

**MANAGEMENT OF STRESS POLICY**

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| Version: |  |
| Date ratified: | 1 September 2020 |
| Policy Number | HR016/05/2023 |
| Name of originator/author: | Human Resources Manager |
| Name of Sponsor: | Accountable Officer |
| Name of responsible committee | Governance Sub-committee |
| Date issued: | September 2020 |
| Review date: | May 2023 |
| Target audience: | All staff working within or on behalf of NHS Sheffield CCG |

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[**http://www.intranet.sheffieldccg.nhs.uk/policies-procedure-forms-templates.htm**](http://www.intranet.sheffieldccg.nhs.uk/policies-procedure-forms-templates.htm)

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**POLICY AUDIT TOOL**

**Please give status of Policy: Revised**

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| **1.** | **Details of Policy** |  |
| 1.1 | Policy Number | HR016/05/2023 |
| 1.2 | Title of Policy: | Management of Stress Policy |
| 1.3 | Sponsor | Accountable Officer |
| 1.4 | Author: | HR Manager |
| 1.5 | Lead Committee | Governance Sub Committee |
| 1.6 | Reason for policy: | Legislative and best employment practice |
| 1.7 | Who does the policy affect? | All employees |
| 1.8 | Are the National Guidelines/Codes of Practices etc issued? | Health and Safety at Work Act 1974, Data Protection Act 1998, Management of Health and Safety at Work Regulations 1999, Working Time Regulations 1998 |
| 1.9 | Has an Equality Impact Assessment been carried out? | Yes |
| **2.** | **Information Collation** |  |
| 2.1 | Where was Policy information obtained from? | See 1.8 |
| **3.** | **Policy Management** |  |
| 3.1 | Is there a requirement for a new or revised management structure for the implementation of the Policy? | No |
| 3.2 | If YES attach a copy to this form. | n/a |
| 3.3 | If NO explain why. | Current management structure satisfactory |
| **4.** | **Consultation Process** |  |
| 4.1 | Was there external/internal consultation? | Yes |
| 4.2 | List groups/persons involved | Joint Staff Consultative Forum |
| 4.3 | Have external/internal comments been included? | Yes |
| 4.4 | If external/internal comments have not been included, state why. | n/a |
| **5.** | **Implementation** |  |
| 5.1 | How and to whom will the policy be distributed? | All employees via the intranet |
| 5.2 | If there are implementation requirements such as training please detail. | Ongoing via mandatory training |
| 5.3 | What is the cost of implementation and how will this be funded | No funding required |
| **6.** | **Monitoring** |  |
| 6.2 | How will this be monitored | Workforce Reports |
| 6.3 | Frequency of Monitoring | Quarterly |

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**DEFINITIONS**

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| **Term** | **Definition** |
| **Stress** | The Health and Safety Executive (HSE) define stress as follows;  ‘The adverse reaction people have to excessive pressures or types of demand placed on them’.  Stress is not an illness – it is a state. However, if stress becomes too excessive and prolonged, mental and physical illness may develop.  Well-designed, organised and managed work is generally good for us but when insufficient attention to job design, work organisation and management has taken place, it can result in **work related stress**. Work related stress develops because a person is unable to cope with the demands being placed on them. Stress, including work related stress, can be a significant cause of illness and is known to be linked with high levels of sickness absence, staff turnover and other issues such as more errors.  There is a difference between pressure and stress. Pressure can be positive and a motivating factor, and is often essential in a job. It can help us achieve our goals and perform better. Stress occurs when this pressure becomes excessive. Stress is a natural reaction to too much pressure.  A person can experience excessive pressure and demands outside work just as much as they can at work. Stress tends to build up over time because of a combination of factors that may not all be work related. Conflicting demands of work and home can cause excessive stress.’ |

