introduction

The Integrated Care Board (ICB) organisation is committed to protecting the health, safety and well-being of employees and acknowledges the importance of identifying and addressing the issue of work-related stress by promoting an environment where individuals are encouraged to seek support and assistance when they feel that they are experiencing excessive levels of pressure or stress. The organisation has a responsibility to minimise the impact of stress related issues on the service provided and on the morale of colleagues and the team.

It is recognised that there are certain pressures inherent in any job and this can help employees perform more positively. Where pressure is positive it is a source of motivation, where it is negative it is experienced as stress and can be harmful. There are two levels of pressure:

* Too little pressure can lead to boredom, apathy and a lack of commitment.
* Too much pressure can lead to mistakes/errors being made, poor performance and may have an adverse effect on health and well-being.

Pressure or stress can also arise from an individual’s personal life and people vary in their capacity and ability to cope with different types of pressure. Although stress is not an illness there is evidence that it can lead to mental and physical ill health.

For example, physical effects may include:

* Heart disease
* Back pain, gastrointestinal disturbances and various minor illnesses

Psychological effects may include anxiety and depression.

## Purpose

The purpose of this policy is to reduce the potential health risks to staff through the effective management of work-related stress by making clear:

* The responsibilities of all staff in the assessment, reduction and (where possible) elimination of work-related stress.
* The process for accessing information regarding the management of work-related stress.
* The process for identifying workplace stressors.
* The requirement to undertake appropriate risk assessments for the prevention and management of work-related stress.

## Scope

This policy applies to all employees and workers engaged by the ICB. This includes temporary/bank/agency/work experience staff, students and volunteers. It does not include those engaged on a contract for service.

## Definitions

* Stress - the definition of work-related stress that the organisation has adopted is that used by the Health and Safety Executive (HSE).

*“Stress is the adverse reaction people have to excessive pressures or other types of demand placed on them at work.”*

## Roles and Responsibilities

### Integrated Care Board

* + 1. The ICB Board is accountable and responsible for ensuring that the ICB has effective processes for stress management in accordance with relevant legislation and best practice guidance.

### Chief Executive

* + 1. The Chief Executive is accountable for the policy and procedure being in place to ensure fair and equitable approach to stress management for employees.

### Policy Authors

* + 1. Policy authors are responsible for ensuring that this document is updated when any changes are made to the legislation or best practice.
    2. The HR department are expected to provide the following:
* Provide advice, support and training to promote understanding and good management practice under this policy and related policies
* Promote support mechanisms available to individuals and managers to manage and reduce stress
* Work closely with Occupational Health and Corporate Services to facilitate necessary actions to reduce stressors
* Provide (or make available) support and advice for staff in the event of them being called as a witness relating to internal procedures e.g. disciplinary matters. In addition, to ensure relevant line managers or appropriate other monitors ongoing support required
* Ensure this policy and procedure is easily accessible to all employees
* Ensure the policy is updated in line with current legislation and best practice
* Identify and monitor trends.

### Executive Chief People Officer

* + 1. The Executive Chief People Officer oversees the implementation of this policy and is responsible for ensuring that managers take action to meet the organisation’s obligations to ensure equity and consistency.

### Line Managers

* + 1. Day to day responsibility rests with line managers for the employees within their areas. Line managers, especially first line managers, have the main responsibility to:
* Recognise employees who may need help because of the impact of stress on their work performance or health.
* Be proactive in completing a risk assessment to identify excessive pressure and whether existing control measures preventing harm are sufficient, or if more should be done.
* Ensure safe working practices.
* Take reasonable steps to reduce pressure and workplace stress.
* Ensure members of their teams comply with all workplace procedures and processes to minimise or eradicate risks.
* Promote support mechanisms to members of their teams.
* Create a culture and environment of openness.
* Ensure clarity of job requirements, performance targets and workloads.
* Carry out regular appraisals (minimum annual), team meetings and 1-1’s and use as an opportunity to identify and discuss workplace stressors.
* Action any concerns or issues raised and seek professional advice or escalate as necessary.
* Communicate and promote all policies and procedures.

### All Staff

* + 1. Employees have a responsibility for dealing with stress in the workplace and should:
* Be aware of and recognise excessive pressures and highlight these to the organisation.
* Take responsibility for their own well-being.
* Play a full part in all of the measures proposed in this policy, including performance management, training, and communication of concerns and completion of stress surveys.
* Talk to their manager if they are experiencing problems regarding work-related stress.
* Protect their own and colleagues’ health & safety whilst in the workplace.
* Ask a Trade Union or other representative, such as an Occupational Health Practitioner to raise issues on their behalf where they feel unable to talk to their manager directly. Without this assistance the organisation cannot be expected to develop effective processes that support individual and organisational health.

