## Impact case study (REF3b)

**Institution:** The University of Nottingham  
**Unit of Assessment:** 3 Nursing  
**Title of case study:** Preventing psychosocial risks and work-related stress in Europe: Impact on policy and practice

### 1. Summary of the impact

Research by the University of Nottingham has played a leading role in developing national, international and industry guidance on practical approaches to tackling the problem of psychosocial risks in the workplace. The European Commission, the World Health Organisation, the Health and Safety Executive, major global corporations and small and medium-sized businesses have supported and adopted the frameworks and recommendations resulting from this work. In the UK alone the guidance is estimated to have contributed to a saving of almost £2bn over 10 years by helping to improve employees’ health and so reducing the costs associated with work-related illness.

### 2. Underpinning research

During the past 20 years a growing wealth of data has evidenced the negative health-related and economic impacts of psychosocial risks. These risks are associated with work organisation and management and include harassment and bullying. They affect workforces, organisations and wider society through the experience of work-related stress and have been shown to negatively impact on health and well-being through links to mental health problems, musculoskeletal disorders (MSDs) and cardiovascular disease. In the UK stress and MSDs account for two thirds of all work-related health problems, while in Europe work-related stress affects one in four workers at an estimated cost of 3-4% of European Union (EU) GDP.

The University of Nottingham has been at the forefront of research in this field since the early 1990s, when studies by Professor Tom Cox (Professor of Organisational Psychology, University of Nottingham, now Emeritus) and Professor Amanda Griffiths (Professor of Occupational Health Psychology, University of Nottingham, 1992 to present) spearheaded efforts to develop an evidence base for addressing the organisational causes of work-related stress. Cox and Griffiths set the problem within a risk-management framework while introducing the relevance of psychosocial hazards in the work environment. This resulted in a taxonomy of psychosocial risks and a risk-assessment methodology for interventions, the latter of which was incorporated in Health and Safety Executive (HSE) guidance for employers in 1999 and in the HSE’s Management Standards for tackling work-related stress in 2004. Building on these breakthroughs, the Engineering Employers’ Federation, an organisation representing 6,000 employers and a million workers in the UK manufacturing sector, commissioned Griffiths to develop a bespoke and user-friendly online tool, the Work Organisation Assessment Questionnaire, to help employers assess the risk of work-related stress and ill health and thus improve work design and organisation [1].

Since 2003, under the leadership of Dr Stavroula Leka (Associate Professor of Occupational Health Psychology, University of Nottingham, 2003 to present) and Dr Aditya Jain (Nottingham University Business School), the European and international scope of the work has grown, reflecting its position as the main research programme of the University’s Centre for Organisational Health and Development, a World Health Organisation Collaborating Centre in Occupational Health, led by Leka. Supported by the WHO, the International Labour Organisation and the European Commission (EC), further research led to the development of PRIMA-EF, a best-practice European framework for the management of psychosocial risks in the workplace [2], which was launched in 2008 and duly incorporated in WHO global guidance.

PRIMA-EF resulted from a comprehensive review of existing knowledge, policies and practices in psychosocial risk management and work-related stress prevention. Conducted via a number of studies [e.g. 3, 4, 5], the review used mixed methods (interviews, focus groups, case study analyses, surveys and secondary analyses of survey data) and involved a range of stakeholders, including policymakers, employers, trade unions, government institutions, professional associations, social security associations, standardisation bodies, experts, managers and employees. The framework consists of key policies, principles, stages, indicators and best-practice
interventions for implementation at organisational and policy level.

Expanding on their PRIMA-EF research, Leka and Jain subsequently presented the case for a voluntary standard for psychosocial risk management [6]. They argued that such a move would allow organisations to go beyond their legal obligations in light of a lack of clarity in legislative terminology and the minimum level of worker protection set by regulatory policies. This led to the development of Publicly Available Specification 1010, the first standard for the management of psychosocial risks in the workplace, in 2011.

3. References to the research

Publications:


Grants:

<table>
<thead>
<tr>
<th>Funding body</th>
<th>Investigators</th>
<th>Title</th>
<th>Dates</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. HSE</td>
<td>Cox &amp; Griffiths</td>
<td>Work Stress: Organisational Interventions</td>
<td>1995-1999</td>
<td>£250,000</td>
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<td>2. HSE, Royal College Nursing &amp; UNISON</td>
<td>Cox &amp; Griffiths</td>
<td>Work organisation interventions in NHS hospitals</td>
<td>1999-2001</td>
<td>£115,000</td>
</tr>
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<td>4. HSE</td>
<td>Cox &amp; Griffiths</td>
<td>Process Evaluation of Work-related Stress Interventions</td>
<td>2006-2008</td>
<td>£292,000</td>
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## Impact case study (REF3b)

<table>
<thead>
<tr>
<th>Research (FP6)</th>
<th>Description</th>
<th>Date</th>
<th>Cost (£)</th>
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<tr>
<td>7. EC Lifelong Learning Programme</td>
<td>Psychosocial risk management – Education and training in Europe</td>
<td>2009-2011</td>
<td>£330,000</td>
</tr>
<tr>
<td>8. European Agency for Safety &amp; Health at Work</td>
<td>Drivers, barriers and needs of European enterprises for the management of psychosocial risks in the workplace</td>
<td>2010–2012</td>
<td>£79,000</td>
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<tr>
<td>9. EC PROGRESS Programme</td>
<td>Mental health policy in Europe: Evaluation and recommendations</td>
<td>2013-2014</td>
<td>£336,326</td>
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Approx. TOTAL: €2,500,000

## 4. Details of the impact

Research by the University of Nottingham has played a major role in developing and informing practical approaches to prevent psychosocial risks and work-related stress. This guidance has helped to improve workers’ well-being and to significantly reduce the costs associated with employee ill health at national, international and industry levels.