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|  | **SECTION A – POLICY** |
| **1.** | **Policy Statement, Aims and Objectives** |
| **1.1** | NHS Sheffield Clinical Commissioning Group (CCG) is committed to supporting and protecting the health, safety and welfare of its employees. It is recognised that this duty of care extends to mental health as well as physical health and the organisation seeks to identify any sources of stress in the workplace and take action to reduce harmful stress. The organisation also recognises the impact that personal stress can have on employees at work. |
| **1.2** | This policy places emphasis on maintaining positive mental health and in particular recognises how, unless proper arrangements are in place, stress in the workplace can impact adversely on an individual’s performance and ultimately the delivery of organisational objectives. |
| **1.3** | This policy outlines the legislation relating to stress and the possible causes and symptoms of stress. |
| **1.4** | The development of this policy:   * Promotes a healthy and safe working environment and maintains a healthy workforce * Provides a procedure for managers to deal effectively with the management of stress in order to maintain acceptable standards of work and performance * Ensures that legal requirements are complied with as far as is reasonably practicable, promotes best practice, and aims to improve knowledge and skills in stress management. * Identifies as far as is reasonable practicable, workplace stressors, and provides guidance on conducting risk assessments to eliminate or reduce stress, or control the risks from stress. Risk assessments will be regularly reviewed. * Provides support and advice for effective stress management. * Ensures free and confidential counselling for employees affected by stress either caused by work or external factors is available. * Ensures a risk management process is in place to report principal risks to the organisation. |
| **2.** | **Legislation and Guidance** |
| **2.1** | Whilst there is no specific legislation on controlling stress at work, the Health and Safety Executive (HSE) have issued standards that can be used to assist in assessing risk and the management of work related stress issues. In addition:   * Employers have a duty under the Health and Safety at Work Act 1974 to ensure, so far as is reasonable practicable, that their workplaces are safe and healthy. * Under the Management of Health and Safety Regulations 1999 employers are obliged to assess the nature and scale of risks to health in their workplace and base their control measures on it. * Advice from the HSE states: ‘Ill health from workplace stress must be treated in the same way as ill health from other physical hazards. Employers have a legal duty to take reasonable care to ensure employees’ health is not placed at risk through excessive and sustained levels of stress arising from the way work is organised, the way people deal with each other at work or from the day to day demands of work’. * Working Time Regulations 1998 limit the working week to an average of 48 hours. However, a member of staff may under certain circumstances opt out of these arrangements but they must agree in writing to work more than the 48 hours. Employees are not encouraged to work beyond 48 hours in order to maintain an effective work life balance. * Illnesses such as depression or mental ill health will in certain circumstances secure protection under the Equality Act 2010 and as such reasonable adjustments to employment should be made to enable the employee to return to work. Further advice is contained in the Management of Sickness Absence Policy. * The organisation may be subject to legal proceedings should an employee suffer any detriment to their health due to work related stress and therefore is required to take a proactive approach to reduce the risk of work related stress. |
| **3.** | **Scope** |
| **3.1** | This policy applies to those members of staff that are directly employed by NHS Sheffield CCG and for whom NHS Sheffield CCG has legal responsibility. Seconded staff are covered by the policy of their employing organisation.  For those staff covered by a letter of authority / honorary contract or work experience, this policy is also applicable whilst undertaking duties on behalf of NHS Sheffield CCG or working on NHS Sheffield CCG premises and forms part of their arrangements with NHS Sheffield CCG.  As part of good employment practice, agency workers are also required to abide by NHS Sheffield CCG policies and procedures, as appropriate, to ensure their health, safety and welfare whilst undertaking work for NHS Sheffield CCG. |
| **4.** | **Accountabilities and Responsibilities** |
| **4.1** | Overall accountability for ensuring that there are systems and processes to effectively ensure compliance with this Policy lies with the Accountable Officer. Responsibility is delegated to the following:   |  |  | | --- | --- | | ***Accountable Officer*** | * Maintaining an overview of the corporate ratification and governance process associated with the policy. * Ensuring that the policy is applied fairly, consistently and in a non-discriminatory manner. * Ensuring significant risks highlighted through sickness absence monitoring or risk assessments are anonymised and recorded on the Risk Register. | | ***Directors*** | * Ensuring good communication between management and employees. * Ensuring employees are provided with meaningful development opportunities. * Ensuring workloads are monitored to ensure manageable workloads. * Ensuring deadlines are realistic. | | ***Human Resources*** | * Leading the development, implementation and review of the policy. * Providing advice and guidance to managers and employees in relation