## Legal Framework

Legislation under the European Framework Directive 89/391 introduces measures to encourage improvements in the health and safety of workers and covers work-related stress and its causes.

The Health & Safety at Work Act 1974 and Management of Health & Safety at Work Regulations 1999 require employers to ensure, so far as reasonably practicable, the health, safety and welfare of their employees and require employees to assess the risk of ill health arising from work activities and for that risk to be managed. The Health & Safety Executive has published a Guide for Managers on how to Tackle Work Related Stress which is available at the following link: <http://www.hse.gov.uk/pubns/stresspk.htm>

Employment Law case rulings and outcomes impact and affect the way the organisation manages cases, and this policy and related procedures will be reviewed against any further decisions relating to the management of stress in the workplace and amended where necessary.

The Equality Act 2010 means that mental illness no longer has to be clinically recognised to fall within the remit of a ‘disability’, therefore, ‘anxiety’, ‘stress’, and ‘depression’ may be covered by the Act, if there is a substantial and long-term effect (minimum 1 year) on an individual’s ability to carry out normal day-to-day activities (without medication).

## Identifying Stress

### Stress – Definition

* + 1. The definition of work-related stress that the organisation has adopted is that used by the Health and Safety Executive (HSE). “Stress is the adverse reaction people have to excessive pressures or other types of demand placed on them at work.”
    2. There is a distinction between pressure, which if managed correctly can be positive, challenging and motivating, and stress, which can be detrimental to health.
    3. This definition implies that individual members of staff react differently to situations and these differences need to be taken into account by managers. The HSE also highlights the principle that no one is immune to work-related stress.
    4. Some individuals will seek help whilst others may not recognise or acknowledge that they are pressured or stressed although this may be apparent to managers and colleagues. This policy sets out the Organisation’s response to dealing with stress when employees feel they cannot cope or when this has been recognised in an individual.

### Identification

* + 1. Pressure and stress is part of everyday life and a degree of pressure or stress is essential to keep us alert and out of danger. However, we all react differently; hence there is no one reaction or solution for all. You may find it helpful to ask yourself the following questions to assist in identifying if you are experiencing high levels of pressure or stress. This list is not exhaustive.
* Do you feel guilty when relaxing with a need to be constantly ‘on the go’?
* Do you sleep badly and worry about tomorrow?
* Do you feel continually tense?
* Is your behaviour changing – are you more impatient or irritable?
* Are you having difficulty concentrating?
* Are you smoking or drinking more?
* Have your eating patterns changed, are you not eating or eating more or eating at unusual times?
* Is life one big crisis?
* Are you having difficulty in making simple decisions?
* Are you experiencing ‘butterflies’ in your stomach, dry mouth, sweaty palms or thumping heart?
* Are you creating your own stress e.g. setting yourself unreasonable expectations of what you can achieve, not asking for help, regarding yourself as indispensable?

### Causes of Stress

* + 1. You need to identify the causes of your stress before a solution can be found. There are various causes of organisational stress:
* Change - which may involve changes to jobs or numbers of staff; how these are managed and communicated.
* Culture and Management Style – approach to work-related stress, empowerment of employees, control mechanisms.
* Relationships including issues such as bullying & harassment.
* Demands – workloads, exposure to hazards, expectation to work long hours.
* Support – lack of appropriate support from peers or managers; inadequate or inappropriate training.
* Role – lack of up-to-date job descriptions and employees’ understanding of their role in the organisation, or a lack of clear objectives and targets.
* Ineffective communications - the management of stress is more effective with employees informed and involved in dialogue.
* Environmental conditions e.g. heating, lighting, overcrowding, noise.
  + 1. There are many causes of personal stress including:
* Bereavement.
* Moving house.
* Changes in personal circumstances.
* Financial worries.
* Health worries.
* Work issues.
* Conflicting demands between home and work.
* Breakdown of marriage / personal relationship.

### Effects on the Individual

* + 1. The impact of stress and its effects on individuals is personal and makes recognising the symptoms difficult in some cases. There are differing indicators of stress on individuals. Symptoms may include the following:

**Behavioural changes**

* Poor concentration / loss of interest.
* Poor decision making / work performance.
* Loss of confidence.
* Lateness and absenteeism.
* Negative attitudes.
* Uncharacteristic errors.
* Over-reaction to problems.
* Gossiping, criticising, bullying & harassment.

