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| **What are the Hazards** | **How might they be harmed and how** | **What are you already doing** | **Further Action** | **Action by who** | **Action by When** | **Done** |
| **Demands** | Shift working with limited support.  Busy times with lack of capacity  Unable to take breaks due to scheduling. | * Understanding what work-related stress is and what can cause it. * Responding to a pattern of complaints of work-related stress * Talking to employees * Adding breaks in rota when required | * Sign posting to NHS wellbeing support. * Signpost to PCN Wellbeing hub * Enhanced support and wellbeing plan for staff experiencing poor mental health. |  |  |  |
| **Control** | Control on how the work is done is limited as its very prescribed and booked appointments | * Talking to employees * Providing 1-1 and safe space to provide feedback | * Ask employee what they think and how processes can be improved. * Clear Strategy for nursing team and how they fit into the practice delivery model. |  |  |  |
| **Support** | Unable to access support | * EAP program for all PCN staff * 1-1s regularly with all staff * Debrief with senior nurse/GP | * Mental health first aiders * Develop a support statement. * Team Lunches/Breaks with * wider nursing team and clinicians |  |  |  |
| **Relationships** | Patients can be angry and demanding.  Trapped with patients in a room and unable to get out | * Follow up with abusive patients. * Zero tolerance signage in practice * Provide support post incident and time away from patients if required. * System 1 panic button * Clinical staff have a plan to get out their room | * Resilience training |  |  |  |
| **Role** | Changing job duties and undertaking tasks without proper support | * Defining roles with up-to-date job descriptions * Provide clinical training sessions. * Mandatory training * Clinical supervision sessions with peer | * Develop an induction process for each specific role. * Implement training plans for each specific role.   Allow to lead on a specific clinical area.   * Dedicated CPD time built into weekly rota. * PSD/PGD in place   . |  |  |  |
| **Change** | Fast paced change to cope with demand | * Making sure changes are communicated openly so everyone understands the effects they will have. | * Acting on employee feedback so any new pressures linked to changes are discussed |  |  |  |

**Management Standards**

* [Demands](https://www.hse.gov.uk/stress/standards/demands.htm) – this includes issues such as workload, work patterns and the work environment.
* [Control](https://www.hse.gov.uk/stress/standards/control.htm) – how much say the person has in the way they do their work.
* [Support](https://www.hse.gov.uk/stress/standards/support.htm) – this includes the encouragement, sponsorship and resources provided by the organisation, line management and colleagues.
* [Relationships](https://www.hse.gov.uk/stress/standards/relationships.htm) – this includes promoting positive working to avoid conflict and dealing with unacceptable behaviour.
* [Role](https://www.hse.gov.uk/stress/standards/role.htm) – whether people understand their role within the organisation and whether the organisation ensures that they do not have conflicting roles.
* [Change](https://www.hse.gov.uk/stress/standards/change.htm) – how organisational change (large or small) is managed and communicated in the organisation.