to this policy. * Advising managers when reference may need to be made to other employment policies * Offering support and advice to both managers and employees experiencing problems with stress. * Monitoring the reasons for sickness absence. * Ensuring the appropriate provision of training. * Encouraging referral to support services. | | ***Appointing Officers/ Line Managers*** | * Ensuring they understand and adhere to their obligations in relation to this policy. * Ensuring the policy is applied fairly and consistently to all employees. * Creating an open and honest environment to support employees who may come forward with concerns for themselves or others. * Identifying and responding effectively to employees with problems to endeavour to preserve and promote positive mental health and reduce negative stress. * Recognising and acting appropriately where an employee has symptoms which may indicate there is a problem. * Encouraging employees to discuss any problems and avail themselves of support available. * Ensuring regular 1:1 meetings with individual employees include a discussion on wellbeing. * Consideration of the impact on wellbeing of any decisions taken and where appropriate ensuring risk assessments are undertaken. Potential stressors may include changes in the physical environment, deployment of the workforce and the impact of new technology. * Identifying and responding effectively to employees with problems and recognising work situations that may lead to excessive stress levels. * Taking all reasonable steps to alleviate excessive stress. * Seeking advice from Human Resources as soon as possible when a cause for concern is raised or identified. * Referral of employees to Occupational Health/ Staff Counselling where appropriate. * Ensuring employees are aware of this policy including referring new employees to the policy as part of their induction process. | | ***All Employees*** | * Ensuring they understand their responsibilities in relation to this policy. * Taking personal responsibility for their own health, safety, well-being and performance at work. * Complying with their professional codes of conduct. * Awareness of their own range of feelings and reactions to stressful situations and their personal methods of coping. * Recognising the warning signs of excessive stress being suffered by colleagues. * Expressing their views to colleagues, managers and/ or Human Resources/ Trade Union representatives regarding potential work related stressors. * Seeking professional advice and support from an appropriate manager (which may include referral to Occupational Health Services) and/ or self-referral to Staff Counselling when unable to cope with excessive stress, whether generated by work or personal problems that are impacting on work. * Taking all reasonable steps to ensure that they do not cause unnecessary stress to others. | | ***Staff Side*** | * Ensuring they are familiar with the policy and procedure. * Advising and representing employees who are members of a recognised Trade Union. * Providing support for employees who are experiencing stress related problems. * Liaising with the employee, the line manager and Human Resources regarding the best way forward for an employee. | | ***Occupational Health*** | * Provision of clinical advice and support for managers and employees who identify potential problems in themselves or colleagues. * Provision of the appropriate level of confidential support to employees who self-refer or who are referred by their manager because of concerns about their well-being. * Promoting awareness of stress and encouraging early identification of individuals in need of help. | | ***Staff Counselling Service*** | * Providing a confidential counselling service for employees experiencing concerns with stress related issues. * Referral and/ or signposting to specialist agencies, as required. | |
| **5.** | **Dissemination, Training and Review** |
| **5.1** | **Dissemination** |
|  | The effective implementation of this policy will support openness and transparency. NHS Sheffield CCG will:   * Ensure all employees and stakeholders have access to a copy of this policy via the organisation’s website. * Ensure employees are notified by email of new or updated policies. * Ensure that relevant training programmes raise and sustain awareness of health and wellbeing. |
| **5.2** | **Training** |
|  | All employees will be offered relevant training commensurate with their duties and responsibilities. Employees requiring support should speak to their line manager in the first instance. Support may also be obtained through Human Resources. The Policy should be read in conjunction with:   * Management of Sickness Absence Policy * Health and Safety Policy * Special Leave Policy * Freedom to Speak Up (Whistleblowing) Policy |
| **5.3** | **Review** |
| **5.3.1** | As part of its development, this policy and its impact on staff, patients and the public has been reviewed in line with NHS Sheffield CCG’s Equality Duties. The purpose of the assessment is to identify and if possible remove any disproportionate adverse impact on employees, patients and the public on the grounds of the protected characteristics under the Equality Act. |
| **5.3.2** | The policy will be reviewed every three years, and in accordance with the following on an as and when required basis:   * Legislatives changes * Good practice guidelines * Case Law * Significant incidents reported * New vulnerabilities identified * Changes to organisational infrastructure * Changes in practice |
| **5.3.3** | Policy management will be performance monitored to ensure that policies are in-date and relevant to the core business of the organisation. The results will be published in the regular Governance Sub Committee Reports. |