**Emotional symptoms**

* Anxiety, irritation and depression.
* Low motivation.
* Frustration, anger.
* Low self-esteem.
* Tearfulness.
* Physical Effects.
* High blood pressure.
* Nausea.
* Loss of appetite / over-eating.
* Fatigue / sleeplessness.
* Backache, muscle tension, headaches.
* Increased consumption of alcohol, caffeine and tobacco.
* Lack of interest in appearance.
  + 1. Not all of the above changes may be stress related as other conditions such as tiredness may also result in similar changes.

### Effects on the Organisation

* + 1. High levels of stress within an organisation can manifest themselves in a number of ways:
* High staff turnover.
* High absenteeism, including stress related sickness.
* Poor timekeeping.
* Poor employee relations.
* High number of errors and mistakes / complaints.
* Increased Bullying & Harassment and Grievance issues.
* Increased accidents or near misses.
* Negative feedback in Staff Attitude Surveys.

### Costs of Stress

* + 1. The cost of occupational stress can be high. Individuals may be absent from work for a long period of time with their salary still being paid and perhaps a temporary member of staff employed to cover their work.
    2. There are indirect costs such as low motivation or reduced output leading to poor provision or low-quality services.
    3. There are direct costs associated with re-training or training employees because of loss of expertise, preventable accidents or litigation.

## Remedial Actions

### Holistic Approach

* + 1. Nurturing our physical health and emotional wellbeing helps to restore a sense of balance; individual’s experiences of stress will be unique, and they will have their own ways of dealing with it. Short term fixes complement long term prevention strategies, and it is both an individuals and managers responsibility to take actions to minimise stress in their lives where this possible.

### Individuals

* + 1. Individuals need to take time to identify the causes of pressure or stress. It may be helpful to list what you consider to be the causes and seek support to help you prioritise and deal with these. The following is be considered:
* A management referral to Occupational Health can provide assistance with identifying stressors and suggesting coping strategies to deal with them or recommend other professional bodies and sources of help that could assist you.
* A self-referral to the Employee Assistance Programme which can provide one to one counselling and other support. Information is available on the [intranet.](https://nhs.sharepoint.com/sites/99F_Connect/SitePages/Mental-Wellbeing.aspx)
  + 1. You need to make your manager aware of any issues that are causing you stress so that any necessary remedial actions can be put in place or actioned. If you feel that you cannot talk to your manager you should discuss the issue with another manager, HR, Unions or Occupational Health. Taking steps to resolve a problem will ensure that it does not escalate, either in your mind or in reality and thus cause you further stress or anxiety.
    2. If there are any colleagues within your team who are experiencing excessive pressure or stress, support them where you can and encourage them to discuss the issues with the most appropriate source of advice and assistance.
    3. You can help yourself to deal with your stressors:
* Talk to family, friends and colleagues to enlist their help and support.
* Know your limitations.
* Learn to say ‘no’ where appropriate.
* Make time for yourself.
* Maintain a healthy lifestyle and diet.
* Take regular exercise.
* Ensure you get a good night’s rest.
* Reduce or stop smoking.
* Listen to and action professional advice given to you.
* Do whatever you find relaxing.
* Keep within recommended alcohol intake levels – alcohol is a depressant.
* Draw up an action plan with small, manageable steps to address the stressors identified.

### Managers

* + 1. Where stress has been identified and is having an adverse impact on an employee or the organisation, remedial actions should be taken to address the issues.
    2. Managers should be monitoring their teams to identify any particular problems or stress- related areas of concern. These should include monitoring sickness absence levels and the reasons why; any incidents of bullying & harassment; grievances etc.; any health & safety incidents; accidents or near misses; holiday patterns – under use of holiday time or leave not taken until the end of the holiday year; work patterns – working an excessive number of extra hours.
    3. Each case should be treated individually; the impact of the same ‘stressor’ on individuals can be different. The following are some of the actions that should be considered:
* Changes to working arrangements / practices.
* Ensuring employees have clear guidelines for targets and standards communicated to them.
* Flexible working.
* Referral to Occupational Health.
* Stress risk assessment.
* Training in the areas of personal / life skills such as self-awareness, assertiveness, relaxation.
* Ensuring a good work life balance.
* Ensuring employees take regular breaks and leave their desks at lunchtimes.
* Appointing a ‘mentor’ or ‘buddy’ to work with the employee.
* Ensuring holidays are taken at regular intervals throughout the year.
* Praising a job well done.
* Saying ‘thank you’.