The Health and Safety Executive’s Management Standards for tackling work-related stress are still based on the risk-assessment framework methodology originally developed by Cox and Griffiths. A recent evaluation by the HSE revealed that between 2001/2002 and 2010/2011 the number of self-reported new cases of work-related illness fell by 43,000 and the total number of cases by 69,000 – an overall reduction of 8.5%. According to HSE data, the five sectors specifically targeted with a view to adopting the Management Standards have fared “significantly better” than others in addressing psychosocial risks. The Management Standards website receives between 40,000 and 50,000 hits per month [a].

The economic benefits of the fall in cases of work-related stress have been considerable. HSE economists have estimated that on average the overall cost of a case of work-related ill health (to the individual, the NHS and the economy) is £16,000. Dr Colin Mackay, Principal Psychologist at the HSE’s Economic and Social Analysis Unit, has suggested that estimates of approximate cost savings of £1.1bn (for prevalence) and £688m (for incidence) between 2001/2002 and 2010/2011 might be viewed as “conservative” [b]. MacKay confirms that the Management Standards have now also been adopted in other European countries, including Italy [b].

Internationally, the PRIMA-EF framework that emerged from Leka, Cox and Jain’s EC-funded review of psychosocial risk management and work-related stress prevention knowledge, policies and practices was launched in 2008 [c]. Having been adopted and promoted by the World Health Organisation, the guidance is now available in 12 languages (English, French, Italian, German, Dutch, Polish, Finnish, Spanish, Portuguese, Greek, traditional Chinese and Japanese) through the WHO website (more than 60,000 hits) and the PRIMA-EF website (more than 30,000 hits). PRIMA-EF is a key element of the global WHO Healthy Workplaces Model, which was launched in 2010 and has been incorporated in the Global Plan of Action on Workers’ Health for the period 2008-2017 – adopted unanimously by the WHO’s 193 Member States [d].

The PRIMA-EF WHO guidance was also cited in the 2012 Senior Labour Inspectors’ Committee (SLIC) campaign on psychosocial risks. SLIC advises the EC on issues relating to the enforcement of EC law concerning health and safety at work. SLIC guidance uses the PRIMA-EF framework as part of its key resources for inspectors in Europe to apply good practice in addressing psychosocial risks [e].

In addition, the European Agency for Safety and Health at Work (EU-OSHA) used PRIMA-EF to inform its European Enterprise Survey on New and Emerging Risks (ESENER), which culminated in recommendations for policy and practice in psychosocial risk management. PRIMA eTraining...
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(PRIMA-eT), launched in six languages in 2012, is now being used to disseminate the outputs of the research programme to stakeholders and organisations across Europe, including all occupational health practitioners in Finland [f].

The research has also impacted widely across industry within the UK and internationally. Since 2008 more than 125 employers, including SMEs and large companies, have used the online Work Organisation Assessment Questionnaire developed by Griffiths for the Engineering Employers’ Federation (now the EEF). Many have also requested detailed follow-up analyses. Professor Sayeed Khan, the EEF’s Chief Medical Adviser, reports that the WOAQ has been “accepted by employers and employees as a constructive way to look at workplace stressors and begin a dialogue between management and staff to resolve any issues” [g] and that its dedicated website [h] is one of the organisation’s most popular.

In 2011 the British Standards Institution (BSI), a global independent business services organisation with over 80,000 customers in more than 120 countries, used PRIMA-EF to develop the first standard for the management of psychosocial risks in the workplace. Publicly Available Specification 1010 (PAS1010) was jointly developed with the involvement and support of the EU-OSHA, several European national health and safety institutions, the WHO, the European Trade Union Confederation, EEF and the HSE. The BSI reports that around 2,000 organisations worldwide, including sectoral and standardisation bodies, businesses and trade unions, have adopted the standard to date, with user feedback suggesting it has “filled a gap in occupational health and safety management systems”. PAS1010 was also used to inform the development of a new Canadian national standard for psychological health and safety in the workplace, launched in January 2013 [i].

Major industrial adopters of PRIMA-EF include Norwegian oil and gas company Statoil ASA, which has 21,000 employees in 36 countries. PRIMA-EF is implemented as corporate best practice and is valid globally across all business levels. By 2013 interventions to improve well-being in line with PRIMA-EF guidance had been implemented for 5,000 onshore and offshore employees, resulting in a 20% reduction in work-related stress levels. Around 100 professionals have also taken part in a related training programme. The company reports that managers regard PRIMA-EF as “a cost-effective and time-efficient method to pinpoint concrete and manageable aspects of work” [j].

5. Sources to corroborate the impact

a. Email from Health and Safety Executive regarding Management Standards website, June 26 2013
b. Statement from Principal Psychologist, Economic and Social Analysis Unit, Health and Safety Executive, September 11 2013
d. Statement from Technical Officer, Occupational Health, World Health Organisation, September 3 2013
e. Senior Labour Inspectors Committee campaign on psychosocial risks (see page 7 for PRIMA-EF citation)
f. Statement from Finnish Institute of Occupational Health, August 8 2013
g. Statement from Chief Medical Adviser, EEF, September 9 2013
h. EEF Work Organisation Assessment Questionnaire online tool
http://www.workorganisation.org.uk/
http://www.mentalhealthcommission.ca/English/Pages/workplace_guide.aspx
j. Statement from Leader, Psychosocial Work Environment, Statoil ASA, August 30 2013