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|  | **SECTION B – PROCEDURE** |
| **1.** | **Causes of Stress and Preventative Measures** |
| **1.1** | It is accepted that any job can cause stress and also that stress is not just about overwork as boredom and monotony can also be stressful. |
| **1.2** | The following table details the most common causes of stress and how they could be prevented.   |  |  | | --- | --- | | **Cause of Stress** | **Preventative Measure** | | Dealing with demanding clients of the public | Ensure employees are trained in conflict resolution and that they are fully supported by their line manager through regular one-to-one meetings. | | Financial cuts, organisational change and lack of job security | Ensure any organisational restructuring is done in partnership with staff side and in consultation with employees. Managers and HR will ensure the process followed has the minimum adverse effect on employees. | | Poor working conditions  (e.g. inadequate workstation/display screen equipment; challenging environment) | Where poor working conditions are identified Human Resources will arrange for a suitable workplace risk assessment to be conducted and advice will be sought on achieving safe working conditions. | | Threats of violence, harassment and bullying | Employees should be aware of the Dignity at Work (Prevention of Bullying and Harassment Policy) and early intervention and advice should be sought from an appropriate manager or Human Resources. | | Lack of childcare or flexibility | Where possible flexible working arrangements should be offered to staff who are struggling to manage child care or other caring responsibilities and work. Reference should be made to the Flexible Working Policy. | | Lack of control over work | Managers should have regular one-to-one meetings with employees and should aim to empower employees to manage their own workload. Where there are elements of work that may be outside of the employee’s control the manager should ensure the employee understands the reason for this and understands what is expected of them. | | Too demanding a job or too high a workload | If it becomes apparent that the employee is finding the job too demanding the manager should ensure that the employee is clear on what is expected and that they are given the appropriate training and development to undertake their role and have realistic objectives to achieve.  From time to time there will be peaks and troughs of work and the employee and the manager should work together to plan the workload. Where the workload is consistently high the manager may be required to assess the staffing levels within the department. | | Monotonous or boring work | Where possible the manager should include some variety of work. Some people enjoy work of a repetitive nature, others do not and the manager and the employee may need to have a discussion about the suitability of the role for the individual concerned. The Personal Development Review (PDR) process can be used to encourage and support the employee to develop their skills in order to move to an alternative role. | | Lack of Training | Managers should ensure that they enable the employee to access the appropriate training identified as part of the personal development plan. The individual should take responsibility for sourcing the training and may seek advice from Human Resources/ the Learning and Development and OD Manager. | | Excessive Hours | All employees should be aware of the Hours of Work policy. Where it is apparent an employee is working excessively the manager should discuss the reasons for this with the individual. | | Working in isolation | Managers should ensure that employees working in isolation are familiar with the arrangements for lone/home working and that everyone is included in team meetings and have regular one-to-one meetings, either in person or remotely, as appropriate.  It is recognised that working from home in particular can be both a supportive measure in managing stress and a cause of stress, depending on the circumstances. | | Working relationships | Managers should discuss working relationships as part of one-to-one meetings and ensure that issues that are raised are dealt with in a constructive and supportive manner. |   The above list is not exhaustive. |
| **1.3** | The HSE guidance identifies six risk factors linked with work related stress:   * **Demands:** issues like workload, work patterns and the work environment. * **Control:** how much say the person has in the way they do their work. * **Support:** includes the encouragement, sponsorship and resources provided by the organisation, line management and colleagues. * **Relationships:** includes promoting positive working to avoid conflict and dealing with unacceptable behaviour. * **Role:** whether people understand their role within the organisation and whether the organisation ensures that the person does not have conflicting roles and is adequately trained to carry out their role effectively. * **Change:** how organisational change is managed and communicated in the organisation.   Further information can be accessed via the HSE website. |