### Workplace Assessments

* + 1. Risk Assessments aim to identify, minimise and manage the risks associated with stress on an ongoing basis. Successful management of stress requires intervention at both an individual and organisational level.
    2. Where stress has been identified in individuals a risk assessment should be carried out using the five HSE recommended principles:

**Identify the hazards**

* **Demands:** workload issues, work patterns, work environment.
* **Control:** how much control the individual has on the way they carry out their duties and work.
* **Support:** encouragement, accessibility, feedback and communication.
* **Relationships:** management style, team dynamics.
* Role: knowledge of job requirements and demands.
* **Change:** how organisational change is communicated and managed.

**Decide who might be harmed and how**

* Physical: lethargy, nausea, high blood pressure, skin disorders.
* Behaviour changes: loss of confidence, avoiding certain people or tasks.
* Emotional: frustration, anxiety, anger, upset.

**Evaluate the risk by**

* Identifying what action you are already taking.
* Deciding whether it is enough; and
* If it is not, deciding what more you need to do.

**Record the significant findings of the assessment**

* Use the Stress Risk Assessment Form (available on the intranet [HR Forms](https://nhs.sharepoint.com/sites/99F_Connect/SitePages/HR-Forms-&-Documents.aspx)) of this policy to record the interview measures and actions.
* Review the assessment at appropriate intervals.

**Monitor and Review Action Plans and Assess Effectiveness**

* Monitor against your action plan to ensure the agree actions are taking place.
* Evaluate the effectiveness of solutions you implement.
* Decide what further action or data gathering, if any, is needed.
  + 1. The benefits of conducting a stress risk assessment include improved wellbeing and performance of an employee; commitment to resolving issues, a sense of being supported and valued and reduced levels of stress.
    2. Employees, managers and the Human Resources representative are free to suggest any other assessment tool that may be more suitable for the individual eg the Mind Wellness Action Plan.

### Stress Related Absences

* + 1. The processes related to sickness absence should be followed as detailed in the [Absence Management Policy](https://www.midandsouthessex.ics.nhs.uk/publications/?publications_category=icb-policies&page_no=3).
    2. It is important that a referral to Occupational Health is made and any assessments recommended carried. It is vital in these cases that employees should be treated with sympathy and understanding and that it is agreed with the employee how, and with whom, they will keep in touch during the absence.
    3. In cases of work-related stress, a Stress Risk Assessment (available on the intranet [HR Forms](https://nhs.sharepoint.com/sites/99F_Connect/SitePages/HR-Forms-&-Documents.aspx)) should be carried out, prior to the employee’s return to work where necessary to facilitate their return to the workplace or immediately on their return.
    4. Any measures or actions resulting from this should be actioned immediately and if this is not possible consideration should be given to making temporary amendments to the workplace, working patterns or environment to prevent further stress. All interviews and agreed actions should be documented.
    5. On returning to work after any absence, including stress related absences a ‘Return to Work’ interview should be carried out and where relevant, linked with a Stress Risk Assessment where this has not yet been actioned.
    6. Managers should ensure that the employee is not faced with an unmanageable backlog of work that has built up during their absence. Consideration should be given to a phased return to work and to ensuring any necessary training is provided.
    7. Employees occasionally experience stress after severely traumatic work-related incidents and the Organisation may need to arrange to provide specialist critical incident stress debriefing, in a group or on a one to one basis, to any employees who are affected, to assist them to cope. This support can be accessed through Occupational Health.

## Monitoring Compliance

The policy will be monitored through year-on-year analysis of absence statistics, utilisation of Staff Support and Occupational Health Services, Staff Attitude Survey and performance indicators. Any adjustments or changes made will be subject to consultation and, in the light of any local developments and relevant legislation will be communicated to all employees.

## Staff Training

No essential (including mandatory) learning and development requirements have been identified for any staff groups in order to fulfil the requirements stated within this policy.

Guidance can be sought from the Human Resources team.

## Arrangements for Review

This policy will be reviewed no less frequently than every two years. An earlier review will be carried out in the event of any relevant changes in legislation, national or local policy/guidance, organisational change or other circumstances which mean the policy needs to be reviewed.

If only minor changes are required, the sponsoring Committee has authority to make these changes without referral to the Integrated Care Board. If more significant or substantial changes are required, the policy will need to be ratified by the relevant committee before final approval by the Integrated Care Board.