| **1.4** | For each of the hazards listed above managers should ask what action is already being taken, if it is enough and what more could be done. Control measures may include removing the risk altogether, reorganising the workload, considering short or long term flexible working options, providing clear guidelines and instructions to employees and offering support via Occupational Health/ Staff Counselling if appropriate. |
| **1.5** | There are a number of potential causes of personal stress that can effect employees including;    **Family**   * Death (of a loved one) * Divorce or separation from a partner * Marriage * Pregnancy * Holidays * Changes in health of a family member or close friend * Family relationships * Children leaving home * Childcare * Remarriage of a family member * Caring for other dependents, such as elderly relatives * Family reunion * Relationship breakdown or having a long-distance relationship   **Personal or social issues**   * Change in financial state, or debt or money worries * Changes in personal habits such as giving up smoking, going on a diet * Problems with weight * Experiencing prejudice or discrimination * Lack of friends or support * Personal injury or illness   **Daily hassles**   * Traffic jams * Public transport * Time pressures * Car troubles * Difficulties establishing a comfortable work/life balance   **Other**   * Moving house, including taking out a mortgage * Difficulties with neighbours * Living with someone with an alcohol, drug problem or other addiction. * (If studying) a deadline for coursework, exam results or trying to balance work and study * Unemployment * Poor living environment |
| **2.** | **Symptoms of Stress** |
| **2.1** | If an employee is experiencing stress they may begin to behave differently and show some of the following signs:   * Anxiety * Difficulties in relationships with others (at work or in their personal life) * Irritability and moodiness * Disturbed sleep * Headaches * Indigestion * Weight loss/gain * Skin rashes * Muscle fatigue particularly neck and shoulders * Raised blood pressure/rapid heartbeat * Increased use of alcohol, smoking or drugs |
|  | * Fall in performance, inability or reduced ability to cope with normal tasks and situations * Becoming accident prone * Forgetfulness * Poor timekeeping/lateness * Depression and general negative outlook * Loss of motivation, commitment or confidence * Increased emotional responses such as being tearful, sensitive or aggressive   **2.2** Other signs of stress in teams may include:   * Increased sickness absence * High turnover * Difficult relationships between colleagues * Poor team performance * Increased complaints or grievances |
| **2.3** | Without intervention, these symptoms can develop into serious long term health conditions. Managers could refer to the Management of Performance Policy and/or the Management of Sickness Absence Policy, as appropriate, for guidance on how to support individuals and to work with them to address any issues. Advice should be sought from Human Resources before any formal action is instigated. |
| **3.** | **Managing Identified Stress** |
| **3.1** | When cause for concern is identified either by an individual employee or by a manager, the manager should arrange to meet with the individual employee and should seek advice from Human Resources who may provide support at the meeting together with the employee’s Trade Union representative. Employees may wish to seek advice and support from their trade union representative at any time. |
| **3.2** | The purpose of the meeting will be to establish what the causes of the stress are, what symptoms are being experienced and how to support the individual to manage their symptoms, reduce and/ or remove the causal factors where possible, taking into account the preventative measures shown in the table in paragraph 1.2. |
| **3.3** | A stress risk assessment should be undertaken by the manager, supported by Human Resources or a Health, Safety and Security Specialist where necessary. The employee may also be supported by their Trade Union representative. Following the assessment, an action plan will be developed to address the areas of concern. |
| **3.4** | Where an individual indicates that stress is a causative factor, a referral to Occupational Health should be offered immediately. In all cases, the stress risk assessment report should be sent to Occupational Health with the referral. |
| **3.5** | Action plans should set out specific and measurable actions and outcomes and should be time limited. |
| **3.6** | Regular review meetings should be held with the individual until the achievement of the action plan and then managers should subsequently ensure as part of routine one-to-one meetings that any further problems are identified at the earliest possible opportunity and action is taken to prevent any escalation of symptoms. |