## Associated Policies, Guidance and Documents

#### Associated Policies:

* [Absence Management Policy](https://www.midandsouthessex.ics.nhs.uk/publications/?publications_category=icb-policies&page_no=3).

## References

* Health and Safety at Work etc. Act 1974 (c. 37). London: Stationery Office.
* The Management of Health and Safety at Work Regulations 1999 London: Stationery Office.

## Equality Impact Assessment

The EIA has identified no equality issues with this policy.

The EIA has been included as **Appendix A**.

## Appendix A - Equality Impact Assessment

**INITIAL INFORMATION**

|  |  |
| --- | --- |
| **Name of policy:**  Stress Management  **Version number (if relevant): 1.0** | **Directorate/Service**:  People Services |
| **Assessor’s Name and Job Title:**  Carolyn Druce, HR Business Partner | **Date:**  29 April 2022 |

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| **OUTCOMES** |
| *Briefly describe the aim of the policy and state the intended outcomes for staff* |
| The purpose of this policy is to reduce the potential health risks to staff through the effective management of work-related stress |
| **EVIDENCE** |
| *What data / information have you used to assess how this policy might impact on protected groups?* |
| The ICB monitors the composition of its workforce under the nine protected equality characteristics and reports on this annually. This information helps the ICB to assess the potential impact of its policies upon staff. |
| *Who have you consulted with to assess possible impact on protected groups? If you have not consulted other people, please explain why?* |
| Relevant Trade Unions have been consulted on the policy and any comments will be taken into consideration. |

**ANALYSIS OF IMPACT ON EQUALITY**

The Public Sector Equality Duty requires us to **eliminate** discrimination, **advance** equality of opportunity and **foster** good relations with protected groups. Consider how this policy / service will achieve these aims.

N.B. In some cases it is legal to treat people differently (objective justification).

* ***Positive outcome*** *– the policy/service eliminates discrimination, advances equality of opportunity and fosters good relations with protected groups*
* ***Negative outcome*** *–**protected group(s) could be disadvantaged or discriminated against*
* ***Neutral outcome***  *–**there is no effect currently on protected groups*

Please tick to show if outcome is likely to be positive, negative or neutral. Consider direct and indirect discrimination, harassment and victimisation.

| Protected  Group | Positive  outcome | Negative  outcome | Neutral  outcome | Reason(s) for outcome |
| --- | --- | --- | --- | --- |
| Age |  |  | x |  |
| Disability  (Physical and Mental/Learning) | x |  |  | The focus of this policy is mental health wellbeing/stress. |
| Religion or belief |  |  | x |  |
| Sex (Gender) |  |  | x |  |
| Sexual  Orientation |  |  | x |  |
| Transgender / Gender Reassignment |  |  | x |  |
| Race and ethnicity |  |  | x |  |
| Pregnancy and maternity (including breastfeeding mothers) |  |  | x |  |
| Marriage or Civil Partnership |  |  | x |  |

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| **MONITORING OUTCOMES** |
| Monitoring is an ongoing process to check outcomes. It is different from a formal review which takes place at pre-agreed intervals. |
| *What methods will you use to monitor outcomes on protected groups?* |
| The policy will be monitored through year-on-year analysis of absence statistics, utilisation of Staff Support and Occupational Health Services, Staff Attitude Survey and performance indicators.  In addition, any issues in respect of the implementation of the policy will be identified as a result of staff exercising the ICB’s Grievance Procedure. |

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| **REVIEW** |
| *How often will you review this policy / service?* |
| This policy will be reviewed in 18 months or earlier if there are any significant changes in legislation, policy or good practice. |
| *If a review process is not in place, what plans do you have to establish one?* |
| N/A |

## Appendix B – The Role of Occupational Health

**Occupational Health**

The Occupational Health Department will:

* + Work with managers and individuals to identify the sources of stress and provide advice, support and training to managers and individuals as appropriate.
  + Promote health and well-being.
  + Recommend or facilitate risk assessments to identify the causes of stress in individuals.
  + Provide assistance in suggesting coping strategies and other sources of help and advice, including counselling where this is deemed appropriate.

## Appendix C – The Role of Health and Safety Lead

**The Health and Safety Lead will**:

* + Undertake workplace risk assessments and implement appropriate action to maintain and promote a safe and healthy working environment with minimum risks to employees’ well-being.
  + Work with managers and individuals to reduce environmental workplace stressors.
  + Provide advice to managers to support the management of stress.