**4. Sources of Further Support**

**4.1** In addition to support from line managers and colleagues, anyone affected by stress may also wish to seek advice and guidance from

* Their trade union representative
* The employee assistance programme (EAP) helpline
* Mental Health First Aiders

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| **Appendix 1** |

**GUIDANCE ON HOW TO IMPLEMENT THE POLICY – FLOWCHART**

**How might an individual recognise stress in themselves?**

* Unable to concentrate or remember things
* Losing sleep through worrying
* Feeling anxious, irritable and/or depressed
* Feelings of panic
* More days off sick than usual
* Avoidance of social situations
* A colleague, manager, friend letting you know that you appear stressed

**How might a manager recognise stress in others?**

* Individual or someone else informs manager directly or expresses concerns about an individual
* Change of behaviour, such as moodiness, irritability, fall out with colleagues
* Pattern of frequent absence and/or poor timekeeping
* Individual working excessive hours/’overdoing it’
* Standard of work falls or deadlines not met
* Lack of motivation, appearance of fatigue

**Cause for concern identified**

**Appropriate Action for the Manager**

* Contact HR
* Arrange to meet with the individual
* Read through the Management of Stress Policy in preparation for the meeting
* Encourage the individual to seek support as outlined in the box opposite

**Appropriate Action for the Individual**

* Be aware of and take responsibility for own well being
* Seek support from within CCG, family and/or GP
* Seek advice and support from their trade union
* Arrange to meet with a manager/HR
* Prepare to be open about the factors creating the stress i.e. workload, role conflict, personal

**Discussion takes places between member of staff, manager and HR/trade unions, as appropriate**

* The manager is there to listen carefully to the individual and to understand the points being made
* During the meeting the manager will need to gather information, handle emotions, give and receive feedback, agree action
* Talk about the support that the individual is getting
* More than one meeting may be needed to give time for reflection
* Notes should be taken and retained

**Action Plan agreed between member of staff and manager. This may include:**

* Recognition that there is a situation which requires managing
* Commitment of both individual and manager to the plan
* Agreed specific actions with timescales
* Agreed sources of support for individual
* Agreed level of confidentiality as to who should be informed and by whom
* Agreed timescale for follow up meeting

**NHS Sheffield CCG Equality Impact Assessment**

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| **Title of policy or service** | Management of Stress Policy | |
| **Name and role of officers completing the assessment** | HR Manager | |
| **Date assessment started/completed** | April 2017 – reviewed 2020 |  |

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| **1. Outline** | |
| **Give a brief summary of your policy or service**   * Aims * Objectives * Links to other policies, including partners, national or regional | NHS Sheffield CCG is committed to supporting and protecting the health, safety and welfare of its employees. It is recognised that this duty of care extends mental health as well as physical health and the CCG seeks to identify any sources of stress in the workplace and take action to reduce harmful stress. |

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| **2. Gathering of Information**  This is the core of the analysis; what information do you have that indicates the policy or service might *impact on protected groups, with consideration of the General Equality Duty*. | | | | | |
|  | **What key impact have you identified?** | | | **What action do you need to take to address these issues?** | **What difference will this make?** |
| **Positive**  **Impact** | **Neutral**  **impact** | **Negative**  **impact** |
| **Human rights** |  |  |  |  |  |
| **Age** |  |  |  |  |  |
| **Carers** |  |  |  |  |  |
| **Disability** |  |  |  |  |  |
| **Sex** |  |  |  |  |  |
| **Race** |  |  |  |  |  |
| **Religion or belief** |  |  |  |  |  |
| **Sexual orientation** |  |  |  |  |  |
| **Gender reassignment** |  |  |  |  |  |
| **Pregnancy and maternity** |  |  |  |  |  |
| **Marriage and civil partnership** (only eliminating discrimination) |  |  |  |  |  |
| **Other relevant group** |  |  |  |  |  |

Please provide details on the actions you need to take below.

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| **3. Action plan** | | | | |
| **Issues identified** | **Actions required** | **How will you measure impact/progress** | **Timescale** | **Officer responsible** |
| None |  |  |  |  |
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| **4. Monitoring, Review and Publication** | | | |
| **When will the proposal be reviewed and by whom?** | **Every three years on policy review** | | |
| **Lead Officer** | **HR Manager** | **Review date:** | **July 